MARYLAND FORM MW507M

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EXEMPTION FROM MARYLAND WITHHOLDING TAX FOR A QUALIFIED SPOUSE OF A SERVICEMEMBER

2025

 Employee - See "Instructions for employee" for eligibility requirements and other information. Employer - See "Instructions for employer" for the purpose and proper handling of this form. Part 1 - To be completed by the employee For each of the following statements, indicate whether it applies to you. If it applies, check "YES." If it does not apply, check "NO." If you check "NO" to any of the statements, you are not eligible for the withholding exemption. YES NO 13 My servicemember spouse's permanent duty station is in Maryland, an immediate neighboring state, d. I am residing and working in Maryland only to be with my servicemember spouse while they 18 are stationed in Maryland, an immediate neighboring state, or the District of Columbia 19 2. If you checked "YES" to ALL of the statements in item 1, provide the following information for you (the employee) and your military spouse. All boxes must be filled in to be valid. If you checked "NO" to any of the statements in item 1, do not continue because you do not qualify for exemption from Maryland withholding tax for a qualified spouse of a U.S. Armed Forces 21 Servicemember. You must correct your Form MW507 filing if you had entered EXEMPT on line 8 of that form. 23 **Employee** information State of domicile (legal residence) Name (First, MI, Last) Social Security Number 26 Street address where currently residing State ZIP code Military spouse Name (First, MI, Last) Social Security Number information Military spouse's permanent duty station and state State of domicile (legal residence) 33 I declare, under penalties of perjury, that the wages I earn for my services performed in Maryland are exempt from Maryland 3. 34 income tax because I meet the conditions of the Military Spouses Residency Relief Act (50 U.S.C. 4001), and the information I provided on this form is accurate to the best of my knowledge and belief. 36 38 Employee's signature Date signed (MM/DD/YYYY) 39 41 ATTACH A COPY OF YOUR MILITARY ID CARD ISSUED BY THE U.S. DEPT. OF DEFENSE Give the completed Form MW507M with attached copy of your military ID card to your employer. 4.3 Notify your employer if you become ineligible for this exemption - see instructions. You must complete a new Form MW507M each year to maintain the exemption - see instructions. 45 46 Part 2 - To be completed by the employer Note: An employer shall be held harmless from liability for withholding based on the employee's representations on 48 this form. 49 Employer name Employer identification number (EIN) 52 State ZIP code Street address See "Instructions for employer" for the proper handling of this form. 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 61 laws administered by the person having statutory right to obtain it.