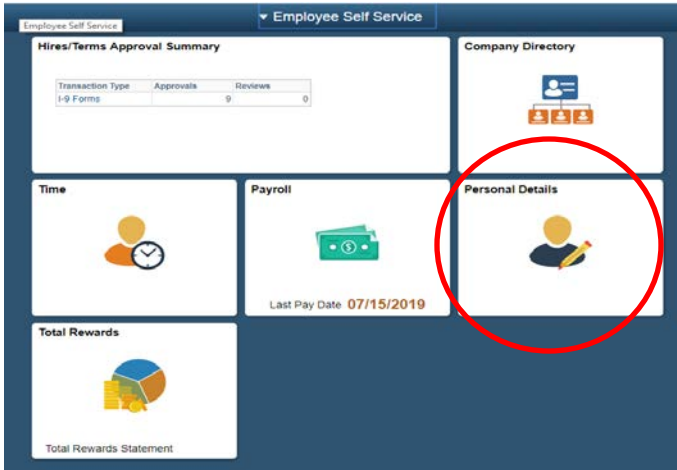
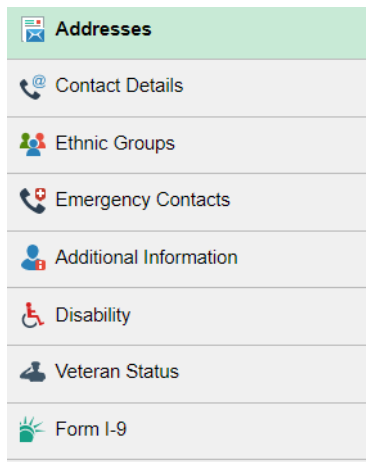


Onboarding Tasks via Employee Self Service

1.) Click the Personal Details Tile on the ESS Homepage

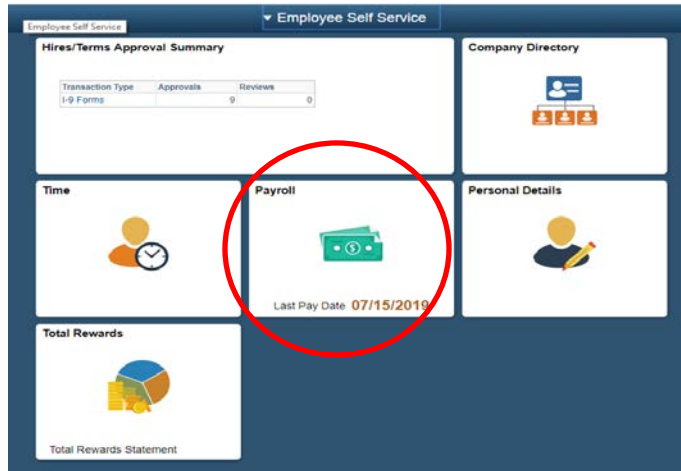


2.) Complete all the items in the list on the left side of the page

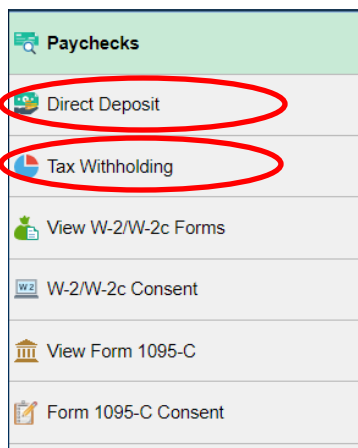


Onboarding Tasks via Employee Self Service

3.) Go back to the ESS Home Page and click on the Payroll Tile



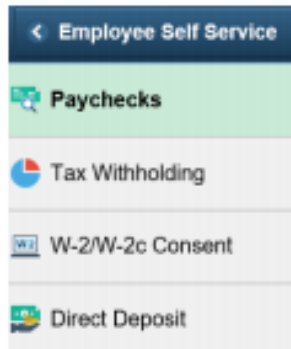
4.) Complete the Direct Deposit and the Tax Withholding (W-4)



Onboarding Tasks via Employee Self Service

When completing the W-4 please make sure to follow these instructions.

NOTE: Adobe Reader required to download PDF.
Not available on a mobile device



From the Employee Self Service homepage, select the Payroll tile then Tax Withholding in the left column. A page will open showing your Company name, Status Form Types, Jurisdiction and Withholding Details:



The screenshot shows the 'Tax Withholding' page. At the top, it displays 'Company: NDUS System Info Tech Services' and 'Status: Active'. Below this is a table with two main sections: 'Federal' and 'State'. Each section has columns for 'Form Type', 'Jurisdiction', 'Tax Status', 'Additional Amount', 'Additional Percentage', 'Withholding Allowances', and 'Other'. A blue circle highlights a right-pointing arrow (>) on the right side of the table, indicating where to click to update the withholding status.

Form Type	Jurisdiction	Tax Status	Additional Amount	Additional Percentage	Withholding Allowances	Other
Federal	Federal	Single	0.00		1	>
State	North Dakota	Single	0.00		1	>

To update the Federal withholding status, select the **arrow >** on the right.

Onboarding Tasks via Employee Self Service

Follow this link for instructions on opening the W-4 in Adobe Reader to allow online submission. <https://und.teamdynamix.com/TDClient/KB/ArticleDet?ID=71729>

A window will open with special instructions that you should read before continuing. It is important to know that when you update your federal tax withholding status, it will **NOT automatically update your state tax withholding status**. If you want to update your state tax withholding status, do it separately starting in the Tax Withholding page.

Federal Tax Withholding Forms x

Company NDUS System Info Tech Services

**NOTE: Adobe Reader required to download PDF.
Not available on a mobile device**

IMPORTANT INFORMATION:

This process requires the use of Adobe Reader to download the updateable PDF form to your computer. After you complete the form, **CLICK ON THE GREEN SUBMIT BUTTON** located at the bottom of the form. Contact your campus Payroll office if you encounter any issues using this electronic process.

Remember to update your state tax withholding status because the change you make for Federal withholding does NOT automatically update your state tax withholding status.

You must complete Form W-4 so the Payroll Department can calculate the correct amount of tax to withhold from your pay. Federal income tax is withheld from your wages based on marital status and the number of allowances claimed on this form. You may also specify that an additional dollar amount be withheld. You can file a new Form W-4 anytime your tax situation changes.

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

Updateable Forms

Form Description
Federal Withholding Allowance Certificate

Click Here >

Onboarding Tasks via Employee Self Service

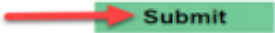
This message will appear:

WARNING

The system will download to your computer a copy of the tax form which contains personal information.
You should only continue if you are using a trusted and secure computer.
You should not continue if you are using a shared computer or public computer (such as those in a library or internet café); doing this could leave your personal information vulnerable.

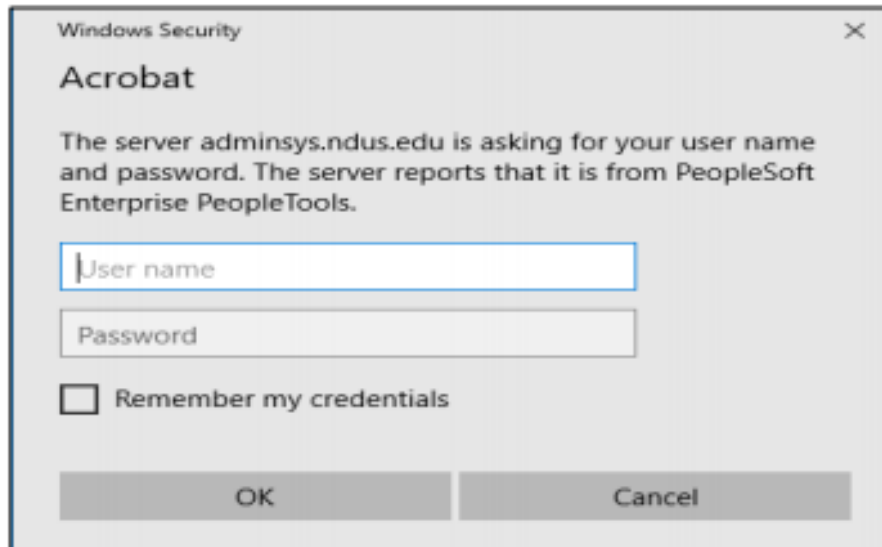
Selecting OK will open the updateable form in PDF format. Selecting Cancel will cancel the transaction and you can go to your Payroll department to complete the necessary forms to update your tax withholding status.

When OK is selected the PDF form will open in a separate window. Your Name, SSN, Address, Employee's Signature, Date, Employer's name, Employer's Address and EIN will all be prepopulated. The SSN is masked and only shows the last 4 digits. Lines 3 through 7 will be editable. Complete the form and then **select the green Submit button located in the bottom right corner of the form.**

Form W-4		Employee's Withholding Allowance Certificate		OMB No. 1545-0074	
<small>Department of the Treasury Internal Revenue Service</small>		<small>► Whether you're 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.</small>		2018	
1 Your first name and middle initial John		Last name Doe		2 Your social security number XXX-XX-2255	
Home address (number and street or rural route) 100 Anywhere St City or town, state, and ZIP code Any Town, ND 58102		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. <small>Note: If married filing separately, check "Married, but withhold at higher Single rate."</small>		4 If your last name differs from that shown on your social security card, check here. You must call 800-772-1213 for a replacement card. <input type="checkbox"/>	
5 Total number of allowances you're claiming (from the applicable worksheet on the following pages)				5	
6 Additional amount, if any, you want withheld from each paycheck				6 \$	
7 I claim exemption from withholding for 2018, and I certify that I meet both of the following conditions for exemption. • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. If you meet both conditions, write "Exempt" here				7 Not Applicable	
Under penalties of perjury, 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 (This form is not valid unless you sign it.) ► John Doe				Date ► 11/29/2018	
8 Employer's name and address (Employer: Complete boxes 8 and 10 if sending to IRS and complete boxes 8, 9, and 10 if sending to State Directory of New Hires.) NDUS System Info Tech Services 10th Floor, State Capitol Bismarck, ND 58505-0230			9 First date of employment		10 Employer identification number (EIN) 461100936
For Privacy Act and Paperwork Reduction Act Notice, see page 4.			Cat. No. 10220Q		Form W-4 (2018)
					

Onboarding Tasks via Employee Self Service

You are then prompted to enter your User name and Password (enter the same User name and password used to log in to HR):



A screenshot of a Windows Security dialog box titled "Acrobat". The dialog box has a close button (X) in the top right corner. The text inside reads: "The server adminsys.ndus.edu is asking for your user name and password. The server reports that it is from PeopleSoft Enterprise PeopleTools." Below this text are two input fields: "User name" and "Password". There is also a checkbox labeled "Remember my credentials" which is currently unchecked. At the bottom of the dialog box are two buttons: "OK" and "Cancel".

Onboarding Tasks via Employee Self Service

The data is then uploaded to the HR system to update your federal tax withholding status. You can save or print a copy of the W-4 for your records. You will also receive an email notification of the update:

Your tax withholding request on 2018-08-21-09.27.28.000000 for the following Company and Jurisdiction has been successfully submitted:

Company: NDUS System Info Tech Services

Jurisdiction: Federal

However, due to the timing, your tax withholding change may not be reflected on the next paycheck.

If you did not change your tax withholding data, please contact your payroll administrator immediately.

This is a system-generated email message that cannot accept incoming-email. Please do not reply to this message.

Then go back to the Tax Withholding page and complete the process for your state tax withholding.

- You will not be prompted again to enter your User Name and password if you kept the PDF page open.
- State tax withholding forms are available for every state that has state tax withholding and they accept the Federal W-4 and/or the state's own W-4.
- The SSN is masked in the state forms and only shows the last four digits.

Onboarding Tasks via Employee Self Service

The following example is for North Dakota:

State Tax Withholding Forms

Company NDUS System Info Tech Services

IMPORTANT INFORMATION:

This process requires the use of Adobe Reader to download the updateable PDF form to your computer. After you complete the form, CLICK ON THE GREEN SUBMIT BUTTON located at the bottom of the form. Contact your campus Payroll office if you encounter any issues using this electronic process.

The State of North Dakota withholding allowances should be the same as what you claimed on your Federal W-4 withholding form but will allow you to claim additional withholding if needed.

Whether you are entitled to claim a certain number of allowances is subject to review by the State. Your employer may be required to send a copy of this form to the Agency.

Updateable Forms

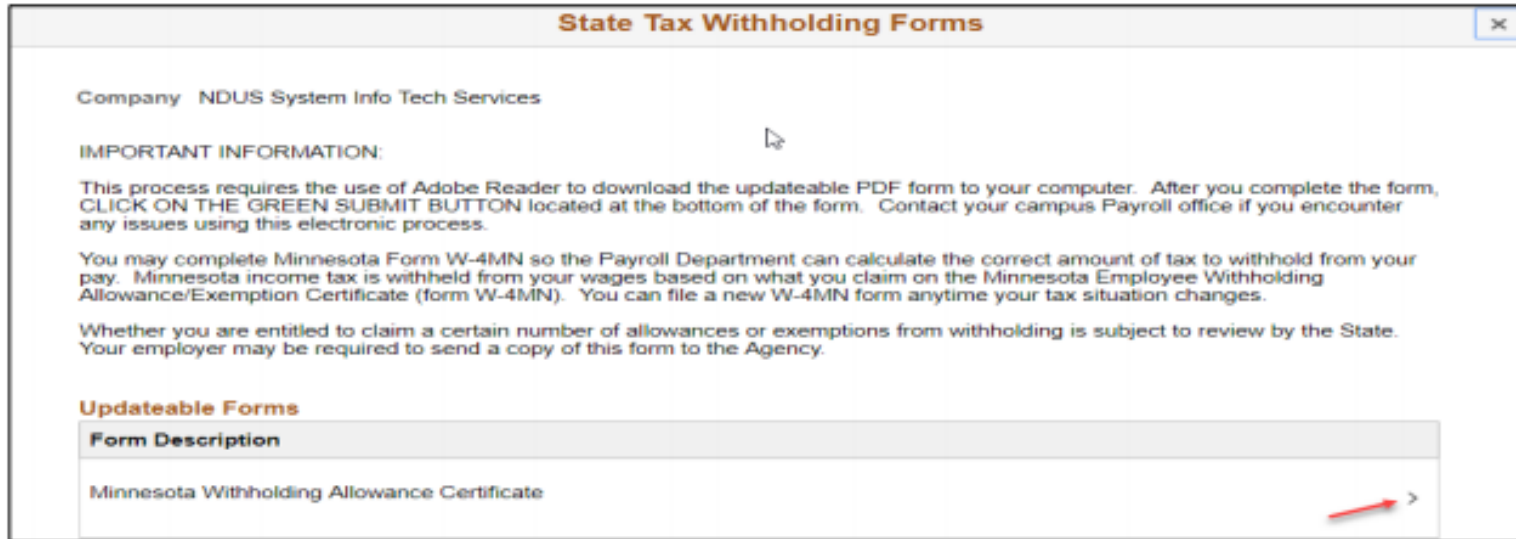
Form Description
North Dakota Withholding Allowance Certificate

North Dakota W-4 Form Department of the Treasury Internal Revenue Service		Employee's Withholding Allowance Certificate		OMB No. 1545-0074 2018
1 Your first name and middle initial John		Last name Doe		2 Your social security number XXX-XX-2255
Home address (number and street or rural route) 100 Anywhere St		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. Note: If married filing separately, check "Married, but withhold at higher Single rate."		
City or town, state, and ZIP code Any Town, ND 58102		4 If your last name differs from that shown on your social security card, check here. You must call 800-772-1213 for a replacement card. <input type="checkbox"/>		
5 Total number of allowances you're claiming (from the applicable worksheet on the following pages)			5	
6 Additional amount, if any, you want withheld from each paycheck			6	\$
7 I claim exemption from withholding for 2018, and I certify that I meet both of the following conditions for exemption. <ul style="list-style-type: none"> • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. If you meet both conditions, write "Exempt" here.				
Under penalties of perjury, 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 (This form is not valid unless you sign it.)		John Doe		Date 11/29/2018
8 Employer's name and address (Employer: Complete boxes 8 and 10 if sending to IRS and complete boxes 8, 9, and 10 if sending to State Directory of New Hires.) NDUS System Info Tech Services 10th Floor, State Capitol Bismarck, ND 58505-0230			9 First date of employment	10 Employer identification number (EIN) 461100936
For Privacy Act and Paperwork Reduction Act Notice, see page 4.			Cat. No. 10220Q	Form W-4 (2018)
				Submit

For North Dakota, boxes 3 through 7 default as blank and are editable.

Onboarding Tasks via Employee Self Service

The following example is for Minnesota:



State Tax Withholding Forms [X]

Company NDUS System Info Tech Services

IMPORTANT INFORMATION:


This process requires the use of Adobe Reader to download the updateable PDF form to your computer. After you complete the form, CLICK ON THE GREEN SUBMIT BUTTON located at the bottom of the form. Contact your campus Payroll office if you encounter any issues using this electronic process.

You may complete Minnesota Form W-4MN so the Payroll Department can calculate the correct amount of tax to withhold from your pay. Minnesota income tax is withheld from your wages based on what you claim on the Minnesota Employee Withholding Allowance/Exemption Certificate (form W-4MN). You can file a new W-4MN form anytime your tax situation changes.


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

Updateable Forms

Form Description
Minnesota Withholding Allowance Certificate



Onboarding Tasks via Employee Self Service

m DEPARTMENT OF REVENUE		W-4MN
2018 Minnesota Employee Withholding Allowance/Exemption Certificate		
Employees		
You must complete and give this form to your employer if you do any of the following:		
<ul style="list-style-type: none">• Claim fewer Minnesota withholding allowances than your federal allowances• Claim more than 10 Minnesota withholding allowances• Want additional Minnesota tax withheld from your pay each pay period• Claim to be exempt from federal withholding or claim to be exempt from Minnesota withholding		
Do not complete this form if you are claiming the same number of Minnesota allowances as federal and the number claimed is 10 or less.		
Employee's first name and initial John A	Last name Doe	Employee's Social Security number XXX-XX-2255
Permanent address 100 Anywhere St	Marital status (check one box)	
City Any Town	State MN	ZIP code 56470-4506
		<input type="checkbox"/> Single; Married, but legally separated; or spouse is a nonresident alien
		<input type="checkbox"/> Married
		<input checked="" type="checkbox"/> Married, but withhold at higher Single rate
Employees: Read instructions on back, complete Section 1 OR Section 2, sign and give the completed form to your employer. (Do not complete both Section 1 and Section 2. Completing both sections will make the form invalid.)		
<input type="checkbox"/> Section 1 — Determining Minnesota allowances		
Complete Section 1 if you claim fewer Minnesota allowances than your federal allowances, AND/OR if you want additional Minnesota withholding deducted each pay period.		
1 Total number of federal allowances claimed on federal Form W-4	1	0
2 Total number of Minnesota allowances (line 2 cannot be more than line 1)	2	0
3 Additional Minnesota withholding you want deducted each pay period	3	\$ 0.00
<input type="checkbox"/> 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 the reason why you believe you are exempt:		
<input type="checkbox"/> I meet the requirements and claim exempt from both federal and Minnesota income tax withholding.		
<input type="checkbox"/> 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, AND I expect to have no Minnesota income tax liability this year.		
<input type="checkbox"/> My spouse is a military service member assigned to a military location in Minnesota, my domicile (legal residence) is in another state, AND I am in Minnesota solely to be with my spouse. My state of domicile is _____		
<input type="checkbox"/> I am an American Indian living and working on a reservation.		
<input type="checkbox"/> I am a member of the Minnesota National Guard or an active duty U.S. military member and claim exempt from Minnesota withholding on my military pay.		
<input type="checkbox"/> I receive a military pension or other military retirement pay as calculated under Title 10, 1401 through 1414, 1447 through 1455, and 12733 and claim exempt from Minnesota withholding on this retirement pay.		
I certify that all information provided in Section 1 OR Section 2 is correct. I understand there is a \$500 penalty for filing a false withholding allowance/exemption certificate.		
Employee's signature John Doe	Date 2018-11-29	Daytime phone _____
Employees: Give the completed form to your employer.		
Employers		
If you are required to send a copy of this form to the Department of Revenue (see instructions), you must enter the employer information below and mail this form to: Minnesota Revenue, Mail Station 6501, St. Paul, MN 55146-6501. (Incomplete forms are considered invalid.) A \$50 penalty may be assessed for each required Form W-4MN not filed with the department.		

For Minnesota, you **MUST** select the box for either Section 1 or Section 2 to enter data. The Marital Status and number of allowances default from the federal W-4 and are **NOT** editable.