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	Street Address 1	30	Alpha-Numeric	Street address or Post Office Box
12	C	Street Address 2	30	Alpha-Numeric	Street address continued if necessary
13	C	City	20	Alpha-Numeric	City, Town, or Post Office, Include Foreign Country
14	C	State	2	Alpha	Standard Post Office 2 letter abbreviation
15	C	Zip	10	Alpha-Numeric	5 + 4 US Zip code, or up to 10 character foreign ZIP
16	D	Month End (Fiscal Year only)	2	Numeric	MM (Must be entered in ME box on paper return)
17	D	Year End (Fiscal Year only)	2	Numeric	YY (Must be entered in YE box on paper return)
18	E	Entity Type - S Corporation	1	Alpha	Blank or "S". "S" = box is marked, blank = box is not marked
19	E	Entity Type - Partnership	1	Alpha	Blank or "P". "P" = box is marked, blank = box is not marked
20	E	Entity Type - Limited Liability Corporation	1	Alpha	Blank or "L". "L" = box is marked, blank = box is not marked
21	E	Entity Type - Business Trust	1	Alpha	Blank or "O". "O" = box is marked, blank = box is not marked
22	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
23	G	Amended Checkbox	1	Numeric	Blank or "1". "1" = box is marked, blank = box is not marked
24	1a	Number of individual resident members	5	Numeric	
25	1b	Number of nonresident individual members	5	Numeric	
26	1c	Number of nonresident entity members	5	Numeric	
27	1d	Number of other members	5	Numeric	
28	2	Total distributive or pro rata income per Federal return	12	Numeric	Whole dollars including cents
29	3a	Non-Maryland income	12	Numeric	Whole dollars including cents
30	3b	Maryland Apportionment Factor	6	Numeric	6 digit apportionment factor (do not use decimal point). If factor is zero, enter .000001
31	5	Percentage of Ownership by individual nonresident members	4	Numeric	4 digits DO NOT USE DECIMAL POINT
32	10	Percentage of Ownership by nonresident entity members	4	Numeric	4 digits DO NOT USE DECIMAL POINT
33	14	Distributive cash flow worksheet checkbox	1	Numeric	Blank or "1". "1" = box is marked, blank = box is not marked
34	14	Distributable cash flow limitation	12	Numeric	Whole dollars including cents
35	16a	Estimated pass-through entity nonresident tax paid with Form 510D	12	Numeric	Whole dollars including cents
36	16b	Pass-through entity nonresident tax paid with extension request Form 510E	12	Numeric	Whole dollars including cents
37	16c	Credit for nonresident tax paid on behalf of the pass-through entity by another PTE	12	Numeric	Whole dollars including cents
38	16d	Credit for pass-through entity election tax paid on nonresident shares of income by another PTE	12	Numeric	Whole dollars including cents
39	17	Balance Due	12	Numeric	Whole dollars including cents
40	18	Interest and/or Penalty	12	Numeric	Whole dollars including cents
41	20a	Estimated pass-through entity nonresident tax paid with Form 510D	12	Numeric	Whole dollars including cents
42	20b	Pass-through entity nonresident tax paid with extension request Form 510E	12	Numeric	Whole dollars including cents
43	20c	Credit for nonresident tax paid on behalf of the pass-through entity by another PTE	12	Numeric	Whole dollars including cents
44	22	Amount to be refunded	12	Numeric	Whole dollars including cents
45	H	Check here if you authorize the State of Maryland to issue your refund by direct deposit.	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked
46	H	Check here if this refund will go to an account outside of the United States.	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
47	23a	Checking Account	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked
48	23a	Savings Account	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked
49	23b	Routing Number	9	Numeric	Must be nine numbers
50	23c	Account Number	17	A N	Alpha Numeric
51	Add Info # 7	Question 7 - Yes Box only	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked
52	Add Info # 8	Question 8 - Yes Box only	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked
53	I	Preparer's PTIN	9	Alpha/Numeric	6-9 digits
54	J	Code number	9	Numeric	up to 3, 3 digit code #s in position 1-3, 4-6, & 7-9
55	K(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.
56	L(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.
57	L(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.
58	M(5)	Maryland Apportionment factor Check Box	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked
59	N	Trailer			*EOD* <CR>
60		Leave this line blank.			