

LINE NUMBER	FIELD	DESCRIPTION	FIELD SIZE	FIELD TYPE	COMMENTS, ACCEPTABLE VALUED, EDITS
1	Header	Header Version Number	2	Alpha-Numeric	"T1"
2	Header	Developer Code	4	Numeric	NACTP Vendor Code
3	Header	Jurisdiction Code	2	Alpha	MD
4	Header	Description	3	Numeric	510
5	Header	Specification Version	2	Numeric	01
6	Header	Software Form Version	2	Numeric	00-99
7	A	Federal Employer Identification Number	9	Numeric	
8	B	Date of Organization or Incorporation	6	Numeric	MMDDYY
9	B	Federal Business Code	6	Numeric	
10	C	Name of Entity	35	Alpha-Numeric	Legal Name of Entity
11	C	Name of Entity	35	Alpha-Numeric	Legal Name of Entity
12	C	Street Address 1	30	Alpha-Numeric	Street address or Post Office Box
13	C	Street Address 2	30	Alpha-Numeric	Street address continued if necessary
14	C	City	20	Alpha-Numeric	City, Town, or Post Office, Include Foreign Country
15	C	State	2	Alpha	Standard Post Office 2 letter abbreviation
16	C	Zip	10	Alpha-Numeric	5 + 4 US Zip code, or up to 10 character foreign ZIP
17	D	Month End (Fiscal Year only)	2	Numeric	MM (Must be entered in ME box on paper return)
18	D	Year End (Fiscal Year only)	2	Numeric	YY (Must be entered in YE box on paper return)
19	E	Entity Type - S Corporation	1	Alpha	Blank or "S". "S" = box is marked, blank = box is not marked
20	E	Entity Type - Partnership	1	Alpha	Blank or "P". "P" = box is marked, blank = box is not marked
21	E	Entity Type - Limited Liability Corporation	1	Alpha	Blank or "L". "L" = box is marked, blank = box is not marked
22	E	Entity Type - Business Trust	1	Alpha	Blank or "O". "O" = box is marked, blank = box is not marked
23	F	Begin or end date different due to acquisition or consolidation check box	1	Numeric	Blank or "1". "1" = box is marked, blank = box is not marked
	F	Electing to remit tax on resident members' shares of income check box	1	Numeric	Blank or "1". "1" = box is marked, blank = box is not marked
24	G	Amended Checkbox	1	Numeric	Blank or "1". "1" = box is marked, blank = box is not marked
25	1a	Number of individual resident members	5	Numeric	
26	1b	Number of nonresident individual members	5	Numeric	
	1c	Number of resident entity members	5	Numeric	
27	1d	Number of nonresident entity members	5	Numeric	
28	1e	Number of other members	5	Numeric	
29	2	Total distributive or pro rata income per Federal return	12	Numeric	Whole dollars only
30	3a	Non-Maryland income	12	Numeric	Whole dollars only
31	3b	Maryland Apportionment Factor	6	Numeric	6 digit apportionment factor (do not use decimal point). If factor is zero, enter .000001
32	5a	Percentage of Ownership by individual nonresident members	4	Numeric	4 digits DO NOT USE DECIMAL POINT
	5b	Percentage of Ownership by individual resident members	4	Numeric	4 digits DO NOT USE DECIMAL POINT
33	10a	Percentage of Ownership by nonresident entity members	4	Numeric	4 digits DO NOT USE DECIMAL POINT
	10b	Percentage of Ownership by resident entity members	4	Numeric	4 digits DO NOT USE DECIMAL POINT
34	G	delete: moved to bottom of page 3			
35	G	delete: moved to bottom of page 3			
36	G	delete: moved to bottom of page 3			
37	14	Distributive cash flow worksheet checkbox	1	Numeric	Blank or "1". "1" = box is marked, blank = box is not marked
38	14	Distributable cash flow limitation	12	Numeric	Whole dollars only
39	16a	Estimated pass-through entity nonresident tax paid with Form 510D	12	Numeric	Whole dollars only
40	16b	Pass-through entity nonresident tax paid with extension request Form 510E	12	Numeric	Whole dollars only
41	16c	Credit for nonresident tax paid by another pass-through entity	12	Numeric	Whole dollars only
42	17	Balance Due	12	Numeric	Whole dollars only
43	18	Interest and/or Penalty	12	Numeric	Whole dollars only
44	20	Amount to be refunded	12	Numeric	Whole dollars only
	Add Info #				
45	7	Question 7 - Yes Box only	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked

LINE NUMBER	FIELD	DESCRIPTION	FIELD SIZE	FIELD TYPE	COMMENTS, ACCEPTABLE VALUED, EDITS
46	Add Info # 8	Question 8 - Yes Box only	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked
47	H	Preparer's PTIN	9	Alpha/Numeric	6-9 digits
	I	Code number	3	Numeric	3 digit code
	I	Code number	3	Numeric	3 digit code
	I	Code number	3	Numeric	3 digit code
48	J(1Ah)	Receipts Factor	7	Numeric	7 digit apportionment factor of 1000000 if equal to 1. If less than 1, factor must be 6 digits. Do not use decimal points.
49	J(2g)	Property Factor	7	Numeric	7 digit apportionment factor of 1000000 if equal to 1. If less than 1, factor must be 6 digits. Do not use decimal points.
50	J(3c)	Payroll Factor	7	Numeric	7 digit apportionment factor of 1000000 if equal to 1. If less than 1, factor must be 6 digits. Do not use decimal points.
	I(5)	Maryland Apportionment factor Check Box	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked
51	K	Trailer			*EOD* <CR>
52		Leave this line blank.			