

EMPLOYMENT DOCUMENTS PACKET

Camp Sonrise is thrilled to have you as an employee. But to make it official, there are some government forms that must be completed.

IMPORTANT:

- These documents only need to be completed by those who will be PAID EMPLOYEES of Camp Sonrise. CIT's and volunteers should not fill these out.
- These documents only need to be completed once for as long as you are employed by Camp Sonrise (for years).
- However, if you ever want to make any changes to your W-4 withholdings, you would need to fill out a new W-4.
- The items listed below must be brought to the Finance Office at South Lancaster Academy.

CHECKLIST: The items you need to bring to the SLA Finance Office:
Completed Work Permit
Completed Form W-4
Completed Form I-9
State-Issued I D

WORK PERMIT

Instructions

- 1. Print the work permit application (included in this packet)
- 2. Take it to South Lancaster Academy, and the treasurer of will complete the "Promise of Employment" section.
- 3. If you are age 14–15, your doctor must complete the "Physician's Certificate of Health" section. If you're ages 16-17, you can skip this part.
- 4. Your legal guardians sign their section, and you, as the applicant, sign at the bottom.
- 5. Bring the completed application, and proof of your age (birth certificate, state issued ID, passport, or immigration record) to the school superintendent in the appropriate public school district where you live (or to the public school you attend) in order to get your work permit.
- 6. Once you get your work permit from the public school superintendent, take it to the Finance Office of South Lancaster Academy.

NOTE: If you work for Camp Sonrise next summer, you do not have to get a new work permit. This permit continues to allow you to work for Camp Sonrise until you turn 18, then you no longer need work permits.



Employment Permit Application for 14 through 17 Year-Olds

Instructions: After completing the form and obtaining the required signatures as indicated, take this completed form to the Superintendent of Schools, or the person your school (including a charter school) has authorized to issue work permits, in the school district where you live or attend school. You should bring with you proof of your age, such as your birth certificate, passport, or immigration record. The Superintendent, or the person your school (including a charter school) has authorized to issue work permits, will then issue you an Employment Permit.

Bring the signed work permit back to your employer who must keep it until you leave the job.

Questions about this application should be directed to the Department of Labor Standards at (617) 626-6952.

If you are under 18 years of age, you must obtain a work permit before starting a new job. G.L. c. 149, §§86-89. The following are the steps you should take; please note that a Physicians Certificate of Health is required only of 14 and 15 year-olds.

Steps for Getting an Employment Permit

- 1. Obtain a job offer from an employer.
- 2. Ask the employer to complete the following section:

Promise of Employment

Name of Minor:	
Name of Employer:	
Business Address:	
Job Title & Primary Duties:	
Number of Hours per day Minor is to be Employed:	
The undersigned agrees to employ this minor as stated	above and in compliance with state law.
A summary of laws governing minors' hours of wor	k and hazardous occupations can be
found at the end of this application form.	
Signature of Employer or Authorized Agent	Date

NOTE: If the minor seeking an employment permit resides outside of Massachusetts, the minor should obtain a work permit from the superintendent of schools in the city/town in Massachusetts where the minor is to be employed.

¹ Minors who are 17 years of age, who can show documented proof of a high school diploma or the equivalent to the school official authorized to issue work permits, do not need a signed work permit, but must still complete this permit application.

3. For 14 and 15 year-olds only (16 and 17 year-olds may skip this step): Ask your doctor to complete the following section:

Note: The following Certificate of Health must be signed **within 12 months** of the date this application is presented to the school official issuing the permit.

Physician's Certificate of Health

I hereby certify that I have made a thorough named 14 or 15 year-old minor:	h physical examination of the following
and that, in my opinion, said minor is in sufficiently perform the work indicated above. A summary of and hazardous occupations can be found at the	f laws governing minors' hours of work
Signature of Physician	Date
4. Ask your parent, guardian, or custodian to sign	below.
I hereby approve the issuance of a permit for the w governing minors' hours of work and hazardou this application form.	· · · · · · · · · · · · · · · · · · ·
Name of Parent, Guardian, or Custodian	<u> </u>
Signature of Parent, Guardian, or Custodian	Date
5. Sign this application below:	
Signature of Minor	Date

Summary of Massachusetts² Laws Regulating Minors' Work Hours and Occupation Restrictions

Prohibited Jobs (Hazardous Orders)

Persons under 14 may not work: There are a few exceptions to this such as working as news carriers, on farms, and in entertainment (with a special permit).

Persons under 16 years old may *NOT*:

- Operate, clean or repair power-driven machinery (except office machines or machines in retail or food service not otherwise prohibited)
- Cook (except on electric or gas grills that do not have open flames)
- Operate fryolators, rotisseries, NEICO broilers, or pressure cookers
- Operate, clean or repair power-driven food slicers, grinders, choppers, processors, cutters and mixers
- Perform any baking activities
- Operate microwave ovens (except to heat food in microwave ovens with a maximum capacity of 140 degrees Fahrenheit)
- Clean kitchen surfaces that are hotter than 100 degrees Fahrenheit
- Filter, transport, or dispose of cooking oil or grease hotter than 100 degrees Fahrenheit
- Work in freezers or meat coolers
- Work in a manufacturing facility or occupation (e.g., in a factory, as an assembler)
- Work on ladders, scaffolds or their substitutes
- Work in garages, except dispensing gas and oil
- Work in brick or lumber yards
- Work in amusement places (e.g., pool or billiard room, or bowling alley)
- Work in barber shops
- Work in construction, transportation, communications, or public utilities (except doing clerical work away from heavy machinery off the job-site)
- Work in warehouses (except doing clerical work)
- Load or unload trucks, railroad cars, or conveyors
- Ride in or on a motor vehicle (except in a passenger seat wearing a seatbelt)
- Wash windows in public or commercial buildings if the window sill is more than 10 feet above the ground

² This is a compilation of state and federal child labor laws. The most protective laws are presented here and apply to all employers of teens including parents who may employ their children. There are additional regulations in this area not summarized here and some exceptions for employers in agricultural industries. Questions about the state child labor laws should be directed to the Massachusetts Office of the Attorney General, Fair Labor and Business Practices Division (617-727-3465). Questions about federal child labor laws should be directed to the U.S. Department of Labor, Wage and Hour Division (617-624-6700).

- Work doing laundry in a commercial laundry or dry cleaning establishment
- Work as a public messenger
- Work at processing operations (e.g., in meat, fish, or poultry processing or cracking nuts, bulk or mass mailing)
- Work around boilers or in engine rooms
- Do industrial homework
- Work with dangerous electrical machinery or appliances
- Work that is determined by the Massachusetts Attorney General to be dangerous to the health and well-being of minors
- Work in any of the occupations or tasks prohibited for persons under age 18

Persons under 18 years old may *NOT*:

- Drive a vehicle, forklift or work assist vehicle (except golf carts in certain circumstances)
- Ride as a passenger in a forklift
- Operate, clean or repair power-driven meat slicers, grinders or choppers
- Operate, clean or repair power-driven bakery machines (except for certain countertop models and pizza dough rollers)
- Work 30 feet or more above ground or water
- Handle, serve, or sell alcoholic beverages
- Use circular or band saws, guillotine shears, wood chippers, or abrasive cutting discs
- Use power-driven woodworking machines
- Use, service, drive or work from hoisting machines
- Operate or load power-driven paper balers, compactors, or other power-driven paper processing machines
- Use power-driven metal-forming, punching, or shearing machines
- Use buffing or polishing equipment
- Manufacture brick, tile, or kindred products
- Manufacture or store explosives
- Work in excavation, wrecking, demolition, or shipbreaking
- Work in forest fire fighting, forest fire prevention, timber track operations or forestry service
- Work in logging, sawmilling, or mining
- Work slaughtering, packing, or processing meat or poultry
- Work in railway operations
- Work in roofing or on or about a roof
- Work in foundries or around blast furnaces
- Work manufacturing phosphorus or phosphorus matches
- Work where they are exposed to radioactive substances
- Work as a firefighter or engineer on a boat
- Oil or clean hazardous machinery in motion
- Work in any job requiring the possession or use of a firearm*

Tasks not specifically permitted by the US DOL Secretary of Labor are prohibited. Legal Work Hours for Teens in Massachusetts

Note: After 8:00 p.m., all minors must have the direct and immediate supervision of an adult supervisor who is located in the workplace and is reasonably accessible to the minor, unless the minor works at a kiosk, cart or stand in the common area of an enclosed shopping mall that has security from 8:00 p.m. until the mall is closed to the public.*

14 and 15 Year Olds Work Hours

Only between 7 a.m. and 7 p.m. during the school year Not during school hours
Only between 7 a.m. and 9 p.m. during the summer (from July 1 through Labor Day)

Maximum Hours When School Is in Session

18 hours a week 3 hours a day on school days 8 hours a day Saturday, Sunday, holidays 6 days a week

Maximum Hours When School Is Not in Session

40 hours a week 8 hours a day 6 days a week

16 and 17 Year Olds

Work Hours*

Only between 6 a.m. and 10 p.m. (on nights preceding a regularly scheduled school day) – if the establishment stops serving clients or customers at 10:00 p.m., the minor may be employed until 10:15 p.m.

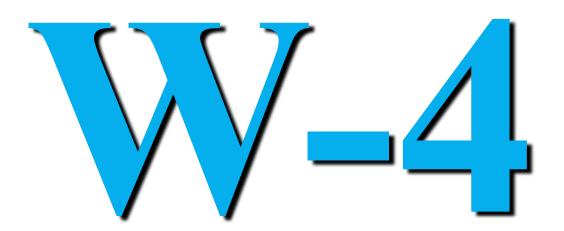
Only between 6 a.m. and 11:30 p.m. (on nights <u>not</u> preceding a regularly scheduled school day). <u>Exception for restaurants and racetracks</u>: only between 6 a.m. and 12:00 midnight (on nights <u>not</u> preceding a regularly scheduled school day).

Maximum Hours of Work - Whether or Not School is in Session

48 hours a week 9 hours a day 6 days a week

^{*} Indicates a change MA Child Labor Laws, effective date January 3, 2007.

Form





Employee's Withholding Certificate

► Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. ► Give Form W-4 to your employer.

OMB No. 1545-0074

Department of the Treasury ► Your withholding is subject to review by the IRS. Internal Revenue Service (a) First name and middle initial Last name (b) Social security number Step 1: **Enter** Address ▶ Does your name match the Personal name on your social security card? If not, to ensure you get Information City or town, state, and ZIP code credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov. Single or Married filing separately Married filing jointly (or Qualifying widow(er)) Head of household (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.) Complete Steps 2-4 ONLY if they apply to you; otherwise, skip to Step 5. See page 2 for more information on each step, who can claim exemption from withholding, when to use the online estimator, and privacy. Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse Step 2: also works. The correct amount of withholding depends on income earned from all of these jobs. **Multiple Jobs** or Spouse Do only one of the following. Works (a) Use the estimator at www.irs.gov/W4App for most accurate withholding for this step (and Steps 3-4); or (b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; or (c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld TIP: To be accurate, submit a 2020 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator. Complete Steps 3-4(b) on Form W-4 for only ONE of these jobs. Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3-4(b) on the Form W-4 for the highest paying job.) Step 3: If your income will be \$200,000 or less (\$400,000 or less if married filing jointly): Claim Multiply the number of qualifying children under age 17 by \$2,000 ▶ \$ **Dependents** Multiply the number of other dependents by \$500 Add the amounts above and enter the total here . . . \$ 3 Step 4 (a) Other income (not from jobs). If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may (optional): 4(a) \$ Other **Adjustments** (b) Deductions. If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here 4(b) |\$ (c) Extra withholding. Enter any additional tax you want withheld each pay period 4(c) |\$ Step 5: Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete. Sign Here Employee's signature (This form is not valid unless you sign it.) Date **Employers** Employer's name and address First date of Employer identification employment number (EIN)

Only

Form W-4 (2020) Page **2**

General Instructions

Future Developments

For the latest information about developments related to Form W-4, such as legislation enacted after it was published, go to www.irs.gov/FormW4.

Purpose of Form

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. If too little is withheld, you will generally owe tax when you file your tax return and may owe a penalty. If too much is withheld, you will generally be due a refund. Complete a new Form W-4 when changes to your personal or financial situation would change the entries on the form. For more information on withholding and when you must furnish a new Form W-4, see Pub. 505.

Exemption from withholding. You may claim exemption from withholding for 2020 if you meet both of the following conditions: you had no federal income tax liability in 2019 and you expect to have no federal income tax liability in 2020. You had no federal income tax liability in 2019 if (1) your total tax on line 16 on your 2019 Form 1040 or 1040-SR is zero (or less than the sum of lines 18a, 18b, and 18c), or (2) you were not required to file a return because your income was below the filing threshold for your correct filing status. If you claim exemption, you will have no income tax withheld from your paycheck and may owe taxes and penalties when you file your 2020 tax return. To claim exemption from withholding, certify that you meet both of the conditions above by writing "Exempt" on Form W-4 in the space below Step 4(c). Then, complete Steps 1(a), 1(b), and 5. Do not complete any other steps. You will need to submit a new Form W-4 by February 16, 2021.

Your privacy. If you prefer to limit information provided in Steps 2 through 4, use the online estimator, which will also increase accuracy.

As an alternative to the estimator: if you have concerns with Step 2(c), you may choose Step 2(b); if you have concerns with Step 4(a), you may enter an additional amount you want withheld per pay period in Step 4(c). If this is the only job in your household, you may instead check the box in Step 2(c), which will increase your withholding and significantly reduce your paycheck (often by thousands of dollars over the year).

When to use the estimator. Consider using the estimator at *www.irs.gov/W4App* if you:

- 1. Expect to work only part of the year;
- 2. Have dividend or capital gain income, or are subject to additional taxes, such as the additional Medicare tax;
- 3. Have self-employment income (see below); or
- Prefer the most accurate withholding for multiple job situations.

Self-employment. Generally, you will owe both income and self-employment taxes on any self-employment income you receive separate from the wages you receive as an employee. If you want to pay these taxes through withholding from your wages, use the estimator at www.irs.gov/W4App to figure the amount to have withheld.

Nonresident alien. If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Specific Instructions

Step 1(c). Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

Step 2. Use this step if you (1) have more than one job at the same time, or (2) are married filing jointly and you and your spouse both work.

Option (a) most accurately calculates the additional tax you need to have withheld, while option (b) does so with a little less accuracy.

If you (and your spouse) have a total of only two jobs, you may instead check the box in option (c). The box must also be checked on the Form W-4 for the other job. If the box is checked, the standard deduction and tax brackets will be cut in half for each job to calculate withholding. This option is roughly accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld, and this extra amount will be larger the greater the difference in pay is between the two jobs.



Multiple jobs. Complete Steps 3 through 4(b) on only one Form W-4. Withholding will be most accurate if you do this on the Form W-4 for the highest paying job.

Step 3. Step 3 of Form W-4 provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, the child must be under age 17 as of December 31, must be your dependent who generally lives with you for more than half the year, and must have the required social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 972, Child Tax Credit and Credit for Other Dependents. You can also include other tax credits in this step, such as education tax credits and the foreign tax credit. To do so, add an estimate of the amount for the year to your credits for dependents and enter the total amount in Step 3. Including these credits will increase your paycheck and reduce the amount of any refund you may receive when you file your tax return.

Step 4 (optional).

Step 4(a). Enter in this step the total of your other estimated income for the year, if any. You shouldn't include income from any jobs or self-employment. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than having tax on other income withheld from your paycheck, see Form 1040-ES, Estimated Tax for Individuals.

Step 4(b). Enter in this step the amount from the Deductions Worksheet, line 5, if you expect to claim deductions other than the basic standard deduction on your 2020 tax return and want to reduce your withholding to account for these deductions. This includes both itemized deductions and other deductions such as for student loan interest and IRAs.

Step 4(c). Enter in this step any additional tax you want withheld from your pay each pay period, including any amounts from the Multiple Jobs Worksheet, line 4. Entering an amount here will reduce your paycheck and will either increase your refund or reduce any amount of tax that you owe.

Form W-4 (2020)

Step 2(b) – Multiple Jobs Worksheet (Keep for your records.)



If you choose the option in Step 2(b) on Form W-4, complete this worksheet (which calculates the total extra tax for all jobs) on **only ONE** Form W-4. Withholding will be most accurate if you complete the worksheet and enter the result on the Form W-4 for the highest paying job.

Note: If more than one job has annual wages of more than \$120,000 or there are more than three jobs, see Pub. 505 for additional tables; or, you can use the online withholding estimator at www.irs.gov/W4App.

1	Two jobs. If you have two jobs or you're married filing jointly and you and your spouse each have one job, find the amount from the appropriate table on page 4. Using the "Higher Paying Job" row and the "Lower Paying Job" column, find the value at the intersection of the two household salaries and enter that value on line 1. Then, skip to line 3	1	\$
2	Three jobs. If you and/or your spouse have three jobs at the same time, complete lines 2a, 2b, and 2c below. Otherwise, skip to line 3.		
	a Find the amount from the appropriate table on page 4 using the annual wages from the highest paying job in the "Higher Paying Job" row and the annual wages for your next highest paying job in the "Lower Paying Job" column. Find the value at the intersection of the two household salaries and enter that value on line 2a	2 a	\$
	b Add the annual wages of the two highest paying jobs from line 2a together and use the total as the wages in the "Higher Paying Job" row and use the annual wages for your third job in the "Lower Paying Job" column to find the amount from the appropriate table on page 4 and enter this amount on line 2b	2b	\$
	c Add the amounts from lines 2a and 2b and enter the result on line 2c	2c	\$
			Ψ
3	Enter the number of pay periods per year for the highest paying job. For example, if that job pays weekly, enter 52; if it pays every other week, enter 26; if it pays monthly, enter 12, etc	3	
4	Divide the annual amount on line 1 or line 2c by the number of pay periods on line 3. Enter this amount here and in Step 4(c) of Form W-4 for the highest paying job (along with any other additional amount you want withheld)	4	\$
	Step 4(b) - Deductions Worksheet (Keep for your records.)		<i>#</i>
1	Enter an estimate of your 2020 itemized deductions (from Schedule A (Form 1040 or 1040-SR)). Such deductions may include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 7.5% of your income	1	\$
2	Enter: • \$24,800 if you're married filing jointly or qualifying widow(er) • \$18,650 if you're head of household • \$12,400 if you're single or married filing separately	2	\$
3	If line 1 is greater than line 2, subtract line 2 from line 1. If line 2 is greater than line 1, enter "-0-"	3	\$
4	Enter an estimate of your student loan interest, deductible IRA contributions, and certain other adjustments (from Part II of Schedule 1 (Form 1040 or 1040-SR)). See Pub. 505 for more information	4	\$
5	Add lines 3 and 4. Enter the result here and in Step 4(b) of Form W-4	5	\$

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person with no other entries on the form; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

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180,000	\$60,000 - 69,999	1,020	2,220	3,050	3,440	4,570	5,570	6,570	7,570	8,570	9,570	10,220	10,220
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\$80,000 - 99,999		,				1	1	1				1	1
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\$125,000 - 149,999		•	1			1	1	•	1	1	1	1	1
\$150,000 - 174,999						1	1	1	1	1	1 '	1	1
\$175,000 - 199,999	· · · · · ·	•					<u> </u>			 	<u> </u>	 	
\$200,000 - 249,999		•				1	1	•	1		1	1	1
\$250,000 - 399,999				1 '		1	1	1	1	1	1	1	1
Higher Paying Job Annual Taxable \$0 - \$10,000 - \$20,000 - \$30,000 - \$40,000 - \$50,000 - \$60,000 - \$70,000 - \$80,000 - \$90,999 \$109,999 \$100,000 -	\$250,000 - 399,999	2,970	5,860	+		12,840	14,540	15,840	17,140	18,440	19,730	20,830	
Head of Household Higher Paying Job Surphy	\$400,000 - 449,999	2,970	5,860	8,240	10,540	12,840	14,540	15,840	17,140	18,450	19,940	21,240	22,540
Higher Paying Job Solution	\$450,000 and over	3,140	6,230	8,810	11,310	13,810	15,710	17,210	18,710	20,210	21,700	23,000	24,300
Annual Taxable Wage & Salary \$0 - 19,999 \$10,000 - 29,999 \$30,000 - 39,999 \$40,000 - 59,999 \$60,000 - 69,999 \$70,000 - 890,000 - 109,999 \$100,000 - 120,000 \$100,000 - 199,999 \$80,000 - 99,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 100,999 \$100,													
Wage & Salary 9,999 19,999 29,999 39,999 49,999 59,999 69,999 79,999 89,999 99,999 109,999 120,000 \$0 - 9,999 \$0 \$830 \$930 \$1,020 \$1,020 \$1,480 \$1,870 \$1,870 \$1,930 \$2,040 \$2,040 \$10,000 - 19,999 830 1,920 2,130 2,220 2,220 2,680 3,680 4,070 4,130 4,330 4,440 4,440 \$20,000 - 29,999 930 2,130 2,350 2,430 2,900 3,900 4,900 5,340 5,540 5,740 5,850 5,850 \$30,000 - 39,999 1,020 2,220 2,430 2,980 3,980 4,980 6,040 6,630 6,830 7,030 7,140 7,140 \$40,000 - 59,999 1,020 2,530 3,750 4,830 5,860 7,060 8,260 8,850 9,050 9,250 9,360 9,360 \$80,000 - 79,999 1,970													
\$10,000 - 19,999					,								
\$20,000 - 29,999			1	1	1	1	' '	•	1	1		1 ' '	1
\$30,000 - 39,999			1		1	1		•	1	1	1	1	1
\$40,000 - 59,999							 	+		 			
\$60,000 - 79,999		•	1	1		1	•	•	1	1	1	1	1
\$80,000 - 99,999			1			1	1	1	1	•		1	1
\$100,000 - 124,999								+					
\$125,000 - 149,999		•		1		1	•	•	1	1	1	1	1
\$150,000 - 174,999		•				1	•	•	1	1	1	1	1
\$175,000 - 199,999	-	•					 	+		 			
\$200,000 - 249,999 2,970 6,470 8,990 11,370 13,670 15,970 18,270 19,960 21,260 22,560 23,770 24,870 \$250,000 - 349,999 2,970 6,470 8,990 11,370 13,670 15,970 18,270 19,960 21,260 22,560 23,770 24,870 \$350,000 - 449,999 2,970 6,470 8,990 11,370 13,670 15,970 18,270 19,960 21,260 22,560 23,770 24,870 \$350,000 - 449,999 2,970 6,470 8,990 11,370 13,670 15,970 18,270 19,960 21,260 22,560 23,700 25,200		•	1	1		1	1	•	1	1	1	1	1
\$250,000 - 349,999			1			1	1	•	1	1	1	1	1
\$350,000 - 449,999 2,970 6,470 8,990 11,370 13,670 15,970 18,270 19,960 21,260 22,560 23,900 25,200		•			· ·								
			1		1	1	1	1	1	1	1	1	1
	\$450,000 and over		6,840	9,560	12,140	14,640	17,140	1	1	1	1	25,940	1

Form One





Employment Eligibility Verification

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No. 1615-0047 Expires 10/31/2022

▶ START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information than the first day of employment, but not			ist complete and	d sign Se	ection 1 o	f Form I-9 no later		
Last Name (Family Name)	First Name (Given Name) Middle Initial C			Other L	Other Last Names Used (if any)			
Address (Street Number and Name)	Address (Street Number and Name) Apt. Number City or Town					ZIP Code		
Date of Birth (mm/dd/yyyy) U.S. Social Security Number Employee's E-mail Address						Employee's Telephone Number		
I am aware that federal law provides for connection with the completion of this f	form.			or use of	false do	ocuments in		
I attest, under penalty of perjury, that I a	am (check one of the	e following box	es):					
1. A citizen of the United States								
2. A noncitizen national of the United States	(See instructions)							
3. A lawful permanent resident (Alien Reg	gistration Number/USCI	S Number):						
4. An alien authorized to work until (expira	• • • • • • • • • • • • • • • • • • • •			_				
Some aliens may write "N/A" in the expira	•	,	=		Q	R Code - Section 1		
Aliens authorized to work must provide only on An Alien Registration Number/USCIS Number	•		,			ot Write In This Space		
Alien Registration Number/USCIS Number: OR								
2. Form I-94 Admission Number: OR								
3. Foreign Passport Number:								
Country of Issuance:								
Signature of Employee			Today's Date	e (mm/dd/	<i>(</i> уууу)			
Preparer and/or Translator Certif I did not use a preparer or translator. (Fields below must be completed and signature of the complete of t	A preparer(s) and/or tra ed when preparers ar	anslator(s) assisted and/or translators	assist an emplo	oyee in c	ompleting	g Section 1.)		
I attest, under penalty of perjury, that I h knowledge the information is true and c	orrect.	completion of a	Section 1 of thi	is form a	and that i	to the best of my		
Signature of Preparer or Translator				Today's E	Date (mm/d	dd/yyyy)		
Last Name (Family Name)		First Nam	ne (Given Name)					
Address (Street Number and Name)		City or Town			State	ZIP Code		

ST0F

Employer Completes Next Page

STOP

Form I-9 10/21/2019 Page 1 of 3



Employment Eligibility Verification Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No. 1615-0047 Expires 10/31/2022

Section 2. Employer or Authorized Representative Review and Verification (Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents.") Last Name (Family Name) M.I. First Name (Given Name) Citizenship/Immigration Status **Employee Info from Section 1** OR I ist A List B **AND** List C Identity **Identity and Employment Authorization Employment Authorization** Document Title Document Title Document Title Issuing Authority Issuing Authority Issuing Authority Document Number **Document Number** Document Number Expiration Date (if any) (mm/dd/yyyy) Expiration Date (if any) (mm/dd/yyyy) Expiration Date (if any) (mm/dd/yyyy) **Document Title** QR Code - Sections 2 & 3 Additional Information Issuing Authority Do Not Write In This Space Document Number Expiration Date (if any) (mm/dd/yyyy) **Document Title** Issuing Authority Document Number Expiration Date (if any) (mm/dd/yyyy) Certification: I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States. The employee's first day of employment (mm/dd/yyyy): (See instructions for exemptions) Signature of Employer or Authorized Representative Today's Date (mm/dd/yyyy) Title of Employer or Authorized Representative Last Name of Employer or Authorized Representative First Name of Employer or Authorized Representative Employer's Business or Organization Name State Employer's Business or Organization Address (Street Number and Name) City or Town ZIP Code Section 3. Reverification and Rehires (To be completed and signed by employer or authorized representative.) B. Date of Rehire (if applicable) A. New Name (if applicable) Last Name (Family Name) Middle Initial Date (mm/dd/yyyy) First Name (Given Name) C. If the employee's previous grant of employment authorization has expired, provide the information for the document or receipt that establishes continuing employment authorization in the space provided below. **Document Title Document Number** Expiration Date (if any) (mm/dd/yyyy) I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if

Name of Employer or Authorized Representative

the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Today's Date (mm/dd/yyyy)

Signature of Employer or Authorized Representative

LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

	LIST A Documents that Establish Both Identity and Employment Authorization	OR	Docume	LIST B nts that Establish Identity	ID	LIST C Documents that Establish Employment Authorization
2.	U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551) Foreign passport that contains a temporary I-551 stamp or temporary		State or outl United State photograph name, date color, and ac		1.	A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION
4.	I-551 printed notation on a machine- readable immigrant visa Employment Authorization Document that contains a photograph (Form I-766)		government provided it c information s gender, heig	ed by federal, state or local agencies or entities, ontains a photograph or such as name, date of birth, pht, eye color, and address	2.	(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)
5.	For a nonimmigrant alien authorized to work for a specific employer because of his or her status: a. Foreign passport; and b. Form I-94 or Form I-94A that has		. Voter's regis	ard with a photograph stration card card or draft record endent's ID card	3.	Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
	the following: (1) The same name as the passport; and		. U.S. Coast (Card	Guard Merchant Mariner	5.	Native American tribal document U.S. Citizen ID Card (Form I-197) Identification Card for Use of
	(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or		government For persons unable to	under age 18 who are present a document		Resident Citizen in the United States (Form I-179) Employment authorization document issued by the Department of Homeland Security
6.	limitations identified on the form. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI		 School reco Clinic, doct 	ord or report card or, or hospital record r nursery school record		

Examples of many of these documents appear in the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.

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