



225050099

OR FISCAL YEAR BEGINNING _____ 2022, ENDING _____

Print Using Blue or Black Ink Only

Social Security Number _____ Spouse's Social Security Number _____

First Name _____ MI _____

Last Name _____

Spouse's First Name _____ MI _____

Does your name match the name on your social security card? If not, to ensure you get credit for your personal exemptions, contact SSA at 1-800-772-1213 or visit www.ssa.gov.

Spouse's Last Name _____

Current Mailing Address Line 1 (Street No. and Street Name or PO Box) _____ Maryland County _____

Current Mailing Address Line 2 (Apt No., Suite No., Floor No.) _____ City, Town or Taxing Area _____

Name of county and incorporated city, town or special taxing area in which you were employed on the last day of the taxable period if you earned wages in Maryland. (See Instruction 6.)

City or Town _____ State _____ ZIP Code + 4 _____

Foreign Country Name _____ Foreign Province/State/County _____

Foreign Postal Code _____

FILING STATUS See Instruction 1 to determine if you are required to file.

- CHECK ONE BOX 1. Single (If you can be claimed on another person's tax return, use Filing Status 6.) 2. Married filing joint return or spouse had no income 3. Married filing separately, Spouse's SSN 4. Head of household 5. Qualifying widow(er) with dependent child 6. Dependent taxpayer (Enter 0 in Exemption Box (A) - See Instruction 8.)

RESIDENCE INFORMATION See Instruction 9.

Enter 2-letter state code for your state of legal residence. If PA resident, enter both County and City, Borough or Township. Were you a resident of another state for the entire year of 2022? If no, attach explanation. Are you or your spouse a member of the military? Did you file a Maryland income tax return for 2021? Dates you resided in Maryland for 2022. If none, enter "NONE": FROM TO (MMDDYYYY). Check here for Maryland taxes withheld in error.

EXEMPTIONS See Instruction 10. Check appropriate box(es). NOTE: If you are claiming dependents, you must attach the Dependents' Information Form 502B to this form in order to receive the applicable exemption amount.

- A. Yourself Spouse Enter number checked See Instruction 10 A. \$
B. 65 or over Blind Enter number checked X \$1,000 B. \$
C. Enter number from line 3 of Dependent Form 502B See Instruction 10 C. \$
D. Enter Total Exemptions (Add A, B and C.) Total Amount D. \$



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Name _____ SSN _____

INCOME AND ADJUSTMENTS INFORMATION

(See Instruction 11.)

(1) FEDERAL INCOME (LOSS)

(2) MARYLAND INCOME (LOSS)

(3) NON-MARYLAND INCOME (LOSS)

Table with 4 columns: Line number, Description, (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows 1-17 include items like Wages, interest, dividends, etc.

ADDITIONS TO INCOME (See Instruction 12.)

Table with 4 columns: Line number, Description, (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows 18-21 include Non-Maryland loss and adjustments.

SUBTRACTIONS FROM INCOME (See Instruction 13.)

Table with 4 columns: Line number, Description, (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows 22-25 include Military Income and other subtractions.

DEDUCTION METHOD See Instruction 15. (All taxpayers must select one method and check the appropriate box.)

Table with 4 columns: Line number, Description, (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows 26-31 include Standard Deduction Method and Itemized Deduction Method.

MARYLAND TAX COMPUTATION - COMPLETE FORM 505NR BEFORE CONTINUING.

Table with 4 columns: Line number, Description, (1) FEDERAL INCOME (LOSS), (2) MARYLAND INCOME (LOSS), (3) NON-MARYLAND INCOME (LOSS). Rows 32-33 include Maryland tax and poverty level credit.



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Name _____ SSN _____

- 34. Other income tax credits... 35. Business tax credits... 36. Total credits... 37. Maryland tax after credits... 38. Contribution to Chesapeake Bay... 39. Contribution to Developmental Disabilities... 40. Contribution to Maryland Cancer Fund... 41. Contribution to Fair Campaign Financing Fund... 42. Total Maryland income tax and contributions... 43. Total Maryland tax withheld... 44. 2022 estimated tax payments... 45. Nonresident tax paid by pass-through entities... 46. Refundable income tax credits... 47. Total payments and credits... 48. Balance due... 49. Overpayment... 50. Amount of overpayment TO BE APPLIED TO 2023 ESTIMATED TAX... 51. Amount of overpayment TO BE REFUNDED TO YOU... 52. Interest charges... 53. TOTAL AMOUNT DUE

DIRECT DEPOSIT OF REFUND (See Instruction 22.) Verify that all account information is correct and clearly legible. If you are requesting direct deposit of your refund, complete the following. For Splitting Direct Deposit, use Form 588.

- Check here if this refund will go to an account outside of the United States. Check here if you authorize the State of Maryland to issue your refund by direct deposit.

54a. Type of account: Checking Savings 54b. Routing Number (9-digits) 54c. Account Number 54d. Name(s) as it appears on the bank account

Check here if you authorize your preparer to discuss this return with us. Check here if you authorize your paid preparer not to file electronically. Check here if you agree to receive your 1099G Income Tax Refund statement electronically (See Instruction 25). Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements and to the best of my knowledge and belief it is true, correct and complete. If prepared by a person other than taxpayer, the declaration is based on all information of which the preparer has any knowledge.

Your signature Date Spouse's signature Date

Taxpayer(s) daytime phone number Signature of Preparer other than taxpayer (Required by Law)

Street address of Preparer/Firm Printed name of the Preparer/Firm's name

City, State, ZIP Code + 4 Telephone number of Preparer Preparer's PTIN (Required by law)

CODE NUMBERS (3 digits per line)



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For returns filed without payments, mail your completed return to:

Comptroller of Maryland
Revenue Administration Division
110 Carroll Street
Annapolis, MD 21411-0001

To make an online payment, scan the QR code below and follow instructions.



For returns filed with payments, attach check or money order to Form PV. Make checks payable to Comptroller of Maryland. Do not attach Form PV or check/money order to Form 505. Place Form PV with attached check/money order on TOP of Form 505 and mail to:

Comptroller of Maryland
Payment Processing
PO Box 8888
Annapolis, MD 21401-8888

Final as of 12/01/2022