## MARYLAND FORM 500CRW

OD FICCAL VEAD DECIMAING

## WAIVER REQUEST FOR ELECTRONIC FILING OF FORM 500CR

2021 ENDING



This form must be attached to form 500CR

OR FISCAL YEAR BEGINNING2021, ENDING	
Federal Employer Identification Number (9 digits) or Social Security Number	eck here for Identity Theft
Name	
Current Mailing Address Line 1 (Street No. and Street Name or PO Box)	
Current Mailing Address Line 2 (Apt No., Suite No., Floor No.)	3/22
City or Town State ZIP Code + 4	
Foreign Country Name Foreign Provin	ce/State/County
Foreign Postal Code	
Reason For Waiver Request (check only one):	
► ☐ A. Do not have access to a computer.	
▶ ☐ B. Software does not support electronic filing of Form 500CR.	
C. Other (explain)	
Signature	

## Instructions

Use this form to request a waiver from filing the Form 500CR electronically. You must include a reason for the waiver request. If a reason is not checked or an explanation given as to why you cannot file electronically, the Form 500CR will not be processed.

The waiver request should be included with the Form 500CR in the filing of your return.