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|----------|----------------|--|----------|--------------------|---|
| LINE | FIELD | DESCRIPTION 505 | FIELD | FIELD TYPE | COMMENTS, ACCEPTABLE VALUES, EDITS |
| NUMBER | FIELD | DESCRIPTION 505 | SIZE | FIELD ITFE | COMMENTS, ACCEPTABLE VALUES, EDITS |
| | | | - | | |
| 1 | Header | Header Version Number | 2 | Alpha-Numeric | "T1" |
| 2 | Header | Developer Code | 4 | Numeric | NACTP Vendor Code |
| 2 | Header | · | 4 | Alpha | MD |
| 3 | | Jurisdiction Code | 2 | | |
| 4 | Header | Description | 3 | Numeric | 505 |
| 5 | Header | Specification Version | 2 | Numeric | 01 |
| 6 | Header | Software Form Version | 2 | Numeric | 00-99 |
| 7 | A | Primary Social Security Number | 9 | Numeric | |
| 8 | Α | Secondary Social Security Number | 9 | Numeric | |
| 9 | В | Primary Last Name | 20 | Alpha | Last Name of Taxpayer |
| 10 | В | Primary First Name | 20 | Alpha | First Name of Taxpayer |
| 11 | В | Primary Middle Initial | 1 | Alpha | Middle Initial of Taxpayer |
| 12 | В | Spouse Last Name | 20 | Alpha | Last Name of Spouse |
| 13 | В | Spouse First Name | 20 | Alpha | First Name of Spouse |
| 14 | В | Spouse Middle Initial | 1 | Alpha | Middle Initial of Spouse |
| | В | Street Address 1 | 30 | Alpha-Numeric | Street No. and Street Name or PO Box |
| 16 | В | Street Address 2 | 30 | Alpha-Numeric | Apt No., Suite No., Floor No. |
| 17 | B | City | 20 | Alpha-Numeric | City, Town, or Post Office, Include Foreign Country |
| | D | | 20 | | |
| 18 | D | State | 40 | Alpha | Standard Post Office 2 letter abbreviation |
| 19 | В | Zip | 10 | | 5 + 4 US Zip code, or up to 10 character foreign ZIP |
| 20 | С | Filing Status - Single | 1 | Numeric | Blank or "1". "1" = box is marked, Blank = box is not marked |
| 21 | C | Filing Status - Married Joint | 1 | Numeric | Blank or "2". "2" = box is marked, Blank = box is not marked |
| 22 | С | Filing Status - Married Separate | 1 | Numeric | Blank or "3". "3" = box is marked, Blank = box is not marked |
| 23 | С | Filing Status - Head of Household | 1 | Numeric | Blank or "4". "4" = box is marked, Blank = box is not marked |
| 24 | С | Filing Status - Qualifying widow(er) with dependent child | 1 | Numeric | Blank or "5". "5" = box is marked, Blank = box is not marked |
| 25 | С | Filing Status - Dependent Taxpayer | 1 | Numeric | Blank or "6". "6" = box is marked, Blank = box is not marked |
| 26 | С | Married Filing Separate - Spouse SSN | 9 | Numeric | |
| 27 | D | State of Legal Residence | 2 | Numeric | |
| 28 | E | Checkbox for Maryland taxes withheld in error | 1 | Alpha | Blank or "Y". "Y" = box is marked, Blank = box is not marked |
| 29 | F | Exemptions - You are over 65 | 1 | Alpha | Blank or "Y". "Y" = box is marked, Blank = box is not marked |
| 30 | F | Exemptions - You are Blind | 1 | Alpha | Blank or "Y". "Y" = box is marked, Blank = box is not marked |
| 31 | F | Exemptions - Spouse is over 65 | 1 | Alpha | Blank or "Y". "Y" = box is marked, Blank = box is not marked |
| 32 | F | Exemptions - Spouse is Blind | 1 | Alpha | Blank or "Y". "Y" = box is marked, Blank = box is not marked |
| 33 | F | Exemptions - Total | 2 | Numeric | 0 - 99 or Blank |
| 34 | 17 (Col. 1) | Federal Adjusted Gross Income | 12 | Numeric | Whole dollars only |
| 35 | 17 (Col. 1) | Non-Maryland Adjusted Gross Income | 12 | Numeric | Whole dollars only |
| | 19 | | 12 | | |
| 36 37 | | Other Additions Code Letter | 2 | Alpha | Code can be 1 or 2 letters. Single letter codes must be in first position |
| | 19 | Other Additions Code Letter | 2 | Alpha | Code can be 1 or 2 letters. Single letter codes must be in first position |
| 38 | 19 | Other Additions Code Letter | 2 | Alpha | Code can be 1 or 2 letters. Single letter codes must be in first position |
| 39 | 19 | Other Additions Code Letter | 2 | Alpha | Code can be 1 or 2 letters. Single letter codes must be in first position |
| 40 | 20 | Total Additions to Maryland Income | 12 | Numeric | Whole dollars only |
| 41 | 22 | Total Military Income of Nonresident | 12 | Numeric | Whole dollars only |
| 42 | 23 | Other Subtractions Code Letter | 2 | Alpha | Code can be 1 or 2 letters. Single letter codes must be in first position |
| 43 | 23 | Other Subtractions Code Letter | 2 | Alpha | Code can be 1 or 2 letters. Single letter codes must be in first position |
| 44 | 23 | Other Subtractions Code Letter | 2 | Alpha | Code can be 1 or 2 letters. Single letter codes must be in first position |
| 45 | 23 | Other Subtractions Code Letter | 2 | Alpha | Code can be 1 or 2 letters. Single letter codes must be in first position |
| 46 | 24 | Total Subtractions from Maryland Income | 12 | Numeric | Whole dollars only |
| 47 | 26a | Deduction Method -Standard | 1 | Alpha | Check box, Blank or "S". "S" = box is marked, Blank = box is not marked |
| 48 | 26a | Deduction Method - Itemized | 1 | Alpha | Check box, Blank or "I". "I" = box is marked. Blank = box is not marked |
| 49 | 26b | Total Federal Itemized Deductions | 12 | Numeric | Whole dollars only |
| 50 | 26c | State and Local Income Taxes Included in Federal Schedule A | 12 | Numeric | Whole dollars only Whole dollars only |
| 51 | 26 | Deduction Amount | 12 | Numeric | Whole dollars only |
| 52 | | Poverty Level Credit | 12 | | |
| | 33 | | | Numeric | Whole dollars only |
| 53 | 38 | Contribution to Chesapeake Bay/Endangered Species | 12 | Numeric | Whole dollars only |
| 54 | 39 | Contribution to Developmental Disabilities Services and Support Fund | 12 | Numeric | Whole dollars only |
| | | | 12 | Numeric | Whole dollars only |
| 55 | 40 | Contribution to Maryland Cancer Fund | | | |
| 56 57 | 40 41 43 | Contribution to Maryland Canicer Fund Contribution to Fair Campaign Financing Fund Total Maryland and Local Tax Withheld | 12 | Numeric Numeric | Whole dollars only Whole dollars only |

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|-------------|-----|---|---------|---------------|--|--|--|--|--|--|
| 58 | 44 | Est Tax paid, applied from prior year return, Amt Paid with Ext. & Amt Paid with MW506NRS | 12 | Numeric | Whole dollars only | | | | | |
| 59 | 45 | Nonresident Tax Paid by Pass Through Entities | 12 | Numeric | Whole dollars only | | | | | |
| 60 | 48 | Balance Due | 12 | Numeric | Whole dollars only | | | | | |
| 61 | 49 | Overpayment | 12 | Numeric | Whole dollars only | | | | | |
| 62 | 50 | Amount of Overpayment to be applied to Estimated Tax | 12 | Numeric | Whole dollars only | | | | | |
| 63 | 51 | Amount of Overpayment to be refunded | 12 | Numeric | Whole dollars only | | | | | |
| 64 | 52 | Total Interest Charges | 12 | Numeric | Whole dollars only | | | | | |
| 65 | G | FAIB (Foreign Account Indicator) | 1 | | Blank or "Y". "Y" = box is marked, Blank = box is not marked | | | | | |
| | G | Domestic Account Indicator | 1 | | Blank or "Y". "Y" = box is marked, Blank = box is not marked | | | | | |
| 66 | 54a | Checking Account | 1 | | Blank or "C". "C" = box is marked, Blank = box is not marked | | | | | |
| 67 | 54a | Savings Account | 1 | | Blank or "S". "S" = box is marked, Blank = box is not marked | | | | | |
| 68 | 54b | Routing Number | 9 | | Must be nine numbers | | | | | |
| 69 | 54c | Account Number | 17 | Alpha-Numeric | That be time hambers | | | | | |
| 70 | H | OPT OUT of efiling. Check box for authorizing your paid preparer not to file electronically | 1 | Alpha | Blank or "Y". "Y" = box is marked, Blank = box is not marked | | | | | |
| 71 | i i | Opt in to elect to receive 1099G info electronically | 1 | Alpha | Blank or "Y". "Y" = box is marked, Blank = box is not marked | | | | | |
| 72 | Li | Daytime Telephone Number | 10 | Numeric | No parenthesis, hyphens or spaces | | | | | |
| 73 | K | Preparer's PTIN | 9 | | 6 - 9 digits | | | | | |
| 74 | I. | Code number | 9 | | up to 3 code #'s in positions 1-3, 4-6 & 7-9 | | | | | |
| 74 75 | 3a | Non Resident Earned Income from Form 505NR Line 3a | 9 12 | Numeric | Whole dollars only | | | | | |
| 76 | 6b | Non Resident Non MD Income from Form 505NR Line 6b | 12 | Numeric | Whole dollars only | | | | | |
| 76 77 | M | Trailer | 12 | Numenc | *EOD* <cr></cr> | | | | | |
| 77 78 | IVI | | | | TEOD" CCR> | | | | | |
| 78 | | Leave this line blank | | | | | | | | |
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| | | Specification Version 01 | | | | | | | | |
| | | Specification version of | | | | | | | | |
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