

FORM  
**MW506A**  
COM/RAD-042  
REV. 09/20  
20-49

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



21506A099

**AMENDED RETURN**

FEIN: \_\_\_\_\_ CORRECTION FOR PERIOD: \_\_\_\_\_ YEAR (YYYY): \_\_\_\_\_

**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 1/19/20



21506A199



Explanation of Change:

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Final 11/19/20

