FORM MW506AM COM/RAD-311 09/22

PHONE

MARYLAND EMPLOYER RETURN OF INCOME TAX WITHHELD

DATE (MMDDYYYY)

COMPTROLLER OF MARYLAND, REVENUE ADMINISTRATION DIVISION 110 CARROLL STREET, ANNAPOLIS, MD 21411-0001



TITLE

24506Y049

AMENDED RETURN

FEIN:	CR #PREVIOUSLY REPO		R PERIOD (MM):	YEAR (YYYY):	CORRECTED A	MOUNTS
MARYLAND STATE INCOME TAX	WITHHELD .		MARYLAND STATE	INCOME TAX WITHHELD	• -	
REMITTED AMOUNT			CREDIT/O	VERPAYMENT		
PAY DATE (MMDDYYYY)	·····	_	REFUND			
			UNDERPAYMENT/R	EMITTANCE		
			PAY DATE (MM/DD	/YYYY)		
I certify that this information is	to the best of my knowledge and belief true, correct, ar	nd complete.	MAKE CHE	CKS PAYABLE TO: COMPT	ROLLER OF MD WH TAX	

SIGNED

Explanation of Change:	24506Y149