

December 7, 2006

**Service Request 81761
2007 W4/DE4 Template**

Objective:

To update the PPS online W4/DE4 template for calendar year 2007

Project Type:

Update the W4/DE4 template to correspond to the effective date of online tax withholding allowance transactions.

Requested By:

Payroll Coordination and Tax Services

Analyst:

Kathy Henmi

Due Date:

January 15, 2007

FORM W-4/DE4

ATTACHMENT TO SERVICE REQUEST #81761
December 7, 2006

The Payroll/Personnel System (PPS) contains a template of the 2006 W-4/DE4 form for tax withholding. The template needs to be changed for transactions that are processed for the year 2007.

Process:

Data elements: EDB 0338 - W-4 Process Date
 EDB 0339 - DE4 Process Date

The process date is tied to the year of the template. If the process date = 1/1/07 or later, then the 2007 template is to be used.

See attached sample of form.

Implementation: Must be implemented for the 2007 calendar year.

NAME (LAST, FIRST, MIDDLE) EMPLOYEE NUMBER
 PRESIDENT, EXEC 000000001
 HOME ADDRESS (NUMBER & STREET OR RURAL ROUTE) SOCIAL SECURITY NBR BIRTHDATE
 1440 FILLMORE STREET 552-14-2011 02/01/45
 CITY OR TOWN, STATE AND ZIP CODE If your name differs from that on
 your social security card, check
 here. You must call 1-800-772-1213
 SAN FRANCISCO CA 94115 for a new card __

I. FEDERAL TAX FILING STATUS AND ALLOWANCES

1. Marital Status (Note: If married, but legally separated, or spouse is a nonresident alien, enter "S" for single.) Enter only one code: S, Single or Married but wish to withhold at higher single rate, or M, Married M
2. Personal Allowances - Total number of allowances you are claiming (see yellow worksheets). If you are claiming exemption from Federal tax withholding, complete Section III below. 010*

II. STATE TAX FILING STATUS AND ALLOWANCES

1. Marital Status Enter only one code: S, Single or Married (with two or more incomes), M, Married (one income), H, Head of Household M
2. Regular Withholding Allowances - Number of allowances you are claiming for this job from Worksheet A, Regular Withholding Allowance (see green worksheets). OR
 If you are exempt from California income tax because you are a nonresident of the State of California and are earning compensation while located outside the State, enter 997 in the box to the far right. 004*
 Complete and attach the Out-of-State Withholding form, UPAY830.
3. Additional Withholding Allowances-Number of allowances from Worksheet B, Estimated Deductions (see green worksheets). 004*

III. EXEMPTION FROM TAX WITHHOLDING (NONRESIDENT ALIENS--DO NOT COMPLETE THIS SECTION)

I claim exemption from Federal and State withholding for 2007 and I certify that I meet BOTH of the following conditions for exemption:

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1. Last year I had a right to a refund of ALL Federal income tax withheld because I had NO tax liability; AND:
2. This year I expect a refund of ALL income tax withheld because I expect to have NO tax liability. (If you claim exemption from withholding, it will automatically expire on February 15 of next year unless you file a new UC W-4/DE4 on or before February 15, of next year.)

If you meet BOTH conditions, enter "EXEMPT" here _____

IV. ADDITIONAL TAX WITHHOLDING Additional amount, if any, you want deducted each month. Completion of this section is optional. NONRESIDENT ALIENS--REFER TO INSTRUCTIONS ON BACK OF THIS PAGE.

1. ADDITIONAL FEDERAL TAX WITHHOLDING (Enter additional MONTHLY amount in box to far right OR to Cancel additional amount, enter "*" in box to far right.) 100.00*
 CHECK APPROPRIATE BOX--> __NEW __CHANGE __CANCEL

2. ADDITIONAL STATE TAX WITHHOLDING (Enter additional MONTHLY amount in box to far right OR to Cancel additional amount, enter "*" in the box to far right.) 50.00*
CHECK APPROPRIATE BOX--> NEW CHANGE CANCEL

Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.

CERTIFICATION: Under penalties of perjury, I certify that the number of withholding allowances claimed on this certificate does not exceed the number to which I am entitled or, if claiming exemption from withholding, that I am entitled to claim the exempt status. I declare that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.

EMPLOYEE'S SIGNATURE: PPS01/05/07PAYJXQ

PROCESS DATE: 01/05/07

EMPLOYER'S CERTIFICATION: To the best of the University's knowledge, this electronic form W-4/DE4 was filed by the named employee: OR an original paper form is on file in the Office of Record.

* Indicates changed data

RETN 3 YEARS AFTER EMPLOYEE TERMINATES

**FOR PRIVACY NOTIFICATIONS SEE REVERSE SIDE OF THIS PAGE

**THIS IS AN ELECTRONIC VERSION OF THE FIRST PAGE OF FORM UC W-4/DE4. REFERENCE TO INSTRUCTIONS, WORKSHEETS, OR PRIVACY NOTIFICATIONS INDICATED ON THIS ELECTRONIC FORM MAY BE OBTAINED FROM THE ACTUAL PAPER FORM BY CONTACTING YOUR DEPARTMENTAL ASSISTANT OR PAYROLL OFFICE.