



151020049

\_\_\_\_\_  
SSN/Taxpayer Identification Number

\_\_\_\_\_  
Taxpayer's first name MI

\_\_\_\_\_  
Last name

\_\_\_\_\_  
Spouse SSN/Taxpayer Identification Number

\_\_\_\_\_  
Spouse's first name MI

\_\_\_\_\_  
Last name

\_\_\_\_\_  
Present address (number and street)

\_\_\_\_\_  
Address (continued)

\_\_\_\_\_  
City State ZIP code

**Amount paid with this form. \$** \_\_\_\_\_ **.00**

**Do not cut. Mail the entire form with your payment.**

**INSTRUCTIONS**

**PAYMENT BY ELECTRONIC FUNDS WITHDRAWAL (direct debit)**

You may pay the balance due by Electronic Funds Withdrawal (direct debit). To have the funds automatically withdrawn you must complete the direct debit payment option information when electronically filing the tax return. You also must complete the authorization area on Form EL101.

**If you elect this option, do not submit Form EL102.**

**OTHER ELECTRONIC PAYMENTS**

If your paper or electronic tax return has a balance due, you may pay electronically at **www.marylandtaxes.com** by selecting BillPay. The amount you designate will be deducted from your bank or financial institution on the date that you choose.

**If you elect this option, do not submit Form EL102.**

**ALTERNATIVE PAYMENT METHODS**

For alternative methods of payment, such as a credit card, visit our Web site at **www.marylandtaxes.com**.

**If you elect this option, do not submit Form EL102.**



**PAYMENT BY CHECK OR MONEY ORDER**

If you elected not to pay electronically, make your check or money order payable to the Comptroller of Maryland. It is recommended that you include your Social Security Number on check using blue or black ink. Do not use red ink. Write the type of tax and year of tax being paid on your check.

If you received a notice showing a balance due, mail your payment with the notice in the return envelope or pay your balance due electronically by visiting **www.marylandtaxes.com**. Otherwise, use Form EL102 to pay any balance due on your electronically filed tax return.

Enter the taxpayer identification number (SSN or Federal Employer Identification Number), name and address in the space provided. If this is a joint return, enter both Social Security Numbers and names as they appear on the return. Write the amount of your payment in the block titled "Amount paid with this form."

**DO NOT SEND CASH.**

**Do not mail this form with any other document.** It must be mailed separately to ensure credit for timely payment.

Mail your completed Form EL102 and payment to:

**Comptroller of Maryland  
Revenue Administration Division  
P.O. Box 2601  
Annapolis, MD 21404-2601**