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FORM
MW506A
COM/RAD-042
009/22

MARYLAND EMPLOYER RETURN OF INCOME TAX WITHHELD
COMPTROLLER OF MARYLAND, REVENUE ADMINISTRATION DIVISION
110 CARROLL STREET, ANNAPOLIS, MD 21411-0001



23506A099

FEIN: [] CR # [] CORRECTION FOR PERIOD (MM): [] YEAR (YYYY): []

AMENDED RETURN

PREVIOUSLY REPORTED

CORRECTED AMOUNTS

MARYLAND STATE INCOME TAX WITHHELD . . . [] []

MARYLAND STATE INCOME TAX WITHHELD . . . [] []

REMITTED AMOUNT [] []

[] CREDIT/OVERPAYMENT

[] REFUND [] []

MAKE CHECKS PAYABLE TO: COMPTROLLER OF MARYLAND - WH TAX

UNDERPAYMENT/REMITTANCE [] []

I certify that this information is to the best of my knowledge and belief true, correct and complete.

TELEPHONE

DATE (MMDDYYYY)

SIGNED

TITLE

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Final as of 10/26/22

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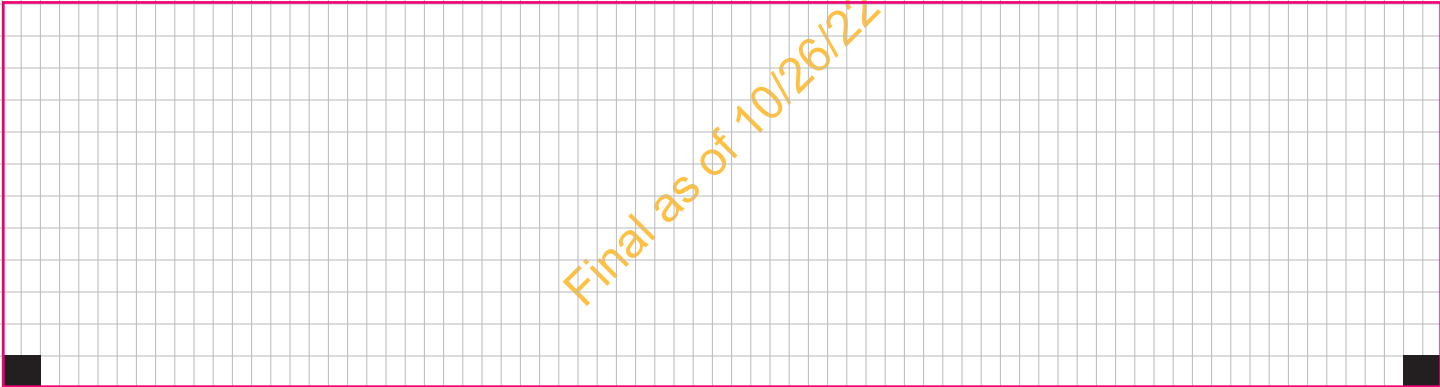
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Explanation of Change:



Final as of 10/26/22



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