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**MARYLAND
FORM
510D**

**PASS-THROUGH ENTITY
DECLARATION OF
ESTIMATED INCOME TAX**



20510D099

2020

OR FISCAL YEAR BEGINNING [] 2020, ENDING []

[]

Federal Employer Identification Number (9 digits)

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.)

City or town

State

ZIP Code

+4

For Office Use Only

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USE THIS FORM TO REMIT ANY ESTIMATED PAYMENT DUE AT THIS TIME. IF FORMS ARE NEEDED TO MAKE ADDITIONAL INSTALLMENTS OF THE CURRENT TAX YEAR, SEE THE INSTRUCTIONS FOR MORE INFORMATION.

TYPE OF ENTITY - Check the applicable box.

S Corporation

Partnership

Limited Liability Company

Business Trust

IMPORTANT: Review the instructions before completing this form. If you are using this form for subsequent estimated payments, you **do not** need to complete this worksheet if you previously have calculated the amount you need to pay each quarter.

ESTIMATED TAX WORKSHEET

1. Taxable income of nonresident individual members (including fiduciaries) expected for the tax year **BEGINNING** in 2020. 1. [] []
2. Estimated income tax liability (5.75% of line 1.) 2. [] []
3. Special nonresident tax (2.25% of line 1.) 3. [] []
4. Taxable income of nonresident entities expected for the tax year **BEGINNING** in 2020 . . 4. [] []
5. Estimated tax liability (8.25% of line 4.) 5. [] []
6. Estimated tax due for the year (Add lines 2, 3 and 5.) 6. [] []
7. Estimated tax due per quarter (Line 6 divided by four.) 7. [] []

Estimated tax paid for 2020 with this declaration. ▶ \$ [] []

Make checks payable to and mail to:

**Comptroller Of Maryland
Revenue Administration Division
110 Carroll Street
Annapolis, Maryland 21411-0001**

(Write Your Federal Employer Identification Number On Check Using Blue Or Black Ink.)