# 2013

## Form W-4

Department of the Treasury Internal Revenue Service

### Employee Withholding Allowance Certificate FOR MARYLAND STATE GOVERNMENT EMPLOYEES RESIDING IN WASHINGTON, D.C.

C. 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

Payroll System (check one)	Name of Employing Agency	
RG CT UM C		
Agency Number	Social Security Number	Employee Name
Home Address (number and street or rural route)		Address Continued (apartment number, if any)
City	State	Zip Code
Washington	DC	

#### 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       4       If your last name differs from that shown or check here. You must call 1-800-772-1213         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 or check here. You must call 1-800-772-1213	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)		
<ul><li>6 Additional amount, if any, you want withheld from each paycheck</li></ul>		\$
7 I claim exemption from withholding for 2013, and I certify that I meet <b>both</b> of the following conditions for exemption.		
<ul> <li>Last year I had a right to a refund of all federal income tax withheld because I had no tax liability and</li> <li>This was I support a steril of all federal income tax withheld because I support to have no tax liability.</li> </ul>		
<ul> <li>This year I expect a refund of all federal income tax withheld because I expect to have no tax liability.</li> <li>If you meet both conditions, write "Exempt" here</li></ul>		

#### 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

1	Tax filing status Fill in only one: Single 🗆 Married filing jointly 🗆 Married filing separately 🗆 Head of household 🗆
	Married filing separately on same return
2	Total number of withholding allowances from DC worksheet
3	Additional amount, if any, you want withheld from each paycheck \$
4	If you are claiming exemption from withholding, read below and write "EXEMPT" in this box.
	I am exempt because: last year I did not owe any DC income tax and had a right to a full refund of all DC income tax withheld from me; and this year I do not expect to owe any DC income tax and expect a full refund of all DC income tax withheld from me; and I qualify for exempt status on federal Form W-4.
	If claiming exemption, are you a full-time student? 🗌 Yes 🗌 No

#### Section 4 - Employee Signature

Under penalties of perjury/law, I declare that I have examined this certificate and to the best of my k	nowledge and belief, it is true, correct, and complete.
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)

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