



Print Using Blue or Black Ink Only

Form fields for Social Security numbers, names, address, and county information.

YOUR FILING STATUS - See Instruction 1 to determine if you are required to file. Includes options for Single, Married, Head of household, etc.

Table for EXEMPTIONS with columns for (A) Yourself, Spouse, (B) 65 or over, Blind, (C) Dependents, and (D) Total Exemptions.

Main tax calculation section with lines 1 through 23, including taxable net income, Maryland tax, credits, and total amount due.

DIRECT DEPOSIT OF REFUND section with fields for routing number, account number, and type of account.

Daytime telephone no. and Home telephone no. fields with CODE NUMBERS (3 digits per box).

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.

Signature and Date fields for the taxpayer and preparer.



WHO MAY USE THIS FORM?

You may use this short form (Form 503) if you answer "NO" to ALL of these questions:

- | YES | NO | | YES | NO | | | |
|-----|--------------------------|--------------------------|---|-----|--------------------------|--------------------------|---|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Is your federal adjusted gross income \$100,000 or more? | 5. | <input type="checkbox"/> | <input type="checkbox"/> | Are you claiming a tax credit on Maryland Form 500CR or Form 502CR? |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | Will you have any Additions to Income or Subtractions from Income on your Maryland return? If you are eligible for a subtraction, such as the pension exclusion , it will be to your benefit to use Form 502. If you have a state pickup amount on your Form W-2, you must use Form 502. | 6. | <input type="checkbox"/> | <input type="checkbox"/> | Were you a nonresident of Maryland? |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | Do you want to itemize deductions? | 7. | <input type="checkbox"/> | <input type="checkbox"/> | Were you a part-year resident of Maryland? |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | Did you make estimated payments in 2010; have part or all of your 2009 refund applied to your 2010 estimated account; or make a payment with an extension request, Form 502E? | 8. | <input type="checkbox"/> | <input type="checkbox"/> | Does your return cover less than a 12-month period? |
| | | | | 9. | <input type="checkbox"/> | <input type="checkbox"/> | Were you a fiscal year taxpayer? |
| | | | | 10. | <input type="checkbox"/> | <input type="checkbox"/> | Will you want part or all of your refund credited to next year's estimated account? |
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