

**Employee Withholding Exemption Certificate  
FOR MARYLAND STATE GOVERNMENT EMPLOYEES ONLY**

**Section 1 – Employee Information (Please complete form in black ink.)**

Payroll System (check one) <input type="checkbox"/> <b>RG</b> <input type="checkbox"/> <b>CT</b> <input type="checkbox"/> <b>UM</b>	Name of Employing Agency		
Agency Number	Social Security Number	Employee Name	
Home Address (number and street or rural route) <span style="float:right">(apartment number, if any)</span>			
City	State	Zip Code	County of Residence (required) <small>Nonresidents enter Maryland County or Baltimore City where you are employed</small>

**Section 2 – Maryland Withholding**

Maryland worksheet is available online at [https://marylandtaxes.gov/forms/24\\_forms/MW507.pdf](https://marylandtaxes.gov/forms/24_forms/MW507.pdf)

<input type="checkbox"/> Single <input type="checkbox"/> Married (surviving spouse or unmarried Head of Household) Rate <input type="checkbox"/> 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 .....2. _____
3. I claim exemption from withholding because I do not expect to owe Maryland tax. See instructions and check boxes that apply. <input type="checkbox"/> 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 <input type="checkbox"/> 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). If both a and b apply, enteryear applicable _____(year effective) Enter "EXEMPT" here ..... 3. _____
4. I claim exemption from withholding because I am domiciled in the following state. <input type="checkbox"/> 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 <b>state</b> 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. Enter "EXEMPT" here .....5. _____
6. I claim exemption from Maryland <b>local</b> tax because I live in a local Pennsylvania jurisdiction within York or Adams counties. Enter "EXEMPT" here and on line 4 of Form MW507. ....6. _____
7. I claim exemption from Maryland <b>local</b> tax because I live in a local Pennsylvania jurisdiction that does not impose an earnings or income tax on Maryland residents. Enter "EXEMPT" here and on line 4 of Form MW507. ....7. _____
8. 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.....8. _____

**Section 3 – Employee Signature**

<b>Under the penalty of perjury, 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 whichever line(s) I completed.</b>		
_____ Employee's signature	_____ Date	_____ Daytime Phone Number <small>(In case CPB needs to contact you regarding your MW507)</small>

Employer's name and address (For Employer Use Only) <b>Central Payroll Bureau</b> P.O. Box 2396 Annapolis, MD 21404	Federal Employer identification number (EIN)  <span style="font-size: 1.2em; color: blue;">52-6002033</span>
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**Important: The information you supply must be complete. This form will replace in total any certificate you previously submitted.**

Web Site - <https://www.marylandtaxes.gov/statepayroll/payroll-forms.php>