

FORM **502** MARYLAND TAX RETURN
 (OR FISCAL YEAR BEGINNING 1999, ENDING)
 RESIDENT



1999
\$

Please Print

Blue or Black Ink Only

Your first name	Initial	Last name			
Spouse's first name	Initial	Last name			

Present address (No. and street) _____ City or town _____ State _____ Zip code _____

SOCIAL SECURITY NUMBER (S) (REQUIRED)								

Name of county and incorporated city, town or special taxing area in which you were a resident on the last day of the taxable period. (See Instruction 6)		Maryland county	City, town or taxing area
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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)

EXEMPTIONS—See Instruction 10

(A) Yourself Spouse Enter No. Checked (A) × \$1,850 \$ _____

Check here if you are: 65 or over Blind Spouse is: 65 or over Blind

(B) Enter No. Checked (B) × \$1,000 \$ _____

(C) Dependent Children Enter No. (C) × \$1,850 \$ _____

(D) Other Dependents Regular 65 or over Enter No. (D) × \$1,850 \$ _____

Name(s) _____ Relationship(s) _____

(E) Total Exemptions (Add A, B, C and D) (E) Total Exemption Amount \$ _____

PART-YEAR RESIDENTS AND MILITARY: Check here if you began or ended legal residence in Maryland in 1999 (See Instruction 26) or if you have non-Maryland military income (See Instruction 29).

Give dates of Maryland Residence

MO DAY YR TO MO DAY YR

FROM TO

Other state of residence _____

INCOME

	Dollars	Cents
1. Adjusted gross income from your federal return (See Instruction 11)	<input type="text"/>	<input type="text"/>
1a. How much of line 1 represents wages, salaries and/or tips?	<input type="text"/>	<input type="text"/>

ADDITIONS TO INCOME (See Instruction 12)

2. Tax-exempt interest on state and local obligations (bonds) other than Maryland	<input type="text"/>	<input type="text"/>
3. Taxable tax preference items (Attach Form 502 TP)	<input type="text"/>	<input type="text"/>
4. Lump sum distributions	<input type="text"/>	<input type="text"/>
5. Other additions (Enter code letter(s) from Instruction 12)	<input type="text"/>	<input type="text"/>
6. Total additions to Maryland income (Add lines 2 through 5)	<input type="text"/>	<input type="text"/>
7. Total federal adjusted gross income and Maryland additions (Add lines 1 and 6)	<input type="text"/>	<input type="text"/>

SUBTRACTIONS FROM INCOME (See Instruction 13)

8. Taxable refunds, credits or offsets of state and local income taxes included in line 1 above	<input type="text"/>	<input type="text"/>
9. Child and dependent care expenses	<input type="text"/>	<input type="text"/>
10. Income from U.S. obligations	<input type="text"/>	<input type="text"/>
11. Pension exclusion from worksheet (page 5)	<input type="text"/>	<input type="text"/>
12. Taxable social security and RR benefits (Tier I, II and supplemental) included in line 1 above	<input type="text"/>	<input type="text"/>
13. Income received during period of nonresidence (See Instruction 26 and 29)	<input type="text"/>	<input type="text"/>
14. Other subtractions (Enter code letter(s) from Instruction 13)	<input type="text"/>	<input type="text"/>
15. Subtotal (Add lines 8 through 14)	<input type="text"/>	<input type="text"/>
16. Two-income subtraction from worksheet (page 7)	<input type="text"/>	<input type="text"/>
17. Total subtractions from Maryland income (Add lines 15 and 16)	<input type="text"/>	<input type="text"/>
18. Maryland adjusted gross income (Subtract line 17 from line 7)	<input type="text"/>	<input type="text"/>

DEDUCTION METHOD (All taxpayers must select one method)

STANDARD DEDUCTION METHOD See Instruction 16 and worksheet. (Enter amount on line 19)

ITEMIZED DEDUCTION METHOD Complete lines 19a, b and c

Total federal itemized deductions (from line 28, federal Schedule A) 19a.

State and local taxes included in federal Schedule A, line 5 (or from worksheet on page 7) 19b.

Net itemized deductions (Subtract line 19b from line 19a) (Enter amount on line 19) 19c.

19. Deduction amount (Part-year residents see Instruction 26(m) and military personnel see Instruction 29)	<input type="text"/>	<input type="text"/>
20. Net income (Subtract line 19 from line 18)	<input type="text"/>	<input type="text"/>
21. Exemption amount (from Exemptions area above) (See Instruction 10)	<input type="text"/>	<input type="text"/>
22. Taxable net income (Subtract line 21 from line 20)	<input type="text"/>	<input type="text"/>

Place your check or money order on top of your wage and tax statements and fasten here with one staple.

