502 PERSONAL DECLARATION OF ESTIMATED INCOME TAX DEP 2020



YOUR SOCIAL SECURITY NUMBER (Required)

SPOUSE'S SOCIAL SECURITY NUMBER (Required if applicable)

1. Return by

- 2. Make checks payable to COMPTROLLER OF MARYLAND EST
- 3. DO NOT STAPLE PAYMENT TO FORM.
- 4. Using BLACK PEN print **AMOUNT OF THIS PAYMENT** in field below.