# FORM **MW507**

**Purpose.** Complete Form MW507 so that your employer can withhold the correct Maryland income tax from your pay. Consider completing a new Form MW507 each year and when your personal or financial situation changes.

Basic Instructions. Enter on line 1 below, the number of personal exemptions that you will be claiming on your tax return; however, if you wish to claim more exemptions, or if your adjusted gross income will be more than \$100,000 if you are filing single or married filing separately (\$150,000, if you are filing jointly or as head of household), you must complete the Personal Exemption Worksheet on page 2. Complete the Personal Exemption Worksheet on page 2 to further adjust your Maryland withholding based upon itemized deductions, and certain other expenses that exceed your standard deduction and are not being claimed at another job or by your spouse. However, you may claim fewer (or zero) exemptions.

Additional withholding per pay period under agreement with employer. If you are not having enough tax withheld, you may ask your employer to withhold more by entering an additional amount on line 2.

**Exemption from withholding.** You may be entitled to claim an exemption from the withholding of Maryland income tax if:

- a. last year you did not owe any Maryland Income tax and had a right to a full refund of any tax withheld; AND
- this year you do not expect to owe any Maryland income tax and expect to have a right to a full refund of all income tax withheld.

If you are eligible to claim this exemption, complete Line 3 and your employer will not withhold Maryland income tax from your wages. Students and Seasonal Employees whose annual income will be below the minimum

filing requirements should claim exemption

from withholding. This provides more income throughout the year and avoids the necessity of filing a Maryland income tax return.

**Certification of nonresidence in the State of Maryland.** Complete Line 4. This line is to be completed by residents of the District of Columbia, Pennsylvania, Virginia or West Virginia who are employed in Maryland and who do not maintain a place of abode in Maryland for 183 days or more.

Line 4 is **NOT** to be used by residents of other states who are working in Maryland, because such persons are liable for Maryland income tax and withholding from their wages is required.

If you are domiciled in the District of Columbia, Pennsylvania or Virginia and maintain a place of abode in Maryland for 183 days or more, you become a statutory resident of Maryland and you are required to file a resident return with Maryland reporting your total income. You must apply to your domicile state for any tax credit to which you may be entitled under the reciprocal provisions of the law. If you are domiciled in West Virginia, you are not required to pay Maryland income tax on wage or salary income, regardless of the length of time you may have spent in Maryland.

Under the Service members Civil Relief Act, as amended by the Military Spouses Residency Relief Act, you may be exempt from Maryland income tax on your wages if (i) your spouse is a member of the armed forces present in Maryland in compliance with military orders; (ii) you are present in Maryland solely to be with your spouse; and (iii) you maintain your domicile in another state. If you claim exemption under the SCRA enter your state of domicile (legal residence) on Line 5; enter "EXEMPT" in the box to the right on Line 5; and attach a copy of your spousal military identification card to Form MW507. In addition, you must also complete and attach Form MW507M.

Duties and responsibilities of employer. Retain this certificate with your records. You are required to submit a copy of this certificate and accompanying attachments to the Compliance Division, Compliance Programs Section, 301 West Preston Street, Baltimore, MD 21201, when received if:

- you have any reason to believe this certificate is incorrect;
- the employee claims more than 10 exemptions;
- the employee claims an exemption from withholding because he/she had no tax liability for the preceding tax year, expects to incur no tax liability this year and the wages are expected to exceed \$200 a week;
- 4. the employee claims an exemption from withholding on the basis of nonresidence; or
- 5. the employee claims an exemption from withholding under the Military Spouses Residency Relief Act.

Upon receipt of any exemption certificate (Form MW 507), the Compliance Division will make a determination and notify you if a change is required.

Once a certificate is revoked by the Comptroller, the employer must send any new certificate from the employee to the Comptroller for approval before implementing the new certificate.

If an employee claims exemption under 3 above, a new exemption certificate must be filed by February 15th of the following year.

**Duties and responsibilities of employee.** If, on any day during the calendar year, the number of withholding exemptions that the employee is entitled to claim is less than the number of exemptions claimed on the withholding exemption certificate in effect, the employee shall file a new withholding exemption certificate with the employer within 10 days after the change occurs.

## FORM MW507 Employee's Maryland Withholding Exemption Certificate

Print full name	Social Security number				
Street Address, City, State, Zip	County of residence (or Baltimore City)				
☐ Single ☐ Married (surviving spouse or unmarried He	ad of Household) Rate				
. Total number of exemptions you are claiming not to exceed line f in Perso	nal Exemption Worksheet on page 2				
Additional withholding per pay period under agreement with employer					
8. I claim exemption from withholding because I do not expect to owe Marylan  a. Last year I did not owe any Maryland Income tax and had a right t  b. This year I do not expect to owe any Maryland income tax and expec withheld. (This includes seasonal and student employees whose annual ir If both a and b apply, enter year applicable (year effecti	o a full refund of all Income tax withheld and t to have the right to a full refund of all income tax ncome will be below the minimum filing requirements).				
I. I claim exemption from withholding because I am domiciled in one of the District of Columbia Pennsylvania Virginia I further certify that I do not maintain a place of abode in Maryland as de	West Virginia				
5. I certify that I am a legal resident of the state of and am requirements set forth under the Servicemembers Civil Relief Act, as am Enter "EXEMPT" here	ended by the Military Spouses Residency Relief Act.				
Under the <b>penalty of perjury</b> , I further certify that I am entitled to the number of withat I am entitled to claim the exempt status on line 3, 4 or 5, whichever applies.	thholding allowances claimed on line 1 above, or if claiming exemption from withholding,				
Employee's signature	Date				

Federal employer identification number

52-6000802

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

Town of Ocean City 301 N. Baltimore Avenue - Ocean City, Maryland 21842



### **Personal Exemptions Worksheet**

#### Line 1

a.	Multiply the number of your personal exemptions by the value of each exemption from the table below. (Generally the value of your exemption will be \$3,200; however, if your federal adjusted gross income is expected to be over \$100,000, the value of your exemption may be reduced. <b>Do not claim any personal exemptions that you are currently claiming at another job, or any exemptions being claimed by your spouse.</b> To qualify as your dependent, you must be entitled to an exemption for the dependent on your federal income tax return for the corresponding tax year. <b>NOTE:</b> Dependent taxpayers may not claim themselves as an exemption
b.	Multiply the number of additional exemptions you are claiming for dependents who are 65 years of age or older by the value of each exemption from the table below
c.	Enter the estimated amount of your itemized deductions (excluding state and local income taxes) that exceed the amount of your standard deduction, alimony payments, allowable childcare expenses, qualified retirement contributions, business losses and employee business expenses for the year. Do not claim any additional amounts you are currently claiming at another job; or any amounts being claimed by your spouse.  NOTE: Standard deduction allowance is 15% of Maryland adjusted gross income with a minimum of \$1,500 and a maximum of \$2,000
d.	Enter \$1,000 for additional exemptions for taxpayer and/or spouse at least 65 years of age and/or blind d.
e.	Add total of lines <b>a</b> through <b>d</b> e
	Divide the amount on line e by \$3,200. <b>Drop any fraction. Do not round up.</b> This is the <b>maximum</b> number of exemptions you may claim for withholding tax purposes

		If you will file your tax return			
If Your fed	eral AGI is	Single or Married Filing Separately Your Exemption is	Joint, Head of Household or Qualifying Widow(er) <b>Your Exemption is</b>		
\$100,00	0 or less	\$3,200	\$3,200		
Over But not over					
\$100,000	\$125,000	\$1,600	\$3,200		
\$125,000	\$150,000	\$800	\$3,200		
\$150,000	\$175,000	<b>\$0</b>	\$1,600		
\$175,000	\$200,000	\$0	\$800		
In excess of \$200,000		<b>\$0</b>	<b>\$0</b>		

### FEDERAL PRIVACY ACT INFORMATION

Social Security numbers must be included. The mandatory disclosure of your Social Security number is authorized by the provisions set forth in the Tax-General Article of the Annotated Code of Maryland. Such numbers are used primarily to administer and enforce the individual income tax laws and to exchange income tax information with the Internal Revenue Service, other states and other tax officials of this state. Information furnished to other agencies or persons shall be used solely for the purpose of administering tax laws or the specific laws administered by the person having statutory right to obtain it.

## Form W-4 (2013)

**Purpose.** Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

**Exemption from withholding.** If you are exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2013 expires February 17, 2014. See Pub. 505, Tax Withholding and Estimated Tax.

**Note.** If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds \$1,000 and includes more than \$350 of unearned income (for example, interest and dividends).

Basic instructions. If you are not exempt, complete the Personal Allowances Worksheet below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

**Head of household.** Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

**Tax credits.** You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 505 for information on converting your other credits into withholding allowances.

**Nonwage income.** If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity

income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

**Two earners or multiple jobs.** If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

**Nonresident alien.** If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Check your withholding. After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2013. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

**Future developments.** Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at <a href="https://www.irs.gov/w4">www.irs.gov/w4</a>.

		Persoi	nal Allowances Works	<b>heet</b> (Keep for	your records.)		
A	Enter "1" for <b>you</b>	rself if no one else can clair					А
	(	• You are single and have	only one job; or			)	
В	Enter "1" if:	• You are married, have or	nly one job, and your spous	e does not work;	or	. }	В
	(	• Your wages from a second	d job or your spouse's wage	s (or the total of bo	oth) are \$1,500 or less	i. )	
C	Enter "1" for you	r <b>spouse.</b> But, you may cho	ose to enter "-0-" if you are	e married and hav	ve either a working s	pouse or more t	han one
	job. (Entering "-0	)-" may help you avoid havir	ng too little tax withheld.)				· · c
D	Enter number of	dependents (other than yo	our spouse or yourself) you	will claim on you	r tax return		<b>D</b>
E	Enter "1" if you v	vill file as <b>head of househol</b>	<b>d</b> on your tax return (see co	onditions under <b>F</b>	lead of household	above)	E
F	Enter "1" if you h	ave at least \$1,900 of <b>child</b>	or dependent care expen	<b>ses</b> for which you	ı plan to claim a cred	it	F
	(Note. Do not in	clude child support paymer	nts. See Pub. 503, Child and	Dependent Care	Expenses, for details	5.)	
G	Child Tax Credi	t (including additional child	tax credit). See Pub. 972, C	hild Tax Credit, fo	or more information.		
		ome will be less than \$65,00		er "2" for each elig	jible child; then <b>less</b>	"1" if you	have three to six
	eligible children	or <b>less</b> "2" if you have sever	or more eligible children.				
	• If your total incom	me will be between \$65,000 and	d \$84,000 (\$95,000 and \$119,0	000 if married), ente	er "1" for each eligible o	hild	<b>G</b>
Н	Add lines A through	gh G and enter total here. ( <b>Not</b>	e. This may be different from	the number of exer	mptions you claim on y	our tax return.) 🕨	н
	For occuracy		claim adjustments to inco	<b>me</b> and want to re	educe your withholdin	g, see the <b>Deduc</b>	tions
	For accuracy, complete all	and Adjustments Wor	, ,				Alexander and a second as
	worksheets	from all jobs exceed \$40,	ave more than one job or 000 (\$10,000 if married), see	the <b>Two-Earners</b> /	/Multiple Jobs Work	s <b>heet</b> on page 2 t	o avoid having too littl
	that apply.	tax withheld.			•	, 3	3
		• If <b>neither</b> of the above s	ituations applies, <b>stop here</b>	and enter the num	nber from line H on lin	e 5 of Form W-4 k	pelow.
		Separate here an	d give Form W-4 to your er	nployer. Keep the	top part for your re	cords	
			1 34741 1 11		<i>c</i> .: <i>c</i> :		l
Гогт	W-4	Employe	ee's Withholdin	g Allowan	ce Certifica	te	OMB No. 1545-0074
	tment of the Treasury		ntitled to claim a certain numb				2013
Interna	al Revenue Service Your first name an	•	y the IRS. Your employer may I Last name	e required to send	a copy of this form to the	ne IRS.  2 Your social se	20.0
	Tour Hist name an	u middle midai	Last name			2 Your social se	curity number
	Home address (n	umber and street or rural route)					
	Home address (III	uniber and street of rural route)		3 L Single		ied, but withhold at	
	City or town, state	a and 7ID code			legally separated, or spouse		-
	City of town, state	e, and zir code		1			security card, check here
		6.11			1-800-772-1213 for a i	-	
5		of allowances you are claimi	•		. •		5
6		ount, if any, you want withh	. ,				6 \$
7	•	tion from withholding for 20			3	exemption.	
	•	d a right to a refund of <b>all</b> fe			•		
		pect a refund of <b>all</b> federal in					
112		th conditions, write "Exemp				7	
Unde	er penaities of perju	ıry, I declare that I have exami	ned this certificate and, to th	e pest of my know	vieage and belief, it is	true, correct, and	complete.
	loyee's signature					5	
(This	form is not valid ur	nless you sign it.) Ind address (Employer: Complete			9 Office code (optional)	Date ▶	
8							ntification number (EIN)

Form W-4 (2013) Page **2** 

011111	+ (2013)		rage <b>Z</b>
	Deductions and Adjustments Worksheet		
Note	. Use this worksheet <i>only</i> if you plan to itemize deductions or claim certain credits or adjustments to income.		
1	Enter an estimate of your 2013 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes, medical expenses in excess of 7.5% of your income, and miscellaneous deductions	1	\$
2	Enter:   \$12,200 if married filing jointly or surviving spouse \$8,950 if head of household \$6,100 if single or married filing separately	2	\$
3	<b>Subtract</b> line 2 from line 1. If zero or less, enter "-0-"	3	\$
4	Enter an estimate of your 2013 adjustments to income and any additional standard deduction (see Pub. 505)	4	\$
5	Add lines 3 and 4 and enter the total. (Include any amount for credits from the Converting Credits to Withholding		
	Allowances for 2013 Form W-4 worksheet in Pub. 505.)	5	\$
6	Enter an estimate of your 2013 nonwage income (such as dividends or interest)	6	\$
7	Subtract line 6 from line 5. If zero or less, enter "-0-"	7	\$
8	<b>Divide</b> the amount on line 7 by \$3,900 and enter the result here. Drop any fraction	8	
9	Enter the number from the <b>Personal Allowances Worksheet,</b> line H, page 1	9	
10	Add lines 8 and 9 and enter the total here. If you plan to use the Two-Earners/Multiple Jobs Worksheet, also		
	enter this total on line 1 below. Otherwise, <b>stop here</b> and enter this total on Form W-4, line 5, page 1	10	

	Two-Earners/Multiple Jobs Worksheet (See Two earners or multiple jobs on page 1.)					
Note	<b>e.</b> Use this worksheet <i>only</i> if the instructions under line H on page 1 direct you here.					
1	Enter the number from line H, page 1 (or from line 10 above if you used the <b>Deductions and Adjustments Wo</b>	rksheet)	1			
2						
	Find the number in <b>Table 1</b> below that applies to the <b>LOWEST</b> paying job and enter it here. <b>Ho</b> married filing jointly and wages from the highest paying job are \$65,000 or less, do not enter mor		2			
3	If line 1 is <b>more than or equal to</b> line 2, subtract line 2 from line 1. Enter the result here (if zero, e Form W-4, line 5, page 1. <b>Do not</b> use the rest of this worksheet	•	3			
Note	<ul> <li>e. If line 1 is less than line 2, enter "-0-" on Form W-4, line 5, page 1. Complete lines 4 through 9 belo figure the additional withholding amount necessary to avoid a year-end tax bill.</li> </ul>	w to				
4	Enter the number from line 2 of this worksheet					
5	Enter the number from line 1 of this worksheet					
6	<b>Subtract</b> line 5 from line 4		6			
7	Find the amount in <b>Table 2</b> below that applies to the <b>HIGHEST</b> paying job and enter it here .		7	\$		
8	Multiply line 7 by line 6 and enter the result here. This is the additional annual withholding need	ed	8	\$		
9	9 Divide line 8 by the number of pay periods remaining in 2013. For example, divide by 25 if you are paid every two weeks					
	and you complete this form on a date in January when there are 25 pay periods remaining in 2013. Enter the result here					
	and on Form W-4, line 6, page 1. This is the additional amount to be withheld from each paycheck		9	\$		
Table 1						

Table 1				Table 2				
Married Filing Jointly		All Others		Married Filing Jointly		All Others		
If wages from <b>LOWEST</b> paying job are—	Enter on line 2 above	If wages from <b>LOWEST</b> paying job are—	Enter on line 2 above	If wages from <b>HIGHEST</b> paying job are—	Enter on line 7 above	If wages from <b>HIGHEST</b> paying job are—	Enter on line 7 above	
\$0 - \$5,000 5,001 - 13,000 13,001 - 24,000 24,001 - 26,000 26,001 - 30,000 30,001 - 42,000 42,001 - 48,000 48,001 - 55,000 55,001 - 65,000 65,001 - 75,000 75,001 - 85,000 85,001 - 97,000 97,001 - 110,000 110,001 - 120,000 120,001 - 135,000 135,001 and over	0 1 2 3 4 5 6 7 8 9 10 11 12 13 14	\$0 - \$8,000 8,001 - 16,000 16,001 - 25,000 25,001 - 30,000 30,001 - 40,000 40,001 - 50,000 50,001 - 70,000 70,001 - 80,000 80,001 - 95,000 95,001 - 120,000 120,001 and over	0 1 2 3 4 5 6 7 8 9	\$0 - \$72,000 72,001 - 130,000 130,001 - 200,000 200,001 - 345,000 345,001 - 385,000 385,001 and over	\$590 980 1,090 1,290 1,370 1,540	\$0 - \$37,000 37,001 - 80,000 80,001 - 175,000 175,001 - 385,000 385,001 and over	\$590 980 1,090 1,290 1,540	

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person who claims no withholding allowances; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.