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Place your W-2 wage and tax statements and ATTACH HERE

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NONRESIDENT INCOME TAX RETURN

	2023, ENDING			
Social Security Number Spous	se's Social Security Number			
First Name	MI			
Last Name				
Spouse's First Name	MI			ity card? If not, to ensure you get 800-772-1213 or visit 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 N	No., Floor No.)		City, Town or Taxing Are Name of county and incorporated employed on the last day of the ta Instruction 6.)	23 city, town or special taxing area in which you wer xable period if you earned wages in Maryland. (Se
City or Town		tate ZIP Code + 4		
Foreign Country Name		Earoi	an Drovinco/State/County	
foreign Country Name		Forei	gn Province/State/County	
Foreign Postal Code				
Foreign Postal Code FILING STATUS See Instruction 1 to Single (If you can be c	claimed on another persor	quired to file.	ad of household	
Foreign Postal Code	claimed on another persor	equired to file. n's tax 4 Hea	ad of household alifying Surviving Spouse	e with dependent child
Foreign Postal Code FILING STATUS See Instruction 1 to CHECK ONE POX	claimed on another persor	equired to file. n's tax 4 Hea 5 Qu ome 6 De	alifying Surviving Spouse pendent taxpayer (Enter	e with dependent child 0 in Exemption Box (A) -
Foreign Postal Code FILING STATUS See Instruction 1 to CHECK ONE BOX 2. Married filing joint retu 3. Married filing separately	claimed on another person us 6.) urn or spouse had no inco y, Spouse's SSN▶	equired to file. n's tax 4 Hea 5 Qu ome 6 De	alifying Surviving Spouse	
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Foreign Postal Code FILING STATUS See Instruction 1 to 1. Single (If you can be construction) Single (If you can be construction) 80X 2. Married filing joint return 3. Married filing separately RESIDENCE INFORMATION See Instant If PA resident, enter both County Were you a resident of another state Are you or your spouse a member of Did you file a Maryland income tax re Dates you resided in Maryland for 2020	Laimed on another person us 6.) urn or spouse had no inco y, Spouse's SSN▶ struction 9. te of legal residence. ▶ and C for the entire year of 200 the military? uturn for 2022? Ye 23. If none, enter "NONE"	equired to file. n's tax 4. 4. 4. 5. 20. 5.	alifying Surviving Spouse pendent taxpayer (Enter e Instruction 8.) on. Yes No Yes No s it a Resident or a	0 in Exemption Box (A) -
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NONRESIDENT INCOME TAX RETURN

	e SSN			
	OME AND ADJUSTMENTS INFORMATION	(1) FEDERAL INCOME	(2) MARYLAND INCOME	(3) NON-MARYLAND
See	Instruction 11.)	(LOSS)	(LOSS)	INCOME (LOSS)
1.	Wages, salaries, tips, etc 1.	00	00	00
2.	Taxable interest income	00	00	00
3.	Dividend income	00	00	00
4.	Taxable refunds, credits or offsets of state and			
	local income taxes	00		00
5.	Alimony received	00	00	00
6.	Business income or (loss)6.	00	00	00
7.	Capital gain or (loss)	0.0	00	00
	Other gains or (losses) (from federal Form 4797)8.	0.0	00	00
9.	Taxable amount of pensions, IRA distributions,			
	and annuities	00		00
0.	Rents, royalties, partnerships, estates, trusts, etc.			
	(Circle appropriate item.) 10.	00	00	00
1.	Farm income or (loss)	0.0	00	00
	Unemployment compensation (insurance)12.	0.0		00
	Taxable amount of Social Security and			
	Tier 1 Railroad Retirement benefits	00		00
4	Other income (including lottery or other gambling			
	winnings)	00	00	0.0
F	Total income (Add lines 1 through 14.)		00	00
		00	000	00
ο.	Total adjustments to income from federal return	00	00	0.0
-	(IRA, alimony, etc.)		00	00
	Adjusted gross income (Subtract line 16 from line 15.) ► 17.	00	00	00
	TITIONS TO INCOME (See Instruction 12.)		10	0.0
	Non-Maryland loss and adjustments			
	Other (Enter code letter(s) from Instruction 12.) ▶			
	Total additions (Add lines 18 and 19. See instructions.)			
	Total federal adjusted gross income and Maryland additions (Ad	d lines 17 (Column 1) and	20.) 21.	00
	TRACTIONS FROM INCOME (See Instruction 13.)			0.0
	Taxable Military Income of Nonresident			
	Other (Enter code letter(s) from Instruction 13.) ▶			
4	Total subtractions (Add lines 22 and 23. See instructions.)		► 24	
5.	Maryland adjusted gross income before subtraction of non-Mary	land income. (Subtract line	e 24 from line 21.) 25.	
5. ED	UCTION METHOD See Instruction 15. (All taxpayers must s	land income. (Subtract line select one method and ch	e 24 from line 21.) 25. eck the appropriate box.)	
5. ED		land income. (Subtract line select one method and ch	e 24 from line 21.) 25.	
5. ED 6.	UCTION METHOD See Instruction 15. (All taxpayers must s a. STANDARD DEDUCTION METHOD (Enter amount on line 2 ITEMIZED DEDUCTION METHOD (Complete lines 26b, c ar	land income. (Subtract line select one method and cho 6a.) Build Balance Comparison C	24 from line 21.)	
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maryland form 505

Name SSN				
34. Other income tax credits for individuals from Part A				00
35. Business tax credits				m 500CR
36. Total credits (Add lines 33 through 35.)				00
37. Maryland tax after credits (Subtract line 36 from line	e 32d.) If less t	.han 0, enter 0	37	00
38. Contribution to Chesapeake Bay and Endangered Sp	ecies Fund (See	e Instruction 21.) ▶ 38.	0.0	
39. Contribution to Developmental Disabilities Services a	and Support Fur	nd (See Instruction 21.) .► 39.	00	
40. Contribution to Maryland Cancer Fund (See Instruction	ion 21.)	· · · · · · · · · · · · · · • 40	00	
41. Contribution to Fair Campaign Financing Fund (See	Instruction 21.)		00	
42. Total Maryland income tax and contributions (A	Add lines 37 thr	ough 41.)	42.	00
43. Total Maryland tax withheld (Enter total from your	W-2 and 1099	forms and attach if MD tax is withhe	ld.)▶ 43.	
44. 2023 estimated tax payments, amount applied from	ı 2022 return, p	payments made with an extension request	: and	
Form MW506NRS			► 44	•
45. Nonresident tax paid by pass-through entities (Atta	ich Maryland S	Schedule K-1 (510/511))	▶ 45.	•
46. Refundable income tax credits from Part CC, line 10) of Form 502CF	R (Attach Form 502CR. See Instruction 2	22.) . 46.	
47. Total payments and credits (Add lines 43 through 4	6.)		47.	
48. Balance due (If line 42 is more than line 47, subtract	ct line 47 from l	line 42.)	► 48.	•
49. Overpayment (If line 42 is less than line 47, subtract	ct line 42 from l	line 47.)	▶49	•
50. Amount of overpayment TO BE APPLIED TO 2024	ESTIMATED T	ΑΧ	> 50.	•
51. Amount of overpayment TO BE REFUNDED TO YO	U (Subtract line	e 50 from line 49.) See line 54 REFUN	ND ▶ 51.	•
52. Interest charges from Form 502UP c	or for late filing	(See Instruction 23.) Tota	Ⅰ.▶52	•
Check here if you are attaching Form 502	2UP.			
53. TOTAL AMOUNT DUE (Add line 48 and line 52.) II	F \$1 OR MORE	, PAY IN FULL WITH THIS RETURN.		
Include Form PV			▶ 53	
 54a. Type of account: ► Checking Savings 54c. Account Number ► 		4b. Routing Number (9-digits) ▶		-
			on the bank account	
Check here if you authorize your preparer to discuss electronically. Check here if you agree to receive you perjury, I declare that I have examined this return, including correct and complete. If prepared by a person other than tax	our 1099G Incom g accompanying s	schedules and statements and to the best of	Instruction 25). Under penali my knowledge and belief it is	ties of s true,
Your signature	Date	Spouse's signature	Date	2
•				
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	2	
City, State, ZIP Code + 4		Telephone number of Preparer	Preparer's PTIN (Required)	d by law)
		►	CODE NUMBERS (3 digits)	per line)



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

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

For returns filed with payments, attach check or money order to Form PV. Make checks payable to Comptroller of Maryland. On your check or money order, you must include the social security number/Individual Taxpayer Identification Number of the taxpayer if filing individually, if filing jointly, you must include the social security number/ ITIN of the primary taxpayer on the check. Failure to include this information will delay the processing of your payment. 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 To make an online payment, scan the QR code below and follow instructions.

