

**MARYLAND STATE DEPARTMENT OF ASSESSMENTS AND TAXATION**  
**DECLARATION OF ESTIMATED FRANCHISE TAX**  
**FOR TELEPHONE, ELECTRIC, AND GAS COMPANIES**  
**FOR CALENDAR YEAR 2024**

2024	<b>PAYMENT VOUCHER 1</b> <b>DUE APRIL 15, 2024</b>	<b>MARYLAND</b> <b>FORM 29E</b>
Federal I.D. Number _____  Department I. D. Number _____ <div style="text-align: center;">(Required)</div>	Enter Amount of Total Estimated Tax for the Year \$ _____  Enter Total Credit Carryover for the Year \$ _____	
<b>NAME</b>	1. Amount of this Installment \$ _____	
<b>ADDRESS</b>	2. Unused Credit Applied to this Installment \$ _____	
<b>CITY OR TOWN</b> <b>STATE</b> <b>ZIP CODE</b>	3. Amount of this Installment Payment \$ _____	
_____ <b>PRINT NAME OF OFFICER OR AGENT</b>	_____ <b>E-MAIL ADDRESS</b>	
_____ <b>SIGNATURE OF OFFICER OR AGENT</b>	_____ <b>DATE</b>	
_____ <b>TITLE</b>	_____ <b>PHONE NUMBER</b>	
<b><u>RETURN THIS PAYMENT VOUCHER WITH REMITTANCE TO:</u></b> <b>Department of Assessments and Taxation</b> <b>Franchise Tax Unit</b> <b>700 East Pratt Street, Ste. 2700</b> <b>Baltimore, Maryland 21202-6377</b>		
<p>Tax payments of \$10,000 or more must be remitted by electronic funds transfer. If remittance is made through EFT, mark the box and return this payment voucher to the Department.</p> <p><b><u>Please use the bank account number as indicated in the ACH credit tax payment instructions</u></b></p>		