

22  
23 **MARYLAND**  
24 **FORM**  
25 **MW508A**

23 **ANNUAL EMPLOYER WITHHOLDING**  
24 **RECONCILIATION REPORT**

23 **AMENDED**  
24 **TAX YEAR** \_\_\_\_\_

26 NAME: [ ] FEIN: [ ] CR# [ ]

27 Reported NAICS Code: [ ] Corrected NAICS Code: [ ]

28	28	28	28
1. Attach Maryland copies of W-2/1099R forms. Enter number	PREVIOUSLY REPORTED	CORRECTED AMOUNTS	
29 of W-2/1099R forms. . . . .	[ ]	[ ]	[ ]
30 2. Total Maryland withholding tax reported on MW506			
31 this year. . . . .	[ ]	[ ]	[ ]
32 3. Enter total State and local tax combined as shown			
33 on W-2/1099R forms. . . . .	[ ]	[ ]	[ ]
34 3a. Enter total withholding tax paid this year. . . . .	[ ]	[ ]	[ ]
35 3b. Enter total tax exempt credit (MW508CR must be attached			
36 to allow credit.) . . . . .	[ ]	[ ]	[ ]
37 4. Amount of withholding tax due (Subtract lines 3a and 3b from line 3.)	[ ]	[ ]	[ ]
38 5. Overpayment (If line 3 minus lines 3a & 3b is less than			
39 zero, enter the difference here as a positive number.) . . . . .	[ ]	[ ]	[ ]
40 6. Amount of overpayment on line 5 to be applied as a credit. . . . .	[ ]	[ ]	[ ]
41 7. Amount of overpayment on line 5 to be refunded to you. . . . .	[ ]	[ ]	[ ]

42 I declare under the penalties of perjury that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and  
43 belief is a true, correct, and complete return.

44 COM/RAD 043 PHONE NO. \_\_\_\_\_ DATE: \_\_\_\_\_ SIGNED: \_\_\_\_\_ TITLE: \_\_\_\_\_

Final 1/12/20