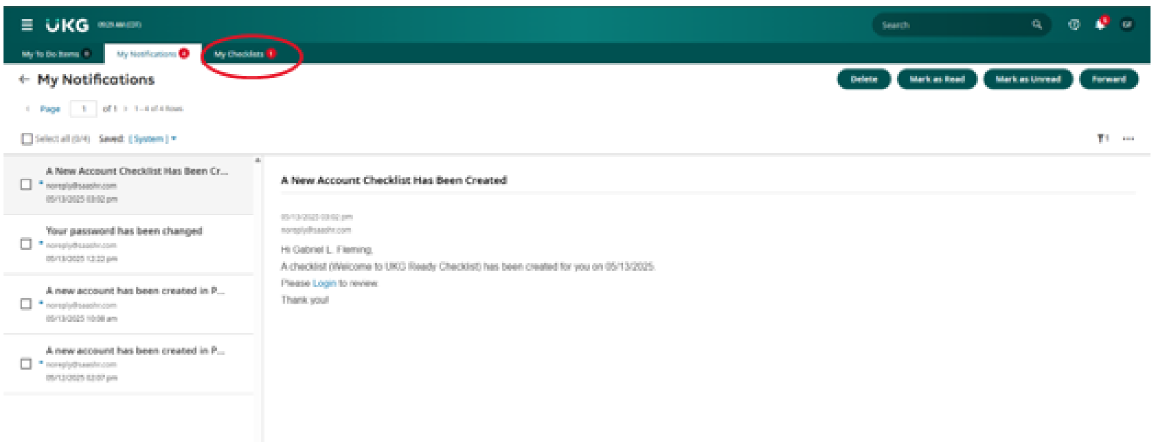
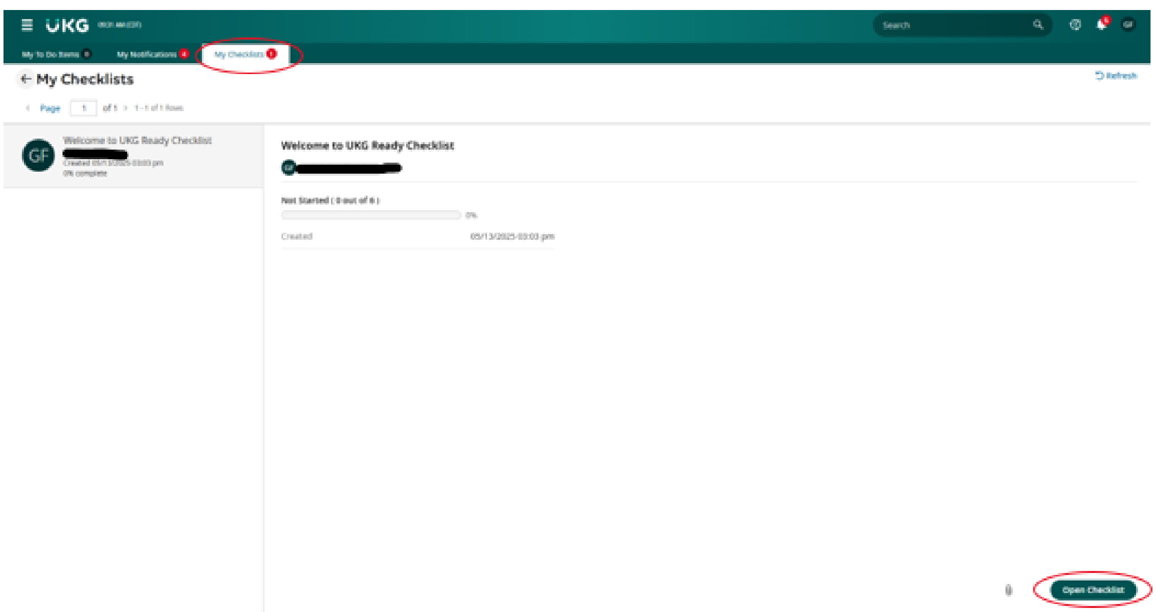
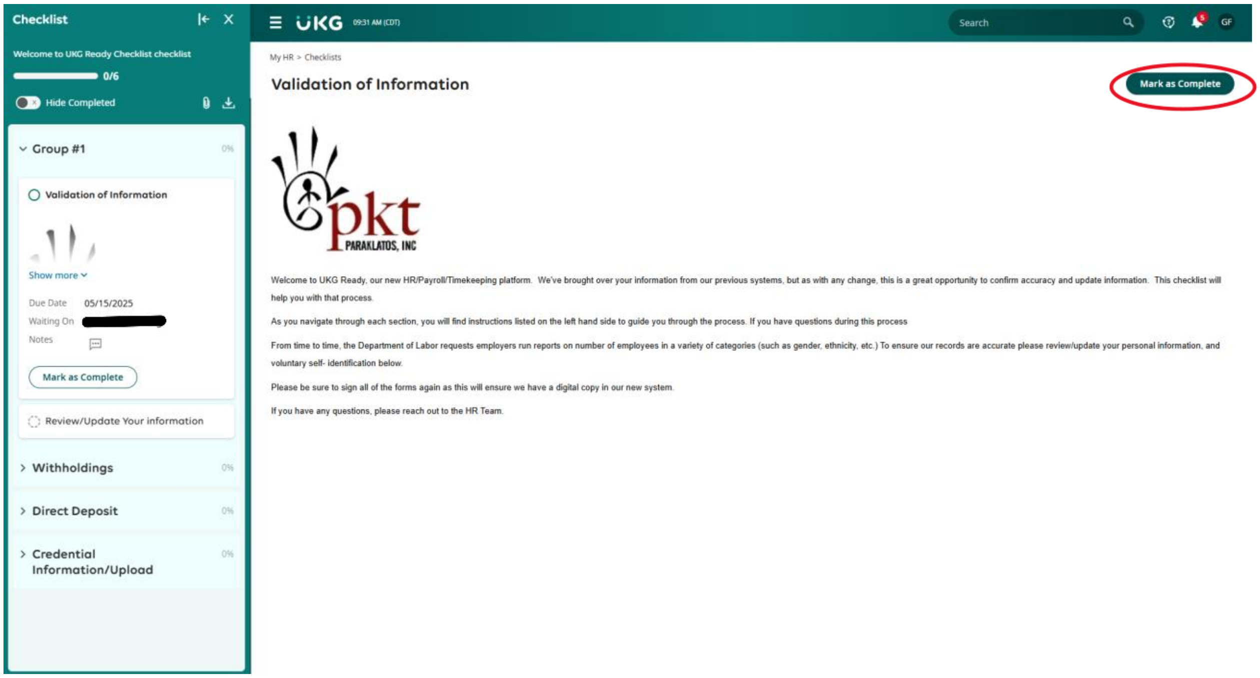
How To Complete Your First-Time Setup



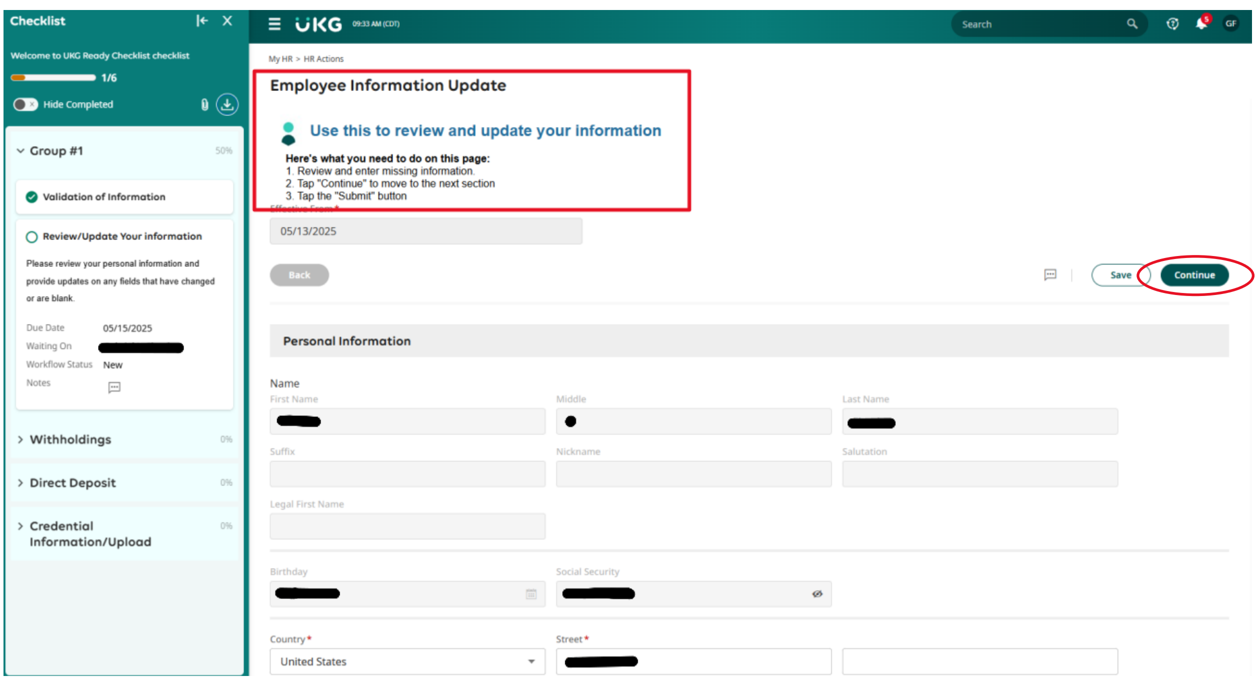
Please see the top left corner for the “My checklist” section.

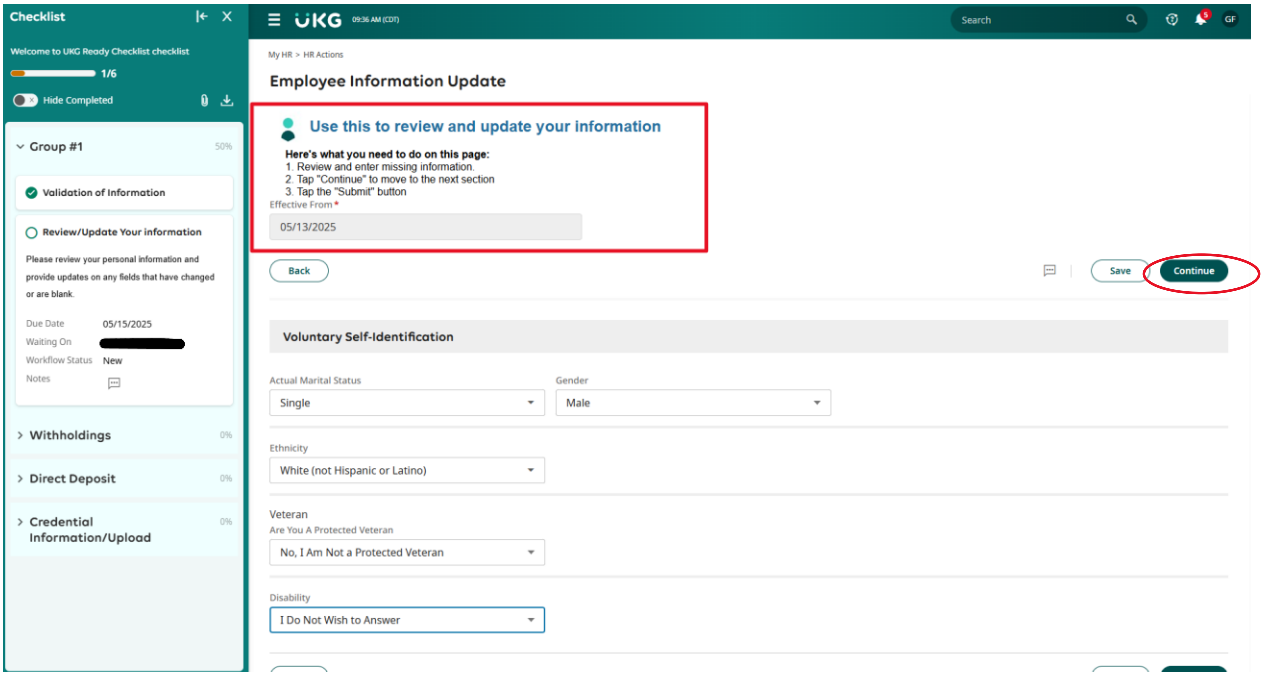


Click on “my checklist” in the top left corner

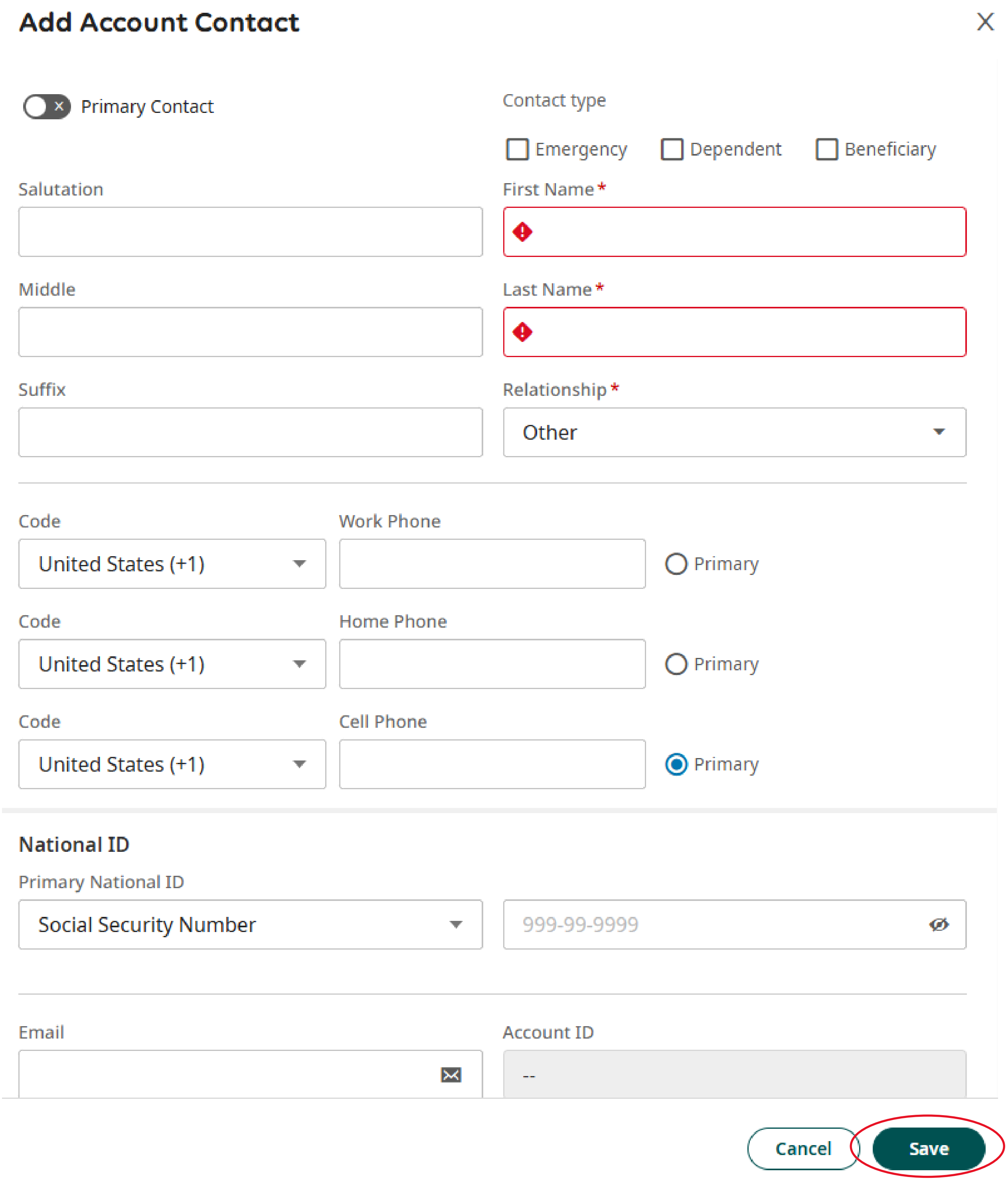


Checklist Introduction please make sure you are clicking on “mark complete” on the top right of the screenshots.





Checklist Item #1 part 2


Add Account Contact

Primary Contact

Contact type

- [ ] Emergency
- [ ] Dependent
- [ ] Beneficiary

Salutation

First Name*

Middle

Last Name*

Suffix

Relationship*

Other

Code: United States (+1) | Work Phone | Primary

Code: United States (+1) | Home Phone | Primary

Code: United States (+1) | Cell Phone | Primary

National ID

Primary National ID

Social Security Number | 999-99-9999

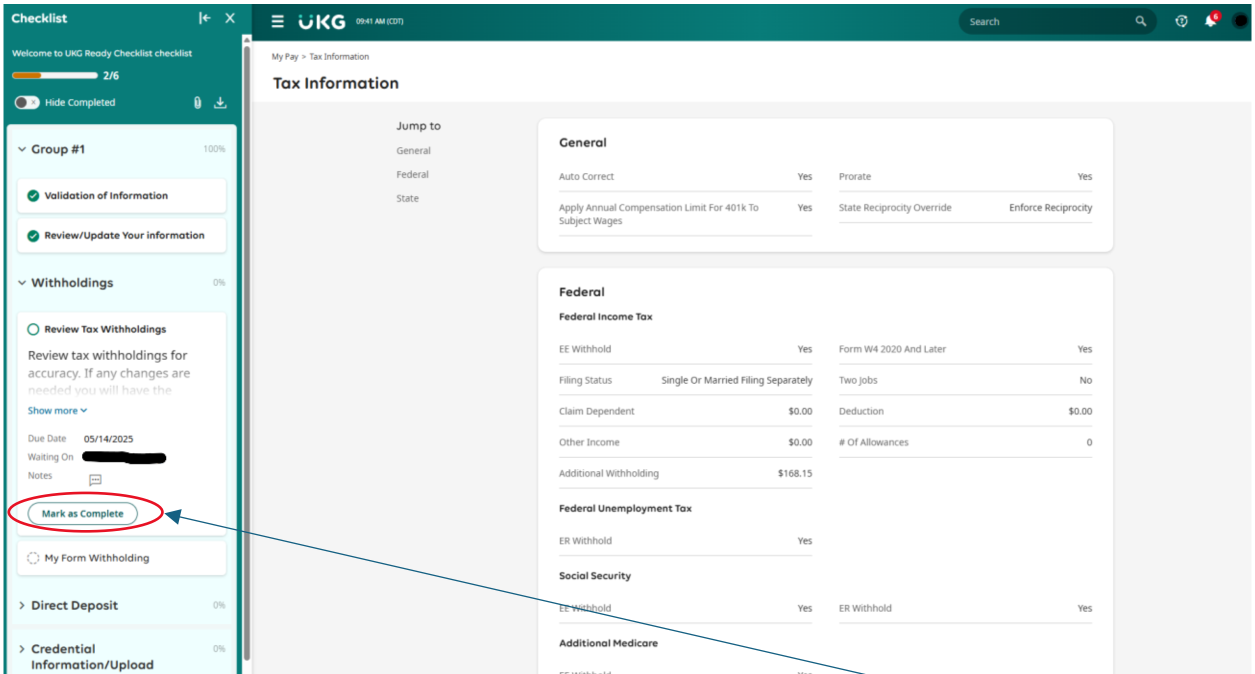
Email

Account ID

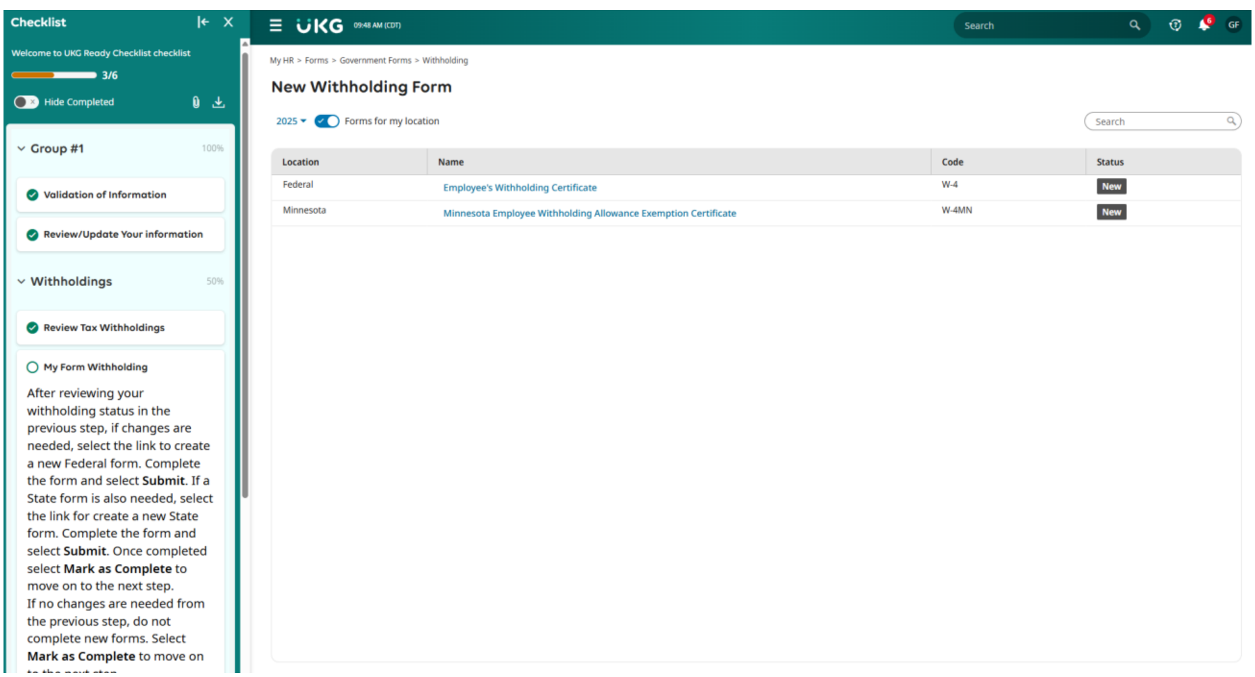
--

Cancel | Save

Checklist item #1 part 2 - Adding account contact/emergency contact



Checklist Item #2 part 1 – payroll withholding information (also known as a W4) (note- there is no “confirm” or “save” button on this page, so you have to hit the “**mark as complete**” button on the left ribbon)



Checklist item #3 part 1 – see instructions on left ribbon. Again, there is no “**submit**” button. Must use the “Mark as complete” button on left ribbon.

My HR > Forms > Government Forms > Withholding

W-4 (Federal Employee's Withholding Certificate)

Save Review ...

Status: New

Instructions

Department of the Treasury Internal Revenue Service

Form W-4
OMB No. 1545-0074
2025

Detailed instructions (PDF)

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. Your withholding is subject to review by the IRS.

Required fields are marked with an asterisk (*).

Step 1. Enter Personal Information

(A) First name * [redacted]

Middle Initial [redacted]

Last Name * [redacted]

Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov

Street * [redacted]

Zip * 55407

City * Minneapolis

State * Minnesota

My HR > Forms > Government Forms > Withholding

Minnesota: W-4MN

Download PDF Submit Save

Status: New

DEPARTMENT OF REVENUE

2025 W-4MN, Minnesota Withholding Allowance/Exemption Certificate

Employees

Complete Form W-4MN so your employer can withhold the correct Minnesota income tax from your pay. Consider completing a new Form W-4MN each year and when your personal or financial situation changes. If no Form W-4MN is in effect, the number of withholding allowances claimed will be zero.

First Name and Initial [redacted] [redacted] Last Name [redacted] Social Security Number [redacted]

Permanent Address [redacted]

City [redacted] State MN ZIP Code [redacted]

Marital Status *(Check one)*:
- Single; Married, but legally separated; or Spouse is a nonresident alien
- Married
- Married, but withhold at higher Single rate

Complete Section 1 OR Section 2, then sign the bottom and give the completed form to your employer.

Section 1 — Determining Minnesota Allowances

A Enter "1" if no one else can claim you as a dependent . . . . A [redacted]

B Enter "1" if any of the following apply: . . . . B [redacted]
- You are single and have only one job
- You are married, have only one job, and your spouse does not work
- Your wages from a second job or your spouse's wages are $1500 or less

C Enter "1" if you are married. Or choose to enter "0" if you are married and have either a working spouse or more than one job. *(Entering "0" may help you avoid having too little tax withheld.)* . C [redacted]

D Enter the number of dependents (other than your spouse or yourself) you will claim on your tax return. . . . . D [redacted]

E Enter "1" if you will use the filing status Head of Household *(see instructions)*. . . . . E [redacted]

F Add steps A through E. If you plan to itemize deductions on your 2024 Minnesota income tax return, you may also complete the Itemized Deductions and Additional Income Worksheet. . . . . F [redacted]

1 **Minnesota Allowances.** Enter Step F from Section 1 above or Step 10 of the Itemized Deductions Worksheet . . . . 1 [redacted]

2 Additional Minnesota withholding you want deducted for each pay period *(see instructions)* . . . . 2 $ [redacted]

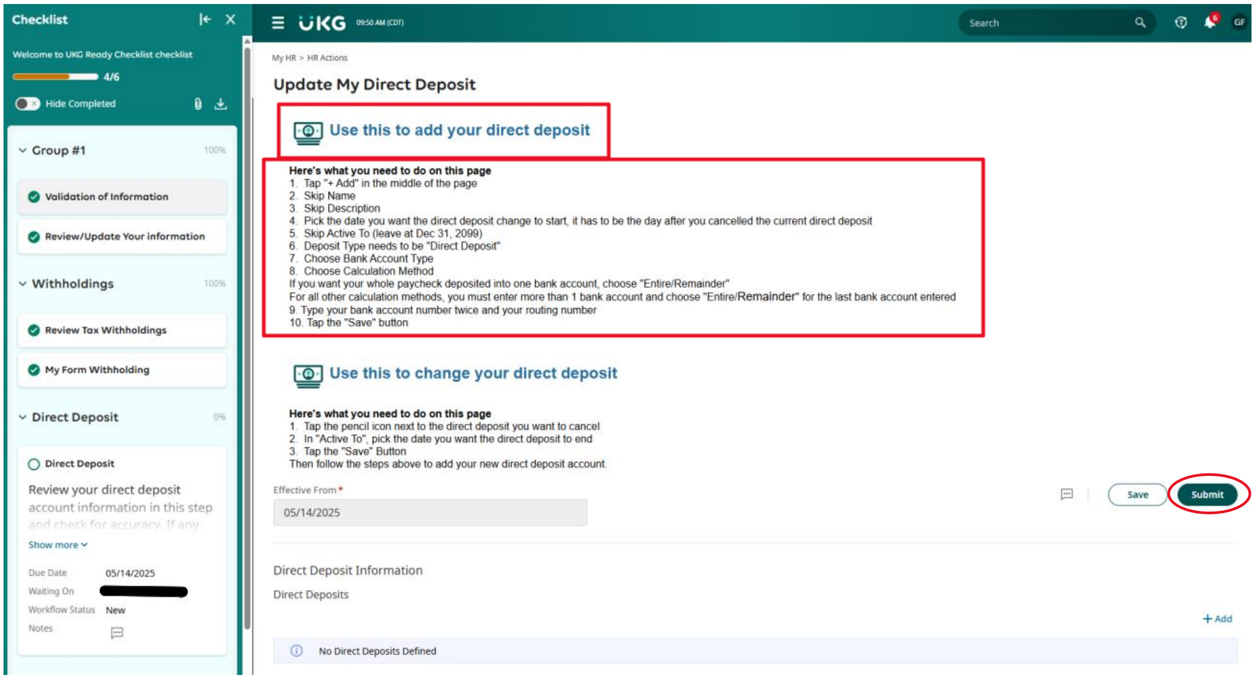
Section 2 — Exemption From Minnesota Withholding

Complete Section 2 if you claim to be exempt from Minnesota income tax withholding *(see Section 2 instructions for qualifications)*. If applicable, check one box below to indicate why you believe you are exempt:

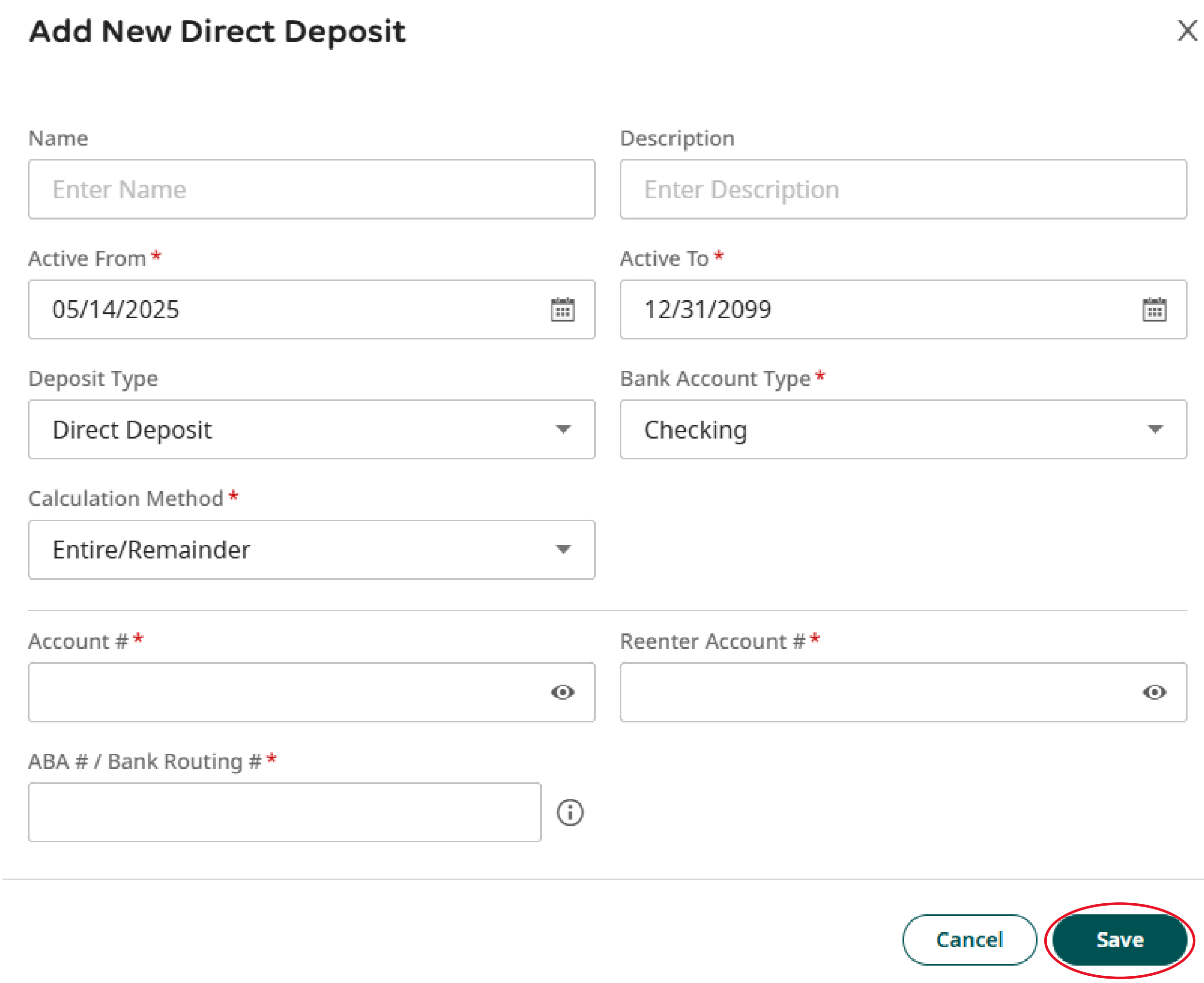
A I meet the requirements and claim exempt from both federal and Minnesota income tax withholding

B Even though I did not claim exempt from federal withholding, I claim exempt from Minnesota withholding, because:
- I had no Minnesota income tax liability last year
- I received a refund of all Minnesota income tax withheld
- I expect to have no Minnesota income tax liability this year

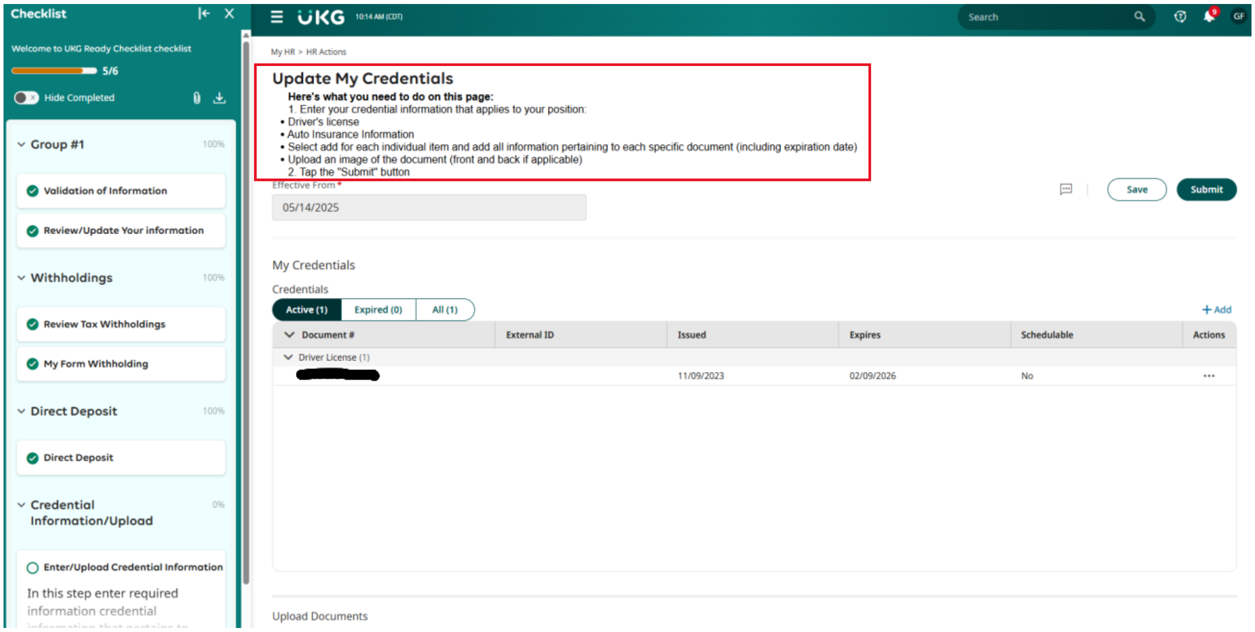
C All of these apply:
- My spouse is a military service member assigned to a military location in Minnesota



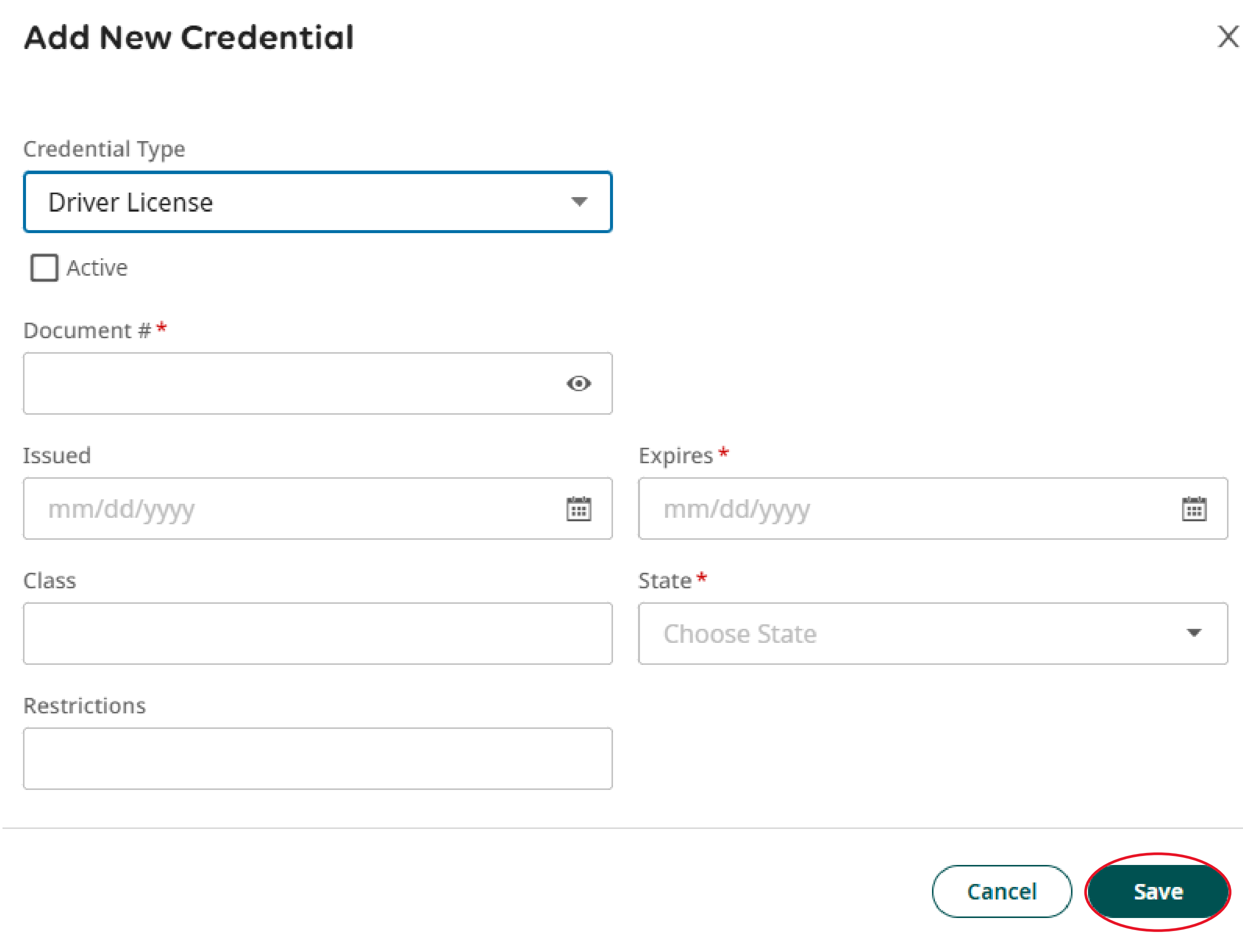
Checklist Item #4 part 1 – Please add your direct deposit information.



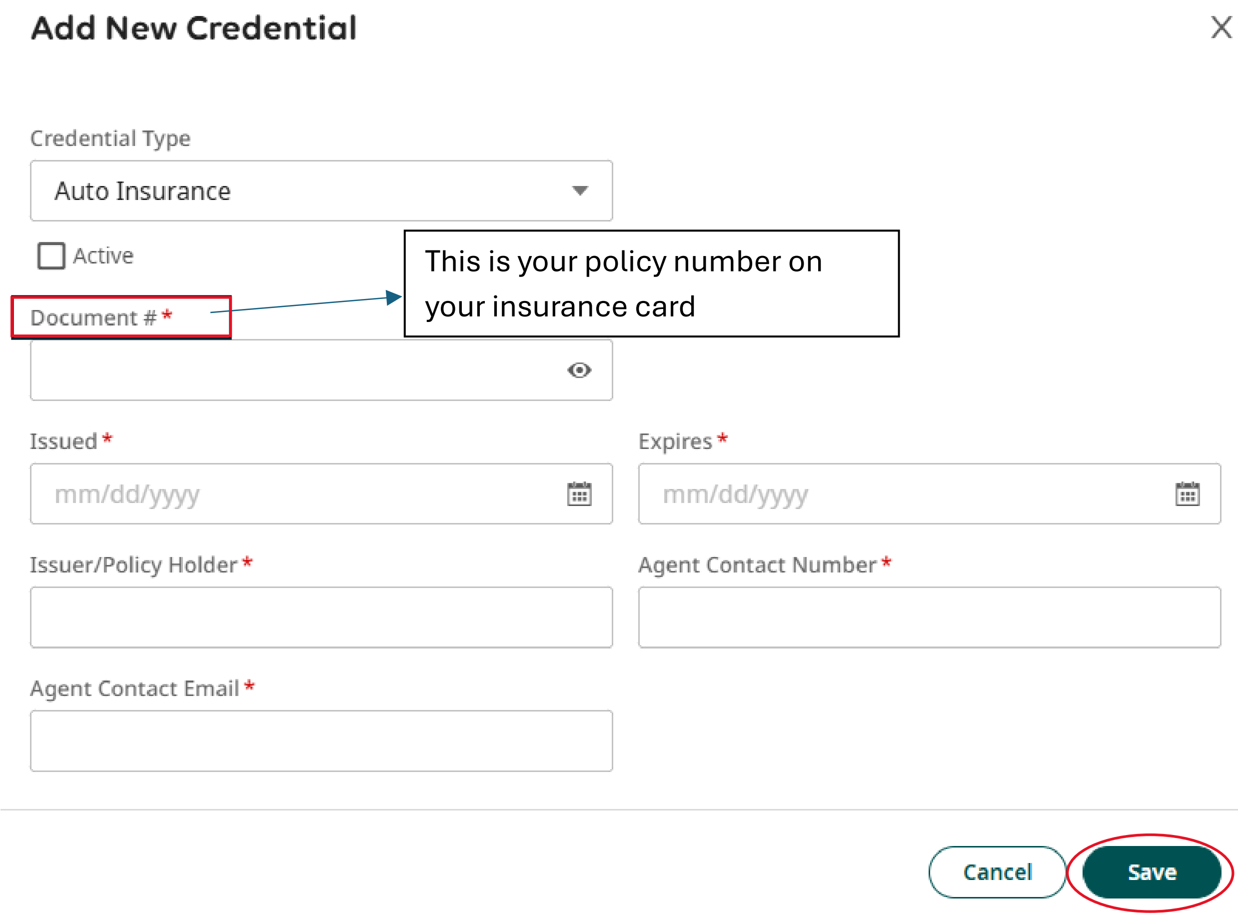
Checklist Item #4 – part 2 – enter your new Direct Deposit information – **Please make sure this is correct as this is how you will get paid**



Checklist Item #5 part 1 – updating driver's license information



Checklist Item #5 part 2 – adding new driver license information



Checklist Item #5 part 3 – Please add your auto insurance