

2012

Employee Withholding Allowance Certificate

FOR MARYLAND STATE GOVERNMENT EMPLOYEES ONLY

Form MW 507

Form W-4

Department of the Treasury
Internal Revenue Service

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 [X] CT [] UM [] Name of Employing Agency Maryland Judiciary
Agency Number 220100 Social Security Number 123-45-6789 Employee Name John J. Doe
Home Address (number and street or rural route) 580 Taylor Ave. Address Continued (apartment number, if any) Apt A1
City Annapolis State MD Zip Code 21401 County of Residence (required) Anne Arundel

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 [X] Married [] Married, but withhold at higher Single Rate [] 4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. []
5 Total number of allowances you are claiming (from page 1 or page 2 of the federal worksheet) 5 0
6 Additional amount, if any, you want withheld from each paycheck 6 \$ 0 or enter an amount
7 I claim exemption from withholding for 2012, 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

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 [X] Married (surviving spouse or unmarried Head of Household) Rate [] Married, but withhold at Single Rate []
1. Total number of exemptions you are claiming from Maryland worksheet 1. 0
2. Additional withholding per pay period under agreement with employer 2. 0 or enter an amount
3. I claim exemption from withholding because I do not expect to owe Maryland tax. See instructions below and check boxes that apply.
[] a. Last year I did not owe any Maryland income tax and had a right to a full refund of all income tax withheld.
AND
[] 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 requirement).
If both a and b apply, enter year applicable _____ (year effective) Enter "EXEMPT" here 3. _____
4. I claim exemption from withholding because I am domiciled in one of the following states. Check state that applies.
[] Pennsylvania (indicate township/borough under Address Continued in section 1 above.) [] Virginia
I further certify that I do not maintain a place of abode in Maryland as described in the instructions on page 2 of the worksheet
Enter "EXEMPT" here 4. _____
5. I certify that I am a legal resident of the state of _____ and am not subject to Maryland withholding because I meet the requirements set forth under the Servicemembers Civil Relief Act, as amended by the Military Spouses Residency Relief Act.
Enter "EXEMPT" here 5. _____

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 line 3, 4 or 5, whichever applies.

Employee's signature (Form is not valid unless you sign it.) _____ Date _____

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)