MARYLAND FORM **502** 

## RESIDENT INCOME TAX RETURN



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	OR FISCAL YEAR BE	EGINNING	2021, ENDING				
	Your Social Security N	Security Number Spouse's Social Security Number					
Ink Only	Your First Name	MI	Does your name match the name on your social security				
or Black	Your Last Name		<ul> <li>card? If not, to ensure you get credit for your personal exemptions, contact SSA at 1-800-772-1213 or visit</li> </ul>				
Using Blue	Spouse's First Name	MI	www.ssa.gov.				
Print Us	Spouse's Last Name						
			te No., Floor No.)  City or Town			State ZIP Code + 4	
+	Current Making Addres	s Line 2 ( <b>Apt No., Sui</b> l	ce No., Floor No.) Cary or lown			state ZIP Code + 4	
S SE	Foreign Country Name			Fore	eign Province/State/C	county	
TTACH HI	Foreign Postal Code						
Place your W-2 wage and tax statements and ATTACH HERE with one staple. Do not attach chack or money order to home stople and such wheels or money order to from 502. Attach wheels or money order to Form 94.	4 Digit Political Su	a Instruction 6. F	address of taxing area as of Decipart-year residents see Instruction 6)  Maryland Political Subdivi	ection 26.		_	
W-2 w	Maryland Physical	Address Line 2 (Apt No.	, Suite No., Floor No.) (No PO Bax)				
your n one	Oty		MD State	ZIP Code + 4	Maryland Co	- miles	
Place with	City		State	ZIF (xode + 4	maryland Co	uncy	
+	_FILING STATUS	1. Single	(If you can be claimed on anoth	er person's ta	ix return, use Fil	ing Status 6.)	
	CHECK ONE BOX ►	2. Marrie	d filing joint return or spouse ha	d no income			
	See Instruction 1 if you are required to file.	3. Marrie	d filing separately, Spouse SSN	<b>-</b>			
	required to file.		of household				
5. Qualifying widow(er) with dependent child							
6. Dependent taxpayer (Enter 0 in Exemption Box (A) - See Inst						n 7.)	
	PART-YEAR RESIDENT See Instruction 26.	Dates of Maryland Residence (MM DD YYYY) FROMTO  Other state of residence:  If you began or ended legal residence in Maryland in 2021 place a P in the box					