## 2021

## Form WV/IT 104

## Employee Withholding Exemption Certificate FOR MARYLAND STATE GOVERNMENT EMPLOYEES ONLY RESIDING IN WEST VIRGINIA

State Tax Department West Virginia

Section 1 – Employee Informa	tion (Please complete form in black in	ık.)		
Payroll System (check one)  RG CT X UM	Name of Employing Agency University of Maryland B	Name of Employing Agency University of Maryland Baltimore County		
Agency Number 360231	Social Security Number	Employee Name		
Home Address (number and street or re	ural route)	,	(apartment number, if any)	
City		State WV	Zip Code	
Section 2 – West Virginia With			tax.wv.gov/Documents/TaxForms/it104.pdf	
If MARRIED, one exemption each     (a) If you claim both of these exem     (b) If you claim one of these exemption (c) If you claim neither (c) If you claim neithe	otions, enter "1"	another certificate.		
<ol> <li>Add the number of exemptions wh</li> <li>If you are Single, Head of Househo</li> </ol>	ich you have claimed above and enter the	e total	n only one job,	
	nheld at a lower rate, check here			
Section 3 – Employee Signatur		ns claimed in this certificate is not in	excess of those to which I am entitled. (This	
form is not valid unless you sign it.)	,			
Employee's signature		Date	Daytime Phone Number (in case CPB needs to contact you regarding your WV/IT-104)	
Employer's name and addres	ss (Employer: Complete name, address & Central Payroll Bureau P.O. Box 2396 Annapolis, MD 21404	EIN only if sending to IRS)	Federal Employer identification number (EIN)	