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	4	Alpha-Numeric	510C
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	6 Digit
10	C	Last Name	20	Alpha-Numeric	Last Name
11	C	First Name	20	Alpha-Numeric	First Name
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 Month 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	1	Number of nonresident individual members	5	Numeric	
20	2	Number of eligible nonresident individual members included in this composite filing	5	Numeric	
21	3	Total distributive or pro rata share of income	12	Numeric	Whole dollars including cents
22	4	Total exemption amount	12	Numeric	Whole dollars including cents
23	5	Total standard deduction	12	Numeric	Whole dollars including cents
24	7	Total flow-through decoupling modifications	12	Numeric	Whole dollars including cents
25	8	Total income allocable to MD	12	Numeric	Whole dollars including cents
26	12a	Total PTE nonresident tax	12	Numeric	Whole dollars including cents
27	12b	Payment made with 502E extension request	12	Numeric	Whole dollars including cents
28	13	Balance Due	12	Numeric	Whole dollars including cents
29	14	Overpayment	12	Numeric	Whole dollars including cents
30	15	Interest charge for late filing	12	Numeric	Whole dollars including cents
31	17	Overpayment to be refunded	12	Numeric	Whole dollars including cents
32	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
33	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
34	18a	Checking Account	1	Alpha	Blank or "C". "C" = box is marked, Blank = box is not marked
35	18b	Savings Account	1	Alpha	Blank or "S". "S" = box is marked, Blank = box is not marked
36	18c	Routing Number	9	Numeric	Must be nine numbers
37	18d	Account Number	17	Alpha/Numeric	19 digits
38	F	Preparer's PTIN	10	Alpha-Numeric	No parenthesis, hyphens or spaces
39	G	Code Number	3	Numeric	3 digit code
40	G	Code Number	3	Numeric	3 digit code
41	G	Code Number	3	Numeric	3 digit code
42	H	Trailer			*EOD* <CR>
43		Leave this line blank.			
		Specification Version 01 09/30/24			