## WEST GULF MARITIME ASSOCIATION

1717 Turning Basin Drive, Suite 200 • Houston, Texas 77029-4060 • www.wgma.org

## NAME/ADDRESS/SOCIAL SECURITY NUMBER CHANGE FORM

For a legal name change, workers <u>must</u> submit copies of two documents:

1) a legible copy of the signed, new social sec	urity card reflecting	g the new name AN	D	
2) one copy of the following official documen	ts (check one):			
☐ Marriage document				
☐ Divorce Decree (must state the nam	e change from the	old name to the new	/ name)	
☐ Court Order for a name change from			·	
☐ Certificate of Naturalization				
☐ Confirmation from the Social Securi and production of a new social security card	ity Administration	authorizing the nam	ne change	
For SSN change, workers <u>must</u> submit copic	es of two documen	its:		
1) a legible copy of the signed, new social secu	ırity card <u>AND</u>			
2) Confirmation from the Social Security Adm of a new social security card	inistration authoriz	ing the change and	production	
□ Name Change □ Add	dress Change	□ SSN Chan	ge	
Old Name:	Navy Namas			
Old Name:(please print)	New Name:(please print)			
Old Social Security #:	Current SSN	#:		
(if applicable)				
Current Address	City	State	Zip	
ILA. Local # Work Nu	mber:	_		
Signature Please return this form to: West Gulf Maritin	ne Association	Date		
Beaumont • Brownsville • Corpus Christi • Freeport • Galves	ton • Houston • Lake Charles • (	Orange • Port Arthur • Texas City		

## **CHANGE OF ADDRESS NOTICE**

	•	
PLEAS	E CHANGE MY ADDRESS	
TO:		
New Address		<u>.                                    </u>
City		
State	Zip	
Telephone ()	· 	
Signature	(Required)	

Maritime Association – I.L.A.
Pension, Retirement, Welfare & Vacation Funds
11550 Fuqua, Suite 425
Houston, Texas 77034-4597
281-484-4343

## Form W-4 (2017)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2017 expires February 15, 2018. See Pub. 505, Tax Withholding and Estimated Tax.

Note: If another person can claim you as a dependent on his or her tax return, you can't claim exemption from withholding if your total income exceeds \$1,050 and includes more than \$350 of unearned income (for example, interest and dividends).

**Exceptions.** An employee may be able to claim exemption from withholding even if the employee is a dependent, if the employee:

- Is age 65 or older,
- . Is blind, or
- Will claim adjustments to income; tax credits; or itemized deductions, on his or her tax return.

The exceptions don't apply to supplemental wages greater than \$1,000,000.

Basic instructions. If you aren't exempt, complete the Personal Allowances Worksheet below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the Personal Allowances Worksheet below. See Pub. 505 for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

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

Check your withholding. After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2017. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Future developments. Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at www.irs.gov/w4.

	·- ··	Persona	i Allowances Works		or your records.)		
A	Enter "1" for yo	urself if no one else can o	laim you as a dependent				A
	(	<ul> <li>You're single and have</li> </ul>				ì	
В	Enter "1" if:	<ul> <li>You're married, have of</li> </ul>	only one job, and your spe	ouse doesn't w	ork; or	} .	В
	Į		ond job or your spouse's v			00 or less,	
Ç		our <b>spouse.</b> But, you may					
	than one job. (E	Entering "-0-" may help yo	u avoid having too little ta	ax withheld.) .			с
D	Enter number o	of <b>dependents</b> (other than	your spouse or yourself)	you will claim o	n your tax return .		D
E						E	
F	Enter "1" if you	have at least \$2,000 of ch	ild or dependent care e	xpenses for wh	nich you plan to cla	im a credit .	F
	(Note: Do not i	nclude child support paym	ents. See Pub. 503, Chil	d and Depende	nt Care Expenses,	for details.)	<del></del>
G	Child Tax Cred	fit (including additional chi	ld tax credit). See Pub. 9	72, Child Tax C	redit, for more info	mation.	
		come will be less than \$70				then <b>less "</b> 1" if	you
		ır eligible children or <b>less</b> '		_			
	<ul> <li>If your total inc</li> </ul>	come will be between \$70,0	00 and \$84,000 (\$100,000	and \$119,000 i and	f married), enter "1"	for each eligible	child. <b>G</b>
Н	Add lines A throu	igh G and enter total here. ( <b>N</b>	<b>lote:</b> This may be different f	from the number	of exemptions you of	aim on your tax	return.) ► H
	For accuracy,	• If you plan to itemize or claim adjustments to income and want to reduce your withholding, see the Deductions and Adjustments Worksheet on page 2.					
	complete all	1 -	have more than one job o	or are married a	nd you and your spi	ouse both work	and the combined
	worksheets	earnings from all jobs e	xceed \$50,000 (\$20,000 if	married), see th	e Two-Earners/Mul	tiple Jobs Worl	sheet on page 2
	that apply.	to avoid having too little		, , ,			387.41.1
		• If neitner of the above	e situations applies, stop h	ere and enter th	e number from line i	1 on line 5 of Fo	rm vv-4 below.
		Separate here and	give Form W-4 to your en	nployer. Keep tl	ne top part for your	records	
	M M	Employe	e's Withholding	<b>Allowan</b>	ce Certifica	te	OMB No. 1545-0074
Form	VV=4	· ·	_				മ∧47
	tment of the Treasury at Revenue Service		tled to claim a certain numb ne IRS. Your employer may b				
1		and middle initial	Last name				security number
Home address (number and street or rural route)				3 Single	Married Marr	ied, but withhold :	at higher Single rate.
				•	ut legally separated, or spo	-	• •
	City or town, state, and ZIP code			4 If your last na	ame differs from that s	shown on your so	cial security card,
				check here.	You must call 1-800-7	772-1213 for a re	placement card. 🕨 🛚
5	Total number	of allowances you are cla	iming (from line <b>H</b> above	or from the app	licable worksheet o	on page 2)	5
6	Additional am	ount, if any, you want with	held from each payched	k			6 \$
7	l claim exemp	otion from withholding for	2017, and I certify that I n	neet <b>both</b> of the	e following condition	ns for exemption	on.
	<ul> <li>Last year I h</li> </ul>	nad a right to a refund of a	II federal income tax with	held because l	had no tax liability,	and	
	• This year I e	expect a refund of <b>all</b> feder	al income tax withheld be	ecause I expect	t to have <b>no</b> tax liab	oility.	
	If you meet be	oth conditions, write "Exer	npt" here		<b>▶</b>	7	
	or nonalting of nov				والمراجع والمراج	But the book of	
Unde	er penalties of per	jury, I declare that I have ex	amined this certificate and,	, to the best of m	ny knowleage and be	ellet, it is true, co	orrect, and complete
	er penalties of per lloyee's signature	· ·	amined this certificate and,	, to the best of m	ny knowledge and be		errect, and complete
Emp	loyee's signature form is not valid i	· ·	100g		9 Office code (optional)	Date ►	orrect, and complete