

GI GENERAL INFORMATION					
FILING DUE DATE (IF OTHER THAN STANDARD) ●● 0145 - -					
COUNTY ●● 6004					
CITY, TOWN, OR TAXING AREA ●● 6008					
TOTAL NUMBER OF DEPENDENTS ●● 5161					
CODE NUMBERS ●● 9008 5096 5097					
RETURN REJECTED BY MD AND IS BEING RESUBMITTED 6133 <input type="checkbox"/> YES					
FILING FORM 502INJ 6142 <input type="checkbox"/> YES					
MD TAX AGENCY MAY DISCUSS RETURN WITH PREPARER 6023 <input type="checkbox"/> YES					
TAXPAYER IS A MEMBER OF THE MILITARY 6085 <input type="checkbox"/> YES					
MILITARY TAXPAYER KILLED IN ACTION 6087 <input type="checkbox"/> YES					
SPOUSE IS A MEMBER OF THE MILITARY 6086 <input type="checkbox"/> YES					
MILITARY SPOUSE KILLED IN ACTION 6088 <input type="checkbox"/> YES					
NON-MARYLAND MILITARY INCOME 5045					
INCOME EARNED BY CIVILIAN SPOUSE ●● 5303					
TOTAL FEDERAL GROSS INCOME ●● 5044					
AUTHORIZED PREPARER TO NOT FILE ELECTRONICALLY 6111 <input type="checkbox"/> YES					
MAKING PAYMENTS WITH CREDIT CARD OR ELECTRONICALLY 6112 <input type="checkbox"/> YES					
AUTHORIZE MD TO SHARE TAX INFORMATION WITH THE MEDICAL ASSISTANCE PROGRAM FOR HELP FINDING HEALTH INSURANCE 6090 <input type="checkbox"/> YES					
IF CLAIMING BUSINESS INC AND REFUNDABLE EARNED INC CR, ENTER EIN, COMBINED REGISTRATION #, OR LICENSE # OF BUS 6205					
DEPENDENTS					
FIRST NAME			LAST NAME		
SSN	RELATIONSHIP	CHILD	OVER 65	HLTH INS	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ADDITIONAL LINES ARE AVAILABLE ON INPUT SCREEN					
PART YEAR RESIDENT ONLY					
PREPARE PART YEAR RESIDENT RETURN 6052 <input type="checkbox"/> YES					
START DATE: 6001 - - END DATE: 6002 - -					
OTHER STATE TWO LETTER CODE 6003 [2]					
MARRIED TAXPAYERS WITH DIFFERENT TAX PERIODS FILING A JOINT RETURN 6081 <input type="checkbox"/> YES					
NON RESIDENT ONLY					
PREPARE NONRESIDENT RETURN 6064 <input type="checkbox"/> YES					
RESIDENT OF OTHER STATE ENTIRE YEAR 6065 <input type="checkbox"/> NO					
RESIDENT OF A RECIPROCAL STATE (NR ONLY) 6080 <input type="checkbox"/> YES					
PA RESIDENTS BOROUGH/TOWNSHIP ●● 6094					
MARYLAND INCOME TAX RETURN FILED LAST YEAR 6066 <input type="checkbox"/> YES					
IF YES, WAS IT A RESIDENT RETURN 6067 <input type="checkbox"/> YES					
FORM 588					
DEPOSIT REFUND IN MULTIPLE ACCOUNTS (USE INPUTS BELOW, ENTRIES ON THE DD/EFW GRID WILL NOT CARRY) 6216 <input type="checkbox"/> YES					
ACCOUNT 1:					
ROUTING NUMBER 6217					
ACCOUNT NUMBER 6218					
TYPE: C = Checking S = Savings 6219					
AMOUNT 5430					
ACCOUNT 2:					
ROUTING NUMBER 6220					
ACCOUNT NUMBER 6221					
TYPE: C = Checking S = Savings 6222					
AMOUNT 5431					
ACCOUNT 3:					
ROUTING NUMBER 6223					
ACCOUNT NUMBER 6224					
TYPE: C = Checking S = Savings 6225					
AMOUNT 5432					

1 MARYLAND FORM 502 PAGE 1			
1	a	WAGES, SALARIES AND/OR TIPS ●●	5071
2		TAX EXEMPT OBLIGATIONS OTHER THAN MARYLAND ●●	5124
3		STATE RETIREMENT PICKUP ●●	5101
4		LUMP SUM DISTRIBUTIONS ●●	5102
5		DO NOT AUTOMATE ADDITIONS 6102 <input type="checkbox"/> YES	
OTHER ADDITIONS			
CODE		AMOUNT	
ADDITIONAL LINES AVAILABLE ON INPUT SCREEN			
9		CHILD AND DEPENDENT CARE EXPENSE ●●	5129
10		PENSION EXCLUSION ●●	5382
11		TAXABLE SOCIAL SECURITY OR RR BENEFITS ●●	5126
12		INCOME RECEIVED DURING NONRESIDENT PERIOD	5104
13		DO NOT AUTOMATE SUBTRACTIONS 6103 <input type="checkbox"/> YES	
OTHER SUBTRACTIONS			
CODE		AMOUNT	
ADDITIONAL LINES AVAILABLE ON INPUT SCREEN			
14	TWO INCOME MARRIED COUPLE:		
	BOTH SPOUSES DO NOT HAVE INCOME SUBJECT TO MD TAX 6026 <input type="checkbox"/> YES		
TAXPAYER FEDERAL AGI ●●		5133	
SPOUSE FEDERAL AGI ●●		5136	
FORCE STANDARD DEDUCTION		6061	<input type="checkbox"/> YES
FORCE ITEMIZED DEDUCTIONS		6062	<input type="checkbox"/> YES
AMOUNT OF GAMBLING AND CASUALTY OR THEFT LOSS INCLUDED ON LINE 27 OF FEDERAL SCHEDULE A		5009	

2 FORM 502 - PAGE 2			
37	CONTRIBUTION TO CHESAPEAKE BAY AND ENDANGERED SPECIES FUND		5109
38	CONTRIB TO DEVELPMNTL DISABILITY WAITING EQUITY FUND		5169
39	CONTRIBUTION TO MARYLAND CANCER FUND		5182
41	TOTAL MARYLAND AND LOCAL TAX WITHHELD ●●		5121
48	AMOUNT OF OVERPAYMENT TO BE APPLIED TO NEXT YEAR'S ESTIMATED TAX		5391
50	DATE OF LATE FILING ●●	6095	- -
	DATE OF LATE PAYMENT ●●	6096	- -
	AMT OF TAX DUE USED TO CALC PENALTIES AND INT ●●	9020	
	LATE FILING INTEREST ●●	5073	
PREFER TO RECEIVE 1099G INCOME TAX REFUND STATEMENT ELEC		6089	<input type="checkbox"/> YES

NR1 FORM 505 - NONRESIDENT	
NONRESIDENT	6064 <input type="checkbox"/> YES
OTHER STATE TWO LETTER CODE	6003 [2]
START DATE OF MD RESIDENCE	6001 - -
END DATE OF MD RESIDENCE	6002 - -
RESIDENT OF OTHER STATE ALL YEAR	6065 <input type="checkbox"/> NO
IF NO, EXPLAIN	6097
MARYLAND TAX RETURN FILED LAST YEAR	6066 <input type="checkbox"/> YES
IF YES, WAS IT A RESIDENT RETURN	6067 <input type="checkbox"/> YES
TAXPAYER IS A MEMBER OF THE MILITARY	6085 <input type="checkbox"/> YES
SPOUSE IS A MEMBER OF THE MILITARY	6086 <input type="checkbox"/> YES
NON-MARYLAND MILITARY INCOME	5045

RECIPROCAL STATE	
CHECK THE BOX BELOW IF FILING A NR MD RETURN AND A RESIDENT RETURN IN ANY OF THE FOLLOWING STATES: DC, PA, VA OR WV	
RESIDENT OF RECIPROCAL STATE (NONRESIDENTS ONLY)	6080 <input type="checkbox"/> YES

INCOME AND ADJUSTMENTS FROM MARYLAND SOURCES						
1	WAGES, SALARIES, TIPS, ETC.	••	5077			
2	TAXABLE INTEREST INCOME	••	5151			
3	DIVIDEND INCOME	••	5152			
5	ALIMONY RECEIVED	••	5153			
6	BUSINESS INCOME (LOSS)	••	5154			
7	CAPITAL GAIN (LOSS)	••	5155			
8	OTHER GAINS (LOSS)	••	5156			
10	RENTS, ROYALTIES, PTNRSH, ESTATES, TRUSTS	••	5157			
	RENTS	6072 <input type="checkbox"/>	ROYALTIES	6073 <input type="checkbox"/>	PARTNERSHIP	6074 <input type="checkbox"/>
	ESTATE	6075 <input type="checkbox"/>	TRUST	6079 <input type="checkbox"/>		
11	FARM INCOME (LOSS)	••	5158			
14	OTHER INCOME	••	5159			
16	TOTAL ADJUSTMENTS	••	5160			
	DO NOT AUTOMATE ADDITIONS		6102 <input type="checkbox"/> YES			
OTHER ADDITIONS						
19	CODE	AMOUNT				
22	TAXABLE MILITARY INCOME OF NONRESIDENT		9001			
	DO NOT AUTOMATE SUBTRACTIONS		6103 <input type="checkbox"/> YES			
	INCOME EXEMPT FROM MD TAX UNDER THE MILITARY SPOUSE RELIEF ACT		9030			
OTHER SUBTRACTIONS						
23	CODE	AMOUNT				
26	a	FORCE STANDARD DEDUCTION	•• 6061 <input type="checkbox"/> YES			
		FORCE ITEMIZED DEDUCTION	•• 6062 <input type="checkbox"/> YES			

503 FORM 503 SHORT FORM	
PREPARE FORM 503	6091 <input type="checkbox"/> YES
1 a	WAGES, SALARIES AND/OR TIPS •• 5071
13	CONTRIB TO CHESAPEAKE BAY/ENDANGERED SPECIES 5109
14	CONTRIB TO DEVELOPMENTAL DISABILITY WAITING LIST FUND 5169
15	CONTRIBUTION TO MARYLAND CANCER FUND 5182
17	TOTAL MARYLAND AND LOCAL TAX WITHHELD •• 5121
22	INTEREST CHARGES FOR LATE FILING 5073

INJ FORM 502INJ - INJURED SP CLAIM FORM	
SUPPRESS CARRYING INFORMATION FROM FEDERAL FORM 8379	6195 <input type="checkbox"/> YES
INJURED SPOUSE IS: TAXPAYER	☺ 6196 <input type="checkbox"/>
INJURED SPOUSE IS: SPOUSE	☺ 6197 <input type="checkbox"/>
CURRENT HOME ADDRESS OF INJURED SPOUSE	
STREET ADDRESS	6198 [31]
ZIP CODE	6201 [31]
CITY	6199 [31]
STATE	6200 [31]
DIVORCED OR SEPERATED FROM SPOUSE ON JOINT RETURN AND WANT REFUND ISSUED IN THIS NAME ONLY •• 6195 <input type="checkbox"/>	

ALLOCATION BETWEEN SPOUSES			
A	INCOME ITEMS FROM FEDERAL		INJ SPOUSE
	1	WAGES ••	5140
	2	OTHER INCOME ••	5141
	3	ADJUSTMENTS TO INCOME ••	5142
B	ITEMS FROM MARYLAND RETURNS		
	1	ADDITIONS	5143
	2	SUBTRACTIONS	5144
	4	EXEMPTIONS	5145
	6	WITHHOLDING TAXES	5146
	8	ESTIMATED TAXES	5147
	9	OTHER CREDITS	5148

TP FORM 502 TP COMPUTATION OF TAX	
TAX PREFERENCE ITEMS FROM FEDERAL FORM 6251	
1	a DEPLETION •• 5031
	b DEPRECIATION (PRE 1987) •• 5032
	c INTANGIBLE DRILLING COSTS •• 5033
	d EXCLUSION FOR GAINS ON SALE OF CERTAIN SMALL BUSINESS STOCK •• 5034

CR1 FORM 502CR PAGE 1	
MULTIPLE	AUTOMATE CREDIT 6071 <input type="checkbox"/> NO
	2 TAXABLE INCOME IN OTHER STATE 5117
7	TWO LETTER STATE CODE 6009 [4]
	STATE TAX SHOWN ON RETURN IN OTHER STATES 5118

NR2 FORM 505 NONRESIDENT PAGE 2	
PAYMENTS, CREDITS, ETC.	
34	POVERTY LEVEL CREDIT •• 5164
36	BUSINESS TAX CREDIT (ATTACH FORM 500CR) 5110
39	CONTRIB TO CHESAPEAKE BAY / ENDANGERED SPECIES FND 5109
40	CONTRIBUTION TO FAIR CAMPAIGN FINANCING FUND 5169
41	CONTRIBUTION TO MARYLAND CANCER FUND 5182
43	TOTAL MARYLAND TAX WITHHELD •• 5121
45	REFUNDABLE EARNED INCOME CREDIT •• 5165
46	NONRESIDENT TAX PAID BY S CORPORATION, ETC. 5112
51	AMOUNT OF OVERPAYMENT APPLIED TO NEXT YEAR'S TAX 5391
53	DATE OF LATE FILING •• 6095 - -
	DATE OF LATE PAYMENT •• 6096 - -
	AMT OF TAX DUE USED TO CALC PENALTIES AND INT •• 9020
	LATE FILING INTEREST •• 5073

CR2	FM 502 CR - PERSONAL INC TAX CREDITS
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PART C - QUALITY TEACHER INCENTIVE CREDIT			
		TAXPAYER A	TAXPAYER B
1	NAME OF MD PUBLIC SCHOOL SYSTEM OR A ST OR LOCAL CORRECTIONAL FACILITY OR QUAL JUEVENILE FACILITY IN WHICH YOU ARE EMPLOYED AND TEACH	6042	6043
2	TUITION PAID TO	6044	6059
	AMOUNT OF TUITION PAID	5010	5011
3	AMOUNT OF TUITION REIMBURSEMENT	5012	5013

PART D - CREDIT FOR AQUACULTURE OYSTER FLOATS		
1	PURCHASE AQUACULTURE OYSTER FLOAT(S) (MAY NOT EXCEED \$5000)	5078

PART E - LONG-TERM CARE INSURANCE CREDIT								
	NAME OF INSURED	AGE	SSN	RELATIONSHIP TO TP	AMOUNT OF PREMIUM	QUESTION 1	QUESTION 2	QUESTION 3
			- -			<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES
			- -			<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES
			- -			<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES

ADDITIONAL LINES ARE AVAILABLE ON INPUT SCREEN

PART F - CREDIT FOR PRESERVATION AND CONSERVATION EASEMENTS			
		TAXPAYER A	TAXPAYER B
1	TOTAL OF THE CURRENT YEAR DONATION AMOUNT, AND ANY CARRYOVER FROM PRIOR YEAR(S)	5001	9011
2	PAYMENT RECEIVED FOR EASEMENT	5002	9012

PART G - PERSONAL INCOME TAX CREDIT SUMMARY		
7	SECTION 2, LINE 4 OF FORM 502H (ATTACH FORM 502H)	●● 5106

PART H - REFUNDABLE PERSONAL INCOME TAX CREDITS		
1	NEIGHBORHOOD STABILIZATION CREDIT	5004
2	HERITAGE STRUCTURE REHABILITATION TAX CREDIT	●● 5005
3	REFUNDABLE BUSINESS INCOME TAX CREDIT (ATTACH FORM 500CR)	5072
4	IRC SECTION 1341 REPAYMENT	5038
5	FORM 1341 SCH K-1 NONRESIDENT PTE TAX	5039

V USE OF VEH FOR CHARITABLE PURPOSES		
QUALIFYING ORGANIZATION		
6145		[65]
1	TOT MILEAGE INCURRED IN PROVIDING QUALIFYING SERVICES FROM 01/01/CY THROUGH 06/30/CY	5046
3	TOT MILEAGE INCURRED IN PROVIDING QUALIFYING SERVICES FROM 07/01/CY THROUGH 12/31/CY	5049
6	REIMBURSEMENT RECEIVED FOR MILEAGE ON LINE 1	5047
7	AMOUNT INCLUDED AS AN ITEMIZED DEDUCTION ON YOUR MD RETURN	5048

PE PENSION EXCLUSION WORKSHEET		
PREPARE PENSION EXCLUSION		6144 <input type="checkbox"/> YES
	TAXPAYER	SPOUSE
1	NET TAXABLE PENSION & RETIREMENT ANNUITY ●● 5107	●● 5108
3	SOC SEC AND / OR RAILROAD BENEFITS ●● 5198	●● 5199

AC FORM 502AC		
PART A		
3	CURRENT YEAR GROSS INCOME FROM THE SALE OF ARTWORK PRODUCED BY THE TAXPAYER	5064
4	PRIOR YEAR FEDERAL AGI PLUS MD ADDITIONS	5065
6	PRIOR YEAR GROSS INCOME FROM THE SALE OF ARTWORK PRODUCED BY THE TAXPAYER	5066
PART B		
NAME OF MUSEUM		6160
ST ADDRESS OF MUSEUM		6161
ZIP	CITY	ST 6163
7	IS THE MUSEUM LOCATED IN THE STATE OF MD	6165 <input type="checkbox"/> YES
8	IS THE MUSEUM OPEN TO THE GENERAL PUBLIC	6166 <input type="checkbox"/> YES
9	HAS THE MUSEUM ACCEPTED DONATED ARTWORK	6167 <input type="checkbox"/> YES
PART C		
10	FAIR MARKET VALUE OF THE ARTWORK	5067
11	PORTION OF FAIR MARKET VALUE INCLUDED IN FEDERAL AND STATE ITEMIZED DEDUCTIONS	5068

ES	MARYLAND ESTIMATED TAX
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CURRENT YEAR ESTIMATED TAX PAYMENTS			
PRIOR YEAR OVERPAYMENT APPLIED			3539
PRIOR YEAR EXTENSION PAYMENT MADE IN CURRENT YEAR			3948
PRIOR YEAR ESTIMATED TAX PAID IN CURRENT YEAR			3524
PRIOR YEAR TAX PAID WITH RETURN			3949
VOUCHER DATE	PAYMENT DATE	AMOUNT	
04-15-CY	6042 - -	3130	
06-15-CY	6043 - -	3131	
09-15-CY	6044 - -	3132	
01-18-NY	6045 - -	3133	
AMOUNT PAID WITH EXTENSION			3540

NEXT YEAR ESTIMATED TAX WORKSHEET			
CURRENT YEAR OVERPAYMENT TO NEXT YEAR			

1- Refund all overpayment 2- Apply all overpayment 3- Apply to all vouchers, refund balance 4- Apply to 1st voucher, refund balance	5- Apply to 1st and 2nd vouchers, refund balance 6- Apply to 1st, 2nd, and 3rd vouchers, refund balance 7- Apply amount entered	METHOD	AMOUNT
		6068	5391

ALLOCATION METHOD:			
1- Consecutively	2- Equally		6069

NEXT YEAR ESTIMATED TAX			
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CHECK TO RECEIVE PREPRINTED VOUCHERS FROM STATE OF MD			6092	<input type="checkbox"/>	YES
0- No estimated tax calculation 1- Lesser of option 2 or option 3 2- 100% of current year taxes 3- 90% of next year estimated tax	4- 100% of next year estimated tax 5- 80% of next year estimated tax 6- 70% of next year estimated tax 7- Lesser of option 2 or option 5	8- Lesser of option 2 or option 6 9- 66.67% of next year estimated tax 10- Amount entered	METHOD	AMOUNT	
			6070	5392	

IGNORE WITHHOLDINGS FOR NEXT YEAR ESTIMATED TAX	6045	<input type="checkbox"/>	YES
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ESTIMATED TAX CALCULATION ADJUSTMENTS			
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1	TAXABLE INCOME INCREASE OR (-) DECREASE		5192
2	TAX INCREASE OR (-) DECREASE		5193
7	WITHHOLDINGS INCREASE OR (-) DECREASE		5194

NEXT YEAR VOUCHERS			
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THRESHOLD:			METHOD	AMOUNT THRESHOLD
1- Prepare vouchers, if applicable 2- Prepare if tax due > \$1,000 or amount entered 3- Prepare if tax due > \$600 or amount entered 4- Prepare if tax due > \$500 or amount entered 5- Prepare if tax due > \$400 or amount entered 6- Prepare if tax due > \$300 or amount entered 7- Prepare if tax due > \$250 or amount entered	8- Prepare if tax due > \$246 or amount entered 9- Prepare if tax due > \$200 or amount entered 10- Prepare if tax due > \$150 or amount entered 11- Prepare if tax due > \$100 or amount entered 12- Prepare if tax due > \$50 or amount entered 13- Prepare blank vouchers 14- Suppress vouchers		6077	5393

ROUNDING - ONLY VOUCHER AMOUNTS WILL BE ROUNDED:			
1- No rounding 2- Round voucher amount up to nearest 10	3- Round voucher amount up to nearest 100 4- Round voucher amount up to nearest 1000		METHOD
			6078

	VOUCHER 1	VOUCHER 2	VOUCHER 3	VOUCHER 4
CHECK IF ONLY SPECIFIC VOUCHERS TO BE GENERATED	6106 <input type="checkbox"/>	6107 <input type="checkbox"/>	6108 <input type="checkbox"/>	6109 <input type="checkbox"/>

PREPARE DATED REMINDER LETTERS	6050	<input type="checkbox"/>	YES
SUPPRESS FIRST QUARTER REMINDER LETTER	6051	<input type="checkbox"/>	YES

OVERRIDES					
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USE THIS SECTION TO MAKE ALL VOUCHER OVERRIDES					
VOUCHER DATE	DUE DATE	ESTIMATED TAX*	OVERPAYMENT APPLIED	AMT TO PRINT ON VOUCHER	
04-15-CY	6188 - -	5175	5195	5188	
06-15-CY	6181 - -	5176	5185	5189	
09-15-CY	6182 - -	5177	5186	5190	
01-17-NY	6183 - -	5178	5187	5191	

EXT	MARYLAND EXTENSION
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PREPARE MD EXTENSION ONLY		☺ 6032	<input type="checkbox"/>	YES
PREPARE MD EXTENSION WITH FULL RETURN		☺ 6033	<input type="checkbox"/>	YES
1	TOTAL TAX LIABILITY		5130	
2	MD INCOME TAX WITHHELD		5180	
3	ES PAYMENTS AND CREDITED FROM NEXT YEAR		5181	
4	ALLOWABLE TAX CREDITS		5132	
AMOUNT TO BE PAID WITH THIS EXTENSION			5139	

