Form W-4

Employee Withholding Allowance Certificate

FOR MARYLAND STATE GOVERNMENT EMPLOYEES ONLY

Department of the Treasury Internal Revenue Service

Form MW 507 Comptroller of Maryland

Please complete form in black ink. Whether you are 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.					
Section 1 - Employee Information					
Payroll System (check one) RG CT UI	Name of	Employing Agency			
Agency Number		curity Number	Employee Name		
Home Address (number and street or rural route)			Address Continued (apartment number, if any)		
City	State	Zip Code	County of Residence (required)		Nonresidents enter Maryland County or altimore City where you are employed)
Section 2 - Federal Withholding Form W-4 The federal worksheet is available online at http://www.irs.gov/pub/irs-pdf/fw4.pdf					
3 Single Married Married, but withhold at higher Single Rate 6 the "Single" box. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box. 4 If your last name differs from that shown check here. You must call 1-800-772-1213				on y	our social security card,
5 Total number of allowances you are claiming (from page 1 or page 2 of the federal worksheet)				5	\$
 Additional amount, if any, you want withheld from each paycheck					Ψ
This year I expect a	refund of all federal in		expect to have no tax liability	7	
Section 3 - Maryland Withholding Form MW 507					
The Maryland worksheet is available online at http://forms.marylandtaxes.com/current_forms/MW507.pdf					
Withhold at Single Rate Married (surviving spouse or unmarried Head of Household) Rate Married, but withhold at Single Rate 1. Total number of exemptions you are claiming not to exceed line f in Personal Exemption Worksheet on page 2 1					
2. Additional withholding per pay period under agreement with employer					
3. I claim exemption from withholding because I do not expect to owe Maryland tax. See instructions and check boxes that apply.					
b. This year I do not expect to owe any Maryland income tax and expect to have the right to a full refund of all income tax withheld. (This includes seasonal and student employees whose annual income will be below the minimum filing requirements).					
) Enter "EXEMPT" here		3
4. I claim exemption from withholding because I am domiciled in the following state. Virginia □					
I further certify that I do not maintain a place of abode in Maryland as described in the instructions. Enter "EXEMPT" here					4
5. I claim exemption from Maryland state withholding because I am domiciled in the Commonwealth of Pennsylvania and I do not maintain a place of abode in Maryland as described in the instructions on Form MW507.					
6. I claim exemption from	m Maryland local tax	because I live in a local Pe	nnysylvania jurisdiction within York or		5
Adams counties. Enter "EXEMPT" here and on line 4 of Form MW507					6
an earnings or income tax on Maryland residents. Enter "EXEMPT" here and on line 4 of Form MW507 8. I certify that I am a legal resident of the state of and am not subject to Maryland withholding beca					7
1 meet the requirements set forth under the Servicemembers Civil Relief Act, as amended by the Military Spouses Residency Relief Act. Enter "EXEMPT" here				s	8
Section 4 - Employee Signature					
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. I further certify that I am entitled to the number of withholding allowances claimed on line 1 above, or if claiming exemption from withholding, that I am entitled to claim the exempt status on which ever line(s) I completed.					
Employee's signature		icts) i completed.	Da	to	

Employer's name and address (including zip code) (For employer use only)

Central Payroll Bureau P.O. Box 2396 Annapolis, MD 21404 Federal Employer identification number 52-6002033 (For State of Maryland - CPB use only)