EMPLOYEE				EMPL	OYER			
Employee Full Name				Busine	ss Name, "doing business a	as"		
Address – number and street	t			Addres	s – number and street			
City, Town or Post Office	State)	ZIP Code	City, To	own or Post Office		State	ZIP Code
SSN				Phone	Number			
To: Employer Under the provisions of an exemption is granted the statement is not coreturn the executed original.	d, the following mpleted by the	state emp	ement must be con ployee, the exempt	npleted ion sta	l and signed by the pe tus will default to "sin	erson o	claiming zero ex	the exemption. If
To: Employee The following statemen completed by you, your						om le	vy. If the	e statement is not
A "Notice of Levy on Wincome that is exempt f						sist in	figuring	the amount of my
Taxpayer:	Additional Deductions		Check if over 65 y Check if blind	ears o	ld.			
Taxpayer's Spouse:	Additional Deductions		Check if over 65 y Check if blind	ears o	ld.			
I certify that I can claim minor child to whom (a from levy. I understand statement of exemption	as required by d that the inforr	cour natio	rt or administrative on I have provided	order) I make support pay	ments	that ar	e already exempt
Dependent's Name	(last, first, initia	l)			Relationship			
1								
2								
3								
4								
5								
6								

INSTRUCTIONS TO COMPUTE AMOUNT EXEMPT FROM LEVY

To compute the amount exempt from levy, add the total of names entered above, including yours and your spouse's, and then, in Table A. on the reverse, find the filing status which matches your current income tax filing status. Using that table, find the number of exemptions and the frequency of your paydays, and use that amount as your exemption unless you and / or your spouse are over age 65 and / or blind. If so, you may claim an additional exemption. To compute that additional exemption, Use Table B on the reverse, and match your filing status, your number of additional deductions checked above, and the frequency of your payday. Add that amount to the amount computed in Table A to get your total exemption. See reverse for examples. **Note:** The amount exempt from levy may change annually. If it does and this levy remains in force next year, filing a new Statement of Exemptions will allow your employer to use the new year's exemption table. To obtain a new form, phone the contact number on the contact number on the face of the levy form.

Date

Signature

Tables for Figuring Amount Exempt from Levy on Wages, Salary, and Other Income (Forms 668-W)

The tables below show the amount of an individual's income (take home pay) that is exempt from a notice of levy used to collect delinquent tax in 2024

1-2024

Filing Status: Single						Filing Status: Married Filing Joint Return (and Qualifying Widow(er)s)						w(er)s)			
Pay Number of Dependents Claimed on Statement						Pay	Number of Dependents Claimed on Statement								
Period	0	1	2	3	4	5	More Than 5	Period	0	1	2	3	4	5	More Than 5
Daily	56.15	75.38	94.61	113.84	133.07	152.30	56.15 plus 19.23 for each dependent	Daily	112.31	131.54	150.77	170.00	189.23	208.46	112.31 plus 19.23 for each dependent
Weekly	280.77	376.92	473.07	569.22	665.37	761.52	280.77 plus 96.15 for each dependent	Weekly	561.54	657.69	753.84	849.99	946.14	1042.29	561.54 plus 96.15 for each dependent
Biweekly	561.54	753.85	946.16	1138.47	1330.78	1523.09	561.54 plus 192.31 for each dependent	Biweekly	1123.08	1315.39	1507.70	1700.01	1892.32	2084.63	1123.08 plus 192.31 for each dependent
Semimonthly	608.33	816.66	1024.99	1233.32	1441.65	1649.98	608.33 plus 208.33 for each dependent	Semimonthly	1216.67	1425.00	1633.33	1841.66	2049.99	2258.32	1216.67 plus 208.33 for each dependent
Monthly	1216.67	1633.34	2050.01	2466.68	2883.35	3300.02	1216.67 plus 416.67 for each dependent	Monthly	2433.33	2850.00	3266.67	3683.34	4100.01	4516.68	2433.33 plus 416.67 for each dependent
	Filing Status: Head of Household								Filing	Status: Ma	rried Filing	Separate	Return		

Pay Number of Dependents Claimed on Statement						Pay	Number of Dependents Claimed on Statement								
Period	0	1	2	3	4	5	More Than 5	Period	0	1	2	3	4	5	More Than 5
Daily	84.23	103.46	122.69	141.92	161.15	180.38	84.23 plus 19.23 for each dependent	Daily	56.15	75.38	94.61	113.84	133.07	152.30	56.15 plus 19.23 for each dependent
Weekly	421.15	517.30	613.45	709.60	805.75	901.90	421.15 plus 96.15 for each dependent	Weekly	280.77	376.92	473.07	569.22	665.37	761.52	280.77 plus 96.15 for each dependent
Biweekly	842.31	1034.62	1226.93	1419.24	1611.55	1803.86	842.31 plus 192.31 for each dependent	Biweekly	561.54	753.85	946.16	1138.47	1330.78	1523.09	561.54 plus 192.31 for each dependent
Semimonthly	912.50	1120.83	1329.16	1537.49	1745.82	1954.15	912.50 plus 208.33 for each dependent	Semimonthly	608.33	816.66	1024.99	1233.32	1441.65	1649.98	608.33 plus 208.33 for each dependent
Monthly	1825.00	2241.67	2658.34	3075.01	3491.68	3908.35	1825.00 plus 416.67 for each dependent	Monthly	1216.67	1633.34	2050.01	2466.68	2883.35	3300.02	1216.67 plus 416.67 for each dependent

2. Table for Figuring Additional Exempt Amount for Taxpayers at Least 65 Years Old and/or Blind

Filing Status	*	Additional Exempt Amount									
Filing Status		Daily	Weekly	Biweekly	Semi-monthly	Monthly					
Single or Head of	1	7.50	37.50	75.00	81.25	162.50					
Household	2	15.00	75.00	150.00	162.50	325.00					
	1	5.96	29.81	59.62	64.58	129.17					
Any Other	2	11.92	59.62	119.23	129.17	258.33					
Filing Status	3	17.88	89.42	178.85	193.75	387.50					
	4	23.85	119.23	238.46	258.33	516.67					

^{*} ADDITIONAL STANDARD DEDUCTION claimed on Parts 3,4, and 5 of levy.

Publication 1494 (Rev. 1-2024)

Examples

These tables show the amount of take home pay that isexempt each pay period from a levy on wages, salary, and other income.

- 1. A single taxpayer who is paid weekly and claims three dependents has \$569.22 exempt from levy.
- 2. If the taxpayer in number 1 is over 65 and writes 1 in the ADDITIONAL STANDARD DEDUCTION space on Parts 3, 4, & 5 of the levy, \$606.72 is exempt from this levy (\$569.22 plus \$37.50).
- 3. A taxpayer who is married, files jointly, is paid bi-weekly, and claims two dependents has \$1,507.70 exempt from levy.
- 4. if the taxpayer in number 3 is over 65 and has a spouse who is blind, this taxpayer should write 2 in the ADDITIONAL STANDARD DEDUCTION space on Parts 3,4, and 5 of the levy. If so, \$1,626.93 is exempt from this levy (\$1,507.70 plus \$119.23).