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LINE	FIELD	DESCRIPTION 505	FIELD	FIELD TYPE	COMMENTS. ACCEPTABLE VALUES. EDITS
NUMBER	FIELD	DESCRIPTION 505	SIZE	FIELD I I FE	CONNINENTS, ACCEPTABLE VALUES, EDITS
1	Header	Header Version Number	2	Alpha-Numeric	"T1"
2	Header	Developer Code	1	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
18	D		20		Standard Post Office 2 letter abbreviation
	D	State	40	Alpha	
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
			12		· · · · · · · · · · · · · · · · · · ·
36 37	19	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
50 51	26	Deduction Amount	12	Numeric	Whole dollars only
U 1					
52	33	Poverty Level Credit	12	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
55	4()	Contribution to Maryland Cancer Fund	12	Numeric	Whole dollars only
	40				· · · · · · · · · · · · · · · · · · ·
56 57	41 43	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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44	MW506NRS	12	Numeric	Whole dollars only					
45	Nonresident Tax Paid by Pass Through Entities	12	Numeric	Whole dollars only					
48	Balance Due	12	Numeric	Whole dollars only					
49	Overpayment	12	Numeric	Whole dollars only					
50	Amount of Overpayment to be applied to Estimated Tax	12	Numeric	Whole dollars only					
51	Amount of Overpayment to be refunded	12	Numeric	Whole dollars only					
52	Total Interest Charges	12	Numeric	Whole dollars only					
G	FAIB (Foreign Account Indicator)	1		Blank or "Y". "Y" = box is marked, Blank = box is not marked					
G	Domestic Account Indicator	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked					
54a	Checking Account	1	Alpha	Blank or "C". "C" = box is marked, Blank = box is not marked					
54a		1		Blank or "S". "S" = box is marked, Blank = box is not marked					
54b		9		Must be nine numbers					
		17							
		1		Blank or "Y". "Y" = box is marked, Blank = box is not marked					
Ti Ti		1		Blank or "Y". "Y" = box is marked, Blank = box is not marked					
j		10		No parenthesis, hyphens or spaces					
K		9		6 - 9 digits					
Ti.		9		up to 3 code #'s in positions 1-3, 4-6 & 7-9					
3a		12		Whole dollars only					
				Whole dollars only					
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	45 48 49 50 51 52 G G G 54a	MWS06NRS Nonresident Tax Paid by Pass Through Entities 48 Balance Due 49 Overpayment 50 Amount of Overpayment to be applied to Estimated Tax 51 Amount of Overpayment to be refunded 52 Total Interest Charges G FAIB (Foreign Account Indicator) G Domestic Account Indicator 54a Checking Account 54a Savings Account 54b Routing Number 54c Account Number H OPT OUT of efiling. Check box for authorizing your paid preparer not to file electronically I Opt in to elect to receive 1099G info electronically J Daytime Telephone Number K Preparer's PTIN L Code number 3a Non Resident Earned Income from Form 505NR Line 3a 6b Non Resident Non MD Income from Form 505NR Line 6b	MW506NRS 45 Nonresident Tax Paid by Pass Through Entities 12 48 Balance Due 12 49 Overpayment 50 Amount of Overpayment to be applied to Estimated Tax 11 51 Amount of Overpayment to be refunded 12 52 Total Interest Charges 12 G FAIB (Foreign Account Indicator) 1 Domestic Account Indicator 1 Checking Account 54a Savings Account 54a Savings Account 54b Routing Number 54c Account Number 17 H OPT OUT of efiling. Check box for authorizing your paid preparer not to file electronically 1 Daytime Telephone Number 10 K Preparer's PTIN 9 L Code number 30 Non Resident Earned Income from Form 505NR Line 3a Non Resident Earned Income from Form 505NR Line 6b 12 M Trailer Leave this line blank	MW506NRS Nonresident Tax Paid by Pass Through Entities 12 Numeric 13 Numeric 14 Balance Due 12 Numeric 14 Numeric 15 Overpayment 16 Numeric 17 Numeric 18 Numeric 19 Numeric 10 Numeric 10 Numeric 11 Numeric 12 Numeric 12 Numeric 13 Numeric 14 Numeric 15 Amount of Overpayment to be refunded 15 Numeric 16 FAIB (Foreign Account Indicator) 17 Alpha 18 Domestic Account Indicator 18 Alpha 19 Numeric 10 Checking Account 10 Alpha 11 Alpha 12 Numeric 12 Numeric 13 Numeric 14 Alpha 15 Alpha 15 Alpha 16 Alpha 17 Alpha 18 Alpha 19 Numeric 19 Numeric 10 OPT OUT of efiling. Check box for authorizing your paid preparer not to file electronically 10 Daytime Telephone Number 11 Alpha 12 Numeric 13 Alpha 14 Alpha 15 Alpha 16 OPT OUT of efiling. Check box for authorizing your paid preparer not to file electronically 10 Daytime Telephone Number 11 Alpha 12 Numeric 13 Alpha 14 Alpha 15 Alpha 16 OPT OUT of efiling. Check box for authorizing your paid preparer not to file electronically 16 Numeric 17 Alpha 18 Alpha 19 AlphaNumeric 10 Numeric 10 Numeric 11 Alpha 12 Numeric 13 Alpha 14 Alpha 15 Alpha 16 Numeric 17 Alpha Numeric 18 Alpha 19 AlphaNumeric 19 AlphaNumeric 10 Numeric 10 Numeric 11 Alpha 12 Numeric 13 Alpha 14 Alpha 15 Alpha 16 Alpha 17 Alpha 18 Alpha 19 AlphaNumeric 10 Numeric 10 Numeric 11 Alpha 12 Numeric 13 Non Resident Earned Income from Form 505NR Line 3a 14 Numeric 15 Numeric 16 Numeric 17 Numeric					