

2D BARCODE SPECIFICATIONS

MARYLAND FORM 515

TAX YEAR 2005

LINE NUMBER	FIELD	DESCRIPTION	FIELD SIZE	FIELD TYPE	COMMENTS, ACCEPTABLE VALUES, EDITS
1	Header	Header Version Number	2	Alpha-Numeric	"T1"
2	Header	Developer Code	4	Numeric	
3	Header	Jurisdiction Code	2	Alpha	MD
4	Header	Description	3	Numeric	515
5	Header	Specification Version	2	Numeric	00-99
6	Header	Software Form Version	2	Numeric	00-99
7	A	Primary Social Security Number	9	Numeric	
8	A	Secondary Social Security Number	9	Numeric	
9	B	Primary Last Name	20	Alpha	Last Name of Taxpayer
10	B	Primary First Name	20	Alpha	First Name of Taxpayer
11	B	Primary Middle Initial	1	Alpha	Middle Initial of Taxpayer
12	B	Spouse Last Name	20	Alpha	Last Name of Spouse
13	B	Spouse First Name	20	Alpha	First Name of Spouse
14	B	Spouse Middle Initial	1	Alpha	Middle Initial of Spouse
15	B	Street Address 1	30	Alpha-Numeric	Street or Post Office Box, include Apt No. or Rural Route
16	B	Street Address 2	30	Alpha-Numeric	Street or Post Office Box, include Apt No. or Rural Route
17	B	City	20	Alpha-Numeric	City, Town, or Post Office, Include Foreign Country
18	B	State	2	Alpha	Standard Post Office 2 letter abbreviation
19	B	Zip	10	Alpha-Numeric	5 + 4 US Zip code, plus up to 10 character foreign ZIP
20	C	Filing Status - Single	1	Numeric	Blank or "1". "1" = box is marked, Blank = box is not marked
21	C	Filing Status - Married Joint	1	Numeric	Blank or "2". "2" = box is marked, Blank = box is not marked
22	C	Filing Status - Married Separate	1	Numeric	Blank or "3". "3" = box is marked, Blank = box is not marked
23	C	Filing Status - Head of Household	1	Numeric	Blank or "4". "4" = box is marked, Blank = box is not marked
24	C	Filing Status - Qualifying widow(er) with dependent child	1	Numeric	Blank or "5". "5" = box is marked, Blank = box is not marked
25	C	Filing Status - Dependent Taxpayer	1	Numeric	Blank or "6". "6" = box is marked, Blank = box is not marked
26	D	Exemptions - You are over 65	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked
27	D	Exemptions - You are Blind	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked
28	D	Exemptions - Spouse is over 65	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked
29	D	Exemptions - Spouse is Blind	1	Alpha	Blank or "Y". "Y" = box is marked, Blank = box is not marked
30	D	Exemptions - Total	2	Numeric	0 - 99 or Blank
31	17	Adjusted Gross Income from Federal Return	15	Numeric	Dollars and Cents, Prefer Whole dollars only
32	20	Total Additions to Maryland Income	15	Numeric	Dollars and Cents, Prefer Whole dollars only
33	24	Total Subtractions to Maryland Income	15	Numeric	Dollars and Cents, Prefer Whole dollars only
34	27	Deduction Method - Standard	1	Alpha	Check box, Blank or "S". "S" = box is marked, Blank = box is not marked
35	27	Deduction Method - Itemized	1	Alpha	Check box, Blank or "I". "I" = box is marked, Blank = box is not marked
36	27	Deduction Amount	15	Numeric	Dollars and Cents, Prefer Whole dollars only
37	34	Earned Income Credit	15	Numeric	Dollars and Cents, Prefer Whole dollars only
38	35	Poverty Level Credit	15	Numeric	Dollars and Cents, Prefer Whole dollars only
39	37	Business Tax Credits	15	Numeric	Dollars and Cents, Prefer Whole dollars only
40	41	Local Earned Income Credit	15	Numeric	Dollars and Cents, Prefer Whole dollars only
41	42	Local Poverty Level credit	15	Numeric	Dollars and Cents, Prefer Whole dollars only
42	46	Contribution to Chesapeake Bay/Endangered Species	15	Numeric	Dollars and Cents, Prefer Whole dollars only
43	47	Contribution to Fair Campaign Financing Fund	15	Numeric	Dollars and Cents, Prefer Whole dollars only
44	48	Contribution to Maryland Cancer Fund	15	Numeric	Dollars and Cents, Prefer Whole dollars only
45	50	Total Maryland and Local Tax Withheld	15	Numeric	Dollars and Cents, Prefer Whole dollars only
46	51	2005 Est Tax Pmts/Amt applied from 2004 Return and Amt Paid with Ext. Request	15	Numeric	Dollars and Cents, Prefer Whole dollars only
47	52	Refundable Earned Income Credit	15	Numeric	Dollars and Cents, Prefer Whole dollars only
48	53	Maryland Tax from line 39 (if PA resident)	15	Numeric	Dollars and Cents, Prefer Whole dollars only
49	56	Balance Due	15	Numeric	Dollars and Cents, Prefer Whole dollars only
50	57	Overpayment	15	Numeric	Dollars and Cents, Prefer Whole dollars only

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51	58	Amount of Overpayment to be applied to 2006 Est. Tax	15	Numeric	Dollars and Cents, Prefer Whole dollars only
52	59	Amount of Overpayment to be refunded	15	Numeric	Dollars and Cents, Prefer Whole dollars only
53	60	Total Interest Charges	15	Numeric	Dollars and Cents, Prefer Whole dollars only
54	E	Daytime Telephone Number	10	Numeric	No parenthesis, hyphens or spaces
55	E	Home Telephone Number	10	Numeric	No parenthesis, hyphens or spaces
56	F	Code number	9	Numeric	
57	H	Preparer's PTIN or SSN	9	Alpha/Numeric	6 - 9 digits
58	I	Trailer			*EOD* <CR>