

**MARYLAND TAX RETURN**

(OR FISCAL YEAR BEGINNING 2003, ENDING )



SOCIAL SECURITY #		SPOUSE'S SOCIAL SECURITY #	
Your First Name	Initial	Last Name	
Spouse's First Name	Initial	Last Name	
PRESENT ADDRESS (No. and street)			
City or Town		State	Zip Code
Name of county and incorporated city, town or special taxing area in which you were a resident on the last day of the tax period (See Instructions)		Maryland county	City, town or taxing area

**YOUR FILING STATUS**—See Instruction 1 to determine if you are required to file.

1.  **Single** (If you can be claimed on another person's tax return, use Filing Status 6)
2.  **Married filing joint return or spouse had no income**
- ▶ 3.  **Married filing separately**  SPOUSE'S SOCIAL SECURITY NUMBER
4.  **Head of household**
5.  **Qualifying widow(er) with dependent child**
6.  **Dependent taxpayer** (Enter 0 in Exemption Box (A)—See Instruction 7)

**PART-YEAR RESIDENT:** If you began or ended legal residence in Maryland in 2003 place a P in the box (See Instruction 26).

Give dates of Maryland Residence

FROM  MO  DAY  YR TO  MO  DAY  YR

Other state of residence

**MILITARY:** If you or your spouse has non-Maryland military income, place an M in the box. Enter amount here  (See Instruction 29).

**EXEMPTIONS**—See Instruction 10

	Exemption Amount
(A) Yourself <input type="checkbox"/> Spouse <input type="checkbox"/> Enter No. Checked (A) <input type="text"/> × \$2,400 \$ <input type="text"/>	
(B) <input type="checkbox"/> 65 or over <input type="checkbox"/> Blind <input type="checkbox"/> Spouse is: <input type="checkbox"/> 65 or over <input type="checkbox"/> Blind <input type="checkbox"/> Enter No. Checked (B) <input type="text"/> × \$1,000 \$ <input type="text"/>	
(C) Dependent Children: Name(s) <input type="text"/> Social Security number(s) <input type="text"/> Enter Total (C) <input type="text"/> × \$2,400 \$ <input type="text"/>	
(D) Other Dependents: Regular <input type="checkbox"/> 65 or over <input type="checkbox"/> Enter Total (D) <input type="text"/> × \$2,400 \$ <input type="text"/>	
(E) Enter Total Exemptions (Add A, B, C and D) (E) <input type="text"/> Total Amount \$ <input type="text"/>	

Print your numbers like this **-0 1 2 3 4 5 6 7 8 9** not like this **Ø 4 7**

	Dollars
<b>INCOME</b>	
1. Adjusted gross income from your federal return (See Instruction 11) <input type="text"/>	1 <input type="text"/>
1a. How much of line 1 represents wages, salaries and/or tips? <input type="text"/>	1a <input type="text"/>
<b>ADDITIONS TO INCOME</b> (See Instruction 12)	
2. Tax-exempt interest on state and local obligations (bonds) other than Maryland <input type="text"/>	2 <input type="text"/>
3. State retirement pickup <input type="text"/>	3 <input type="text"/>
4. Lump sum distributions <input type="text"/>	4 <input type="text"/>
5. Other additions (Enter code letter(s) from Instruction 12) <input type="text"/>	5 <input type="text"/>
6. Total additions to Maryland income (Add lines 2 through 5) <input type="text"/>	6 <input type="text"/>
7. Total federal adjusted gross income and Maryland additions (Add lines 1 and 6) <input type="text"/>	7 <input type="text"/>
<b>SUBTRACTIONS FROM INCOME</b> (See Instruction 13)	
8. Taxable refunds, credits or offsets of state and local income taxes included in line 1 above <input type="text"/>	8 <input type="text"/>
9. Child and dependent care expenses <input type="text"/>	9 <input type="text"/>
10. Income from U.S. obligations <input type="text"/>	10 <input type="text"/>
11. Pension exclusion from worksheet in Instruction 13 <input type="text"/>	11 <input type="text"/>
12. Taxable social security and RR benefits (Tier I, II and supplemental) included in line 1 above <input type="text"/>	12 <input type="text"/>
13. Income received during period of nonresidence (See Instructions 26 and 29) <input type="text"/>	13 <input type="text"/>
14. Other subtractions (Enter code letter(s) from Instruction 13) <input type="text"/>	14 <input type="text"/>
15. Subtotal (Add lines 8 through 14) <input type="text"/>	15 <input type="text"/>
16. Two-income subtraction from worksheet in Instruction 13 <input type="text"/>	16 <input type="text"/>
17. Total subtractions from Maryland income (Add lines 15 and 16) <input type="text"/>	17 <input type="text"/>
18. Maryland adjusted gross income (Subtract line 17 from line 7) <input type="text"/>	18 <input type="text"/>
<b>DEDUCTION METHOD</b> (All taxpayers must select one method and check the appropriate box)	
STANDARD DEDUCTION METHOD See Instruction 16 and worksheet. (Enter amount on line 19) <input type="checkbox"/>	
ITEMIZED DEDUCTION METHOD Complete lines 19a and 19b <input type="checkbox"/>	
Total federal itemized deductions (from line 28, federal Schedule A) <input type="text"/>	19a. <input type="text"/>
State and local income taxes included in federal Schedule A, line 5 (or from worksheet in Instruction 14) <input type="text"/>	19b. <input type="text"/>
Subtract line 19b from line 19a and enter amount on line 19.	
19. Deduction amount (Part-year residents see Instruction 26 (l and m) and military personnel see Instruction 29) <input type="text"/>	19 <input type="text"/>
20. Net income (Subtract line 19 from line 18) <input type="text"/>	20 <input type="text"/>
21. Exemption amount from Exemptions area above (See Instruction 10) <input type="text"/>	21 <input type="text"/>
22. Taxable net income (Subtract line 21 from line 20) <input type="text"/>	22 <input type="text"/>



Name \_\_\_\_\_ Social Security # \_\_\_\_\_

MARYLAND TAX COMPUTATION

Dollars

Table with 2 columns: Description (lines 23-30) and Amount. Includes items like 'Amount from line 22 (taxable net income)', 'Maryland tax', 'Earned income credit', etc.

LOCAL TAX COMPUTATION

Table with 2 columns: Description (lines 31-35) and Amount. Includes items like 'Local tax', 'Local earned income credit', 'Local poverty level credit', etc.

Table with 2 columns: Description (lines 36-39) and Amount. Includes items like 'Total Maryland and local tax', 'Contribution to Chesapeake Bay and Endangered Species Fund', etc.

Table with 2 columns: Description (lines 40-44) and Amount. Includes items like 'Total Maryland and local tax withheld', '2003 estimated tax payments', 'Refundable earned income credit', etc.

Table with 2 columns: Description (lines 45-46) and Amount. Includes items like 'Balance due', 'Overpayment'.

Table with 2 columns: Description (lines 47-50) and Amount. Includes items like 'Amount of overpayment TO BE APPLIED TO 2004 ESTIMATED TAX', 'Amount of overpayment TO BE REFUNDED TO YOU', etc.

For credit card payment check here [ ] and see Instruction 24. Direct debit is available only if you file electronically.

DIRECT DEPOSIT OF REFUND (See Instruction 22) Please be sure the account information is correct.

Form for direct deposit information: 51. To choose the direct deposit option, complete the following information: 51a. Type of account: [ ] Checking [ ] Savings; 51b. Routing number; 51c. Account number.

Form for telephone numbers: Daytime telephone no. [ ]; Home telephone no. [ ]; CODE NUMBER [ ]; FOR OFFICE USE ONLY [ ]

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements and to the best of my knowledge and belief it is true, correct and complete. If prepared by a person other than taxpayer, the declaration is based on all information of which the preparer has any knowledge.

Check here [ ] if you authorize your preparer to discuss this return with us.

Make checks payable to: COMPTROLLER OF MARYLAND. Write social security no. on check using blue or black ink. Mail to: Comptroller of Maryland, Revenue Administration Division, Annapolis, Maryland 21411-0001

Signature and Date fields for 'Your signature' and 'Spouse's signature'.

Signature and Address fields for 'Signature of preparer other than taxpayer' and 'Address and telephone number of preparer'. Includes 'Preparer's SSN or PTIN' field.