

ANNUAL REPORT

MARYLAND STATE DEPARTMENT OF ASSESSMENTS AND TAXATION
TAXPAYER SERVICES DIVISION P.O. Box 17052, Baltimore, Maryland 21297-1052

20 _____ Form 3 Due April 15th Date Received by Department

DOMESTIC AND FOREIGN CREDIT UNIONS

NAME OF BUSINESS _____

MAILING ADDRESS _____

Check here if this is a change of mailing address _____

DEPARTMENT ID NUMBER* _____

(Letter Prefix followed by 8-digits)

*Required so that the proper account is credited _____

FEDERAL EMPLOYER IDENTIFICATION NUMBER _____

(9-digit number assigned by the IRS)

FEDERAL PRINCIPAL BUSINESS CODE _____

(If known, the 6-digit number on file with the IRS)

Include an email address below to receive important reminders from the Department of Assessments and Taxation

SECTION I

A. Date of incorporation/formation _____ State of incorporation/formation _____

B. Does the credit union do any part of its business in the State of Maryland? YES NO. Date began _____

C. If the answer to question B is yes, provide the location from which the business of the credit union is directed and managed.

(Street address, city/town, county and zip code; PO Box is not acceptable)

D. Type or print names and addresses of officers and names of directors (corporations only):

OFFICERS

President _____

Vice President _____

Secretary _____

Treasurer _____

DIRECTORS NAMES ONLY

_____	_____
_____	_____
_____	_____

***REQUIRED INFORMATION FOR CERTAIN CORPORATIONS, MD CODE, TAX PROPERTY §11-101 – PLEASE SEE INSTRUCTIONS**

*Total Number of Directors _____

*Total Number of Female Directors _____

SECTION II – ALL BUSINESS ENTITIES COMPLETE

By signing this form below, you declare, under the penalty of perjury, and pursuant to Tax-Property Article 1-201 of the Annotated Code of Maryland, that this Annual Report, including any accompanying forms, schedules, and/or statements, has been examined by you and, to the best of your knowledge and belief, is a true, correct, and complete Annual Report for the Entity listed in Section I.

Corporate Officer or Principal of Entity:

PRINT NAME & TITLE _____

X SIGNATURE _____ DATE _____

PHONE NUMBER _____ EMAIL ADDRESS _____

Firm or Individual, other than taxpayer, preparing this Annual Report/Personal Property Tax Return:

PRINT NAME OF FIRM _____

X SIGNATURE _____ DATE _____

PHONE NUMBER _____ EMAIL ADDRESS _____

INSTRUCTIONS

1. A Maryland Form 3 must be filed by all credit unions that are incorporated, qualified or registered to do business in the State of Maryland. This report is required even if the business owns no property in the State or has not conducted any business activity during the year. In addition, failure to file will result in forfeiture of the charter of a domestic corporation or forfeiture of the right or a foreign corporation to do business in the State. A filing fee of \$300 must be included with the report.

2. At the beginning of each year, the Department makes the Form 3 available on its website. It is the responsibility of the business to obtain and file a report on time. The due date for filing is April 15. Should the 15th fall on a weekend, the due date is the Monday immediately following April 15th.

There is a \$300 Filing fee required to accompany the Form 3.

Please mail this Form 3 to:

Maryland State Department of Assessments and Taxation, Taxpayer Services
Business Personal Property Division
P.O. Box 17052
Baltimore, Maryland 21297-1052

3. The Department may grant a 2-month extension to file the report. To request an internet extension go to dat.maryland.gov, Online Services select the link Personal Property Extension or go to <https://dat.maryland.gov/Pages/Services.aspx> and select the Personal Property Filing Extension link. This option is free of charge and offers Department I.D. look-up, extension verification, confirmation numbers and recall lists by confirmation number. Always print and keep a copy of the confirmation number. The Department will automatically accept it as evidence of a valid approved extension in case there is ever a problem. The Department only accepts online extension requests. This system will open mid-December and will be available 24 hours a day, 7 days a week. Please file early to avoid possible delays due to the heavy usage of this system which occurs in the last week prior to April 15.

The Department ID number must be provided to ensure proper recording of any extension request. Requests with incomplete or missing Department ID numbers will not be recorded. No additional extension to file will be allowed. Extensions approved by the Internal Revenue Service or Maryland Comptroller of the Treasury for income tax returns will not be accepted.

If you have questions or comments contact
Business Personal Property Division:
Phone: 410-767-1170, 888-246-5941 within Maryland
Email: SDAT.PersProp@Maryland.gov