

2009

EMPLOYEE WITHHOLDING ALLOWANCE CERTIFICATE FOR MARYLAND STATE GOVERNMENT EMPLOYEES

RESIDING IN WASHINGTON, D.C.

Form W-4 Department of the Treasury Internal Revenue Service

Form D-4 Office of Tax and Revenue Government of the District of Columbia

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

Form with fields: Payroll System (RG, CT, UM), Name of Employing Agency, Agency Number, Social Security Number, Employee Name, Home Address, Address Continued, City (Washington), State (DC), Zip Code.

Section 2 - Federal Withholding Form W-4

The federal worksheet is available online at http://www.irs.gov/pub/irs-pdf/fw4.pdf

Form with fields: 3 Single/ Married/ Married, but withhold at higher Single rate; 4 If your last name differs from that shown on your social security card, check here; 5 Total number of allowances; 6 Additional amount; 7 I claim exemption from withholding for 2009...

Section 3 - District of Columbia Withholding Form D-4

The District of Columbia worksheet is available online at http://otr.cfo.dc.gov/otr/frames.asp?doc=/otr/lib/otr/tax/forms/D-4.pdf

Form with fields: 1 Tax filing status; 2 Total number of withholding allowances; 3 Additional amount; 4 If you are claiming exemption from withholding, read below and write "EXEMPT" in this box. Includes exemption text and full-time student question.

Section 4 - Employee Signature

Under penalties of perjury/law, 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 (Form is not valid unless you sign it.) and Date fields.

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)

Important: The information you supply must be complete. This form will replace in total any certificate you previously submitted.

Web Site - http://compnet.comp.state.md.us/cpb