

**Employee Withholding Allowance Certificate
(Instructions)
-- Not Applicable for Pennsylvania Residents--**

If an employee resides **and** works outside of Maryland (MD), the employing agency is responsible for submitting an Employer Withholding Allowance Certificate (EWAC) to Central Payroll Bureau (CPB). This form ensures proper taxation and/or reporting. The agency must validate and retain supporting documents *before* submitting forms to CPB.

Section 1 – Employee Completes

- **Payroll System** – (check one) **RG** – Regular, **CT** – Contractual, **UM** – University of MD
 - **Name of Employing Agency**
 - **Agency Number** – 6-digit payroll number
 - **Social Security Number**
 - **Employee Name**
 - **Home Address, City, State, Zip Code** – **Where I Currently Live/Work**
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Section 2 – Employee Completes

The employee certifies that they are working **and** residing in a jurisdiction other than Maryland. Under a perjury clause, the employee declares that they are not subject to Maryland taxation. Must use original, wet signature. No digital/electronic signature allowed!

Month & Year that Permanent Residency Began – Must enter the month and year.

1. **I am a permanent resident in the state of** – Enter state of permanent domicile. State must match the information in Section 1 (unless they are a military spouse).
 2. **I am currently residing in the state of (Military Spouses Only)** – Enter state of residency. State must match the information in Section 1.
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Section 3 – Agency Completes

- Agency attests that they verified that the employee lives and works outside of Maryland.
- Agency must update the employee's unemployment state on their personnel transaction file.
- New EWAC forms are required when an employee's permanent state changes.
- New EWAC forms will replace previously submitted certificates in its entirety.
- Submit state withholding certificates with each new EWAC [when applicable].

Employee Withholding Allowance Certificate (Instructions)

-- Not Applicable for Pennsylvania Residents--

Employee Withholding Allowance Certificate
COMPTROLLER OF MARYLAND
FOR MARYLAND STATE GOVERNMENT EMPLOYEES WORKING
AND RESIDING IN STATES OTHER THAN MARYLAND
(NOT APPLICABLE FOR PENNSYLVANIA RESIDENTS)

Section 1 – Employee Information

Payroll System (check one) <input type="checkbox"/> RG <input type="checkbox"/> CT <input type="checkbox"/> UM		Name of Employing Agency	
Agency Number		Social Security Number	Employee Name
Home Address – Where I Currently Live/Work (number and street or rural route) (apartment number, if any)			
City	State	Zip Code	

Section 2 - Employees Working and Residing in States Other than Maryland.

I certify that I am working and residing in a jurisdiction other than Maryland and I am not subject to tax withholding and/or reporting for Maryland. Under penalties of perjury, I declare that I have read this certificate. To the best of my knowledge and belief, it is true, correct, and complete.

Month & Year that Permanent Residency Began _____

1. I am a permanent resident in the state of _____
2. I am currently residing in the state of _____
(Military Spouses Only)

Employee's Signature _____ Date _____ Daytime Phone Number
(Must be Original/Wet Signature)
(Digital Signature Not Allowed)

Section 3 – Agency Representative Approval

*I attest that our employee lives **and** works outside of Maryland. We will update their UI state to align with this certificate.*

Printed Name _____ Title _____

Agency Signature _____ Date _____

Employer's name and address (For Employer Use Only) State of Maryland Central Payroll Bureau PO Box 2396 Annapolis, MD 21404	Federal Employer Identification number (EIN)
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Important: The information you supply must be complete. This form will replace in total any certificate you previously submitted.

Employee Withholding Allowance Certificate

COMPTROLLER OF MARYLAND
FOR MARYLAND STATE GOVERNMENT EMPLOYEES WORKING
AND RESIDING IN STATES OTHER THAN MARYLAND
(NOT APPLICABLE FOR PENNSYLVANIA RESIDENTS)

Section 1 – Employee Information

Payroll System (check one) <input type="checkbox"/> RG <input type="checkbox"/> CT <input type="checkbox"/> UM	Name of Employing Agency	
Agency Number	Social Security Number	Employee Name
Home Address – Where I Currently Live/Work (number and street or rural route)		(apartment number, if any)
City	State	Zip Code

Section 2 - Employees Working and Residing in States Other than Maryland.

I certify that I am working **and** residing in a jurisdiction other than Maryland **and** I am not subject to tax withholding and/or reporting for Maryland. Under penalties of perjury, I declare that I have read this certificate. To the best of my knowledge and belief, it is true, correct, and complete.

Month & Year that Permanent Residency Began _____

1. I am a permanent resident in the state of _____

2. I am currently residing in the state of _____
(Military Spouses Only)

Employee's Signature Date Daytime Phone Number
(Must be Original/Wet Signature)
(Digital Signature Not Allowed)

Section 3 – Agency Representative Approval

I attest that our employee lives **and** works outside of Maryland. We will update their UI state to align with this certificate.

Printed Name _____ Title _____

Agency Signature _____ Date _____

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