MARYLAND FORM 505

NONRESIDENT INCOME TAX RETURN



2016

0	R FISCAL YEAR BEGINNING 2016, ENDING				
<u>></u>					
S					
를 5:	ocial Security Number Spouse's Social Security Number				
ğ,	Andrew 0				
o	rst Name Initial				
菱	St Bank				
e I	Deal				
Print -	ast Name				
ď					
(Gay L				
5	pouse's First Name Initial				
5	Shea				
S	pouse's Last Name	An agreement and parameter standing stages are not without the state of the standing stages are not appeared to the standing stage are not without the standing stages are not appeared to the standing stages			
		Maryland County			
	itehill St				
C	urrent Mailing Address Line 1 (Street No. and Street Name or PO Box)	City, Town or Taxing Area			
		Norma of county and incorporated city, town or special taxing area in which you were employed on the last day of the taxable period if you exceed wages in Maryland. (See			
-	urrent Mailing Address Line 2 (Apt No., Suite No., Floor No.)	instruction 6).			
	Birth Franky Saures Six 2 (Species) Saide Hay Frank Hay				
I	Dallas	TX 75231			
c	ity or Town	State ZIP Code			
+	FILING STATUS See Instruction 1 to determine if you are required to file.				
	CHECK 1. Single (If you can be claimed on another person's tax 4. He	ead of household			
5.5	ONE return, use Filing Status 6.) 5. Q	ualifying widow(er) with dependent child			
, K.E.	BOX 2. Married filing joint return or spouse had no income 6. Do	ependent taxpayer (Enter 0 in Exemption Box (A) -			
<u> </u>	3. Married filing separately, Spouse's SSN ▶ 1	ee Instruction 8.)			
2 2	RESIDENCE INFORMATION See Instruction 9.				
Married filing joint return or spouse had no income 3. Married filing separately, Spouse's SSN See Instruction 8.) RESIDENCE INFORMATION See Instruction 9. Enter 2-letter state code for your state of legal residence. TX If PA resident, enter both County and City, Borough or Township Were you a resident of another state for the entire year of 2016? If no, attach explanation. Yes No Are you or your spouse a member of the military? Did you file a Maryland income tax return for 2015? Yes No If "Yes," was it a Resident or a Non Dates you resided in Maryland for 2016. If none, enter "NONE": FROM 0 TO 0 (MMDDYYY) Check here for Maryland taxes withheld in error. (See Instruction 4.) EXEMPTIONS See Instruction 10. Check appropriate box(es). NOTE: If you are claiming dependents, you must attach the Information Form 5028 to this form in order to receive the applicable exemption amount.					
7 4 5 5 6 5 6 5 6 5 6 5 6 5 6 5 6 5 6 5 6	If PA resident, enter both County and City, Borough or Township Were you a resident of another state for the entire year of 2016? If no, attach explanati				
r mer	Are you or your spouse a member of the military?	Yes × No			
ck o	Did you file a Maryland income tax return for 2015? Yes x No If "Yes," wa	H — —			
x of S	Dates you resided in Maryland for 2016. If none, enter "NONE": FROM 0	TO 0 (MMDDYYYY).			
E TO E	Check here for Maryland taxes withheld in error. (See Instruction 4.)	a mendelende val kulturi i idalasi, in stanost tilast kultution .			
5 7 8 8 6 7 8 8	EXEMPTIONS See Instruction 10. Check appropriate box(es). NOTE: If you are claimi	ing dependents, you must attach the Dependents'			
≶ວ⊽	Another total both total to the both to tech to the approach and	ınt.			
N O Æ	A. X Yourself Spouse Enter number checked 1 See Instruct	ion 10 A. \$			
ONE staple. Attac					
	B. ► 65 or over ► 65 or over				
50					
	▶ Blind ▶ Blind Enter number checked X \$1,000	B. \$			
T		Van 10 . F. A			
	C. Enter number from line 3 of Dependent Form 502B	tion 10 C. \$			
	D. Enter Total Exemptions (Add A, B and C.)	ant D \$ 3200			
	D. Enter Total Exemptions (Add A, B and C.)	ant D. \$			

FORM 505

NONRESIDENT INCOME TAX RETURN



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Deal Name SSN (1) FEDERAL INCOME (2) MARYLAND INCOME (3) NON-MARYLAND (LOSS) INCOME (LOSS) (See Instruction 11.) 0 . ____ 0 4. Taxable refunds, credits or offsets of state and 8. Other gains or (losses) (from federal Form 4797).....8. 9. Taxable amount of pensions, IRA distributions, 10. Rents, royalties, partnerships, estates, trusts, etc. 13. Taxable amount of Social Security and 14. Other income (including lottery or other gambling 16. Total adjustments to income from federal return 0_____ 17. Adjusted gross income (Subtract line 16 from line 15.) ▶ 17. ADDITIONS TO INCOME (See Instruction 12.) 21. Total federal adjusted gross income and Maryland additions (Add lines 17 (Column 1) and 20.).............21. **SUBTRACTIONS FROM INCOME** (See Instruction 13.) 25. Maryland adjusted gross income before subtraction of non-Maryland income. (Subtract line 24 from line 21.) 25. DEDUCTION METHOD See Instruction 15. (All taxpayers must select one method and check the appropriate box.) × ≥ 26a. 1500 26. a. STANDARD DEDUCTION METHOD (Enter amount on line 26a.) ITEMIZED DEDUCTION METHOD (Complete lines 26b, c and d.) b. Total federal itemized deductions (from line 29, federal Schedule A). ▶ 26b. e. Deduction amount (Multiply lines 26a or 26d by the AGI factor.) 26e. 1 (from worksheet in Instruction 14)...> 26. 1500 3200 3200 MARYLAND TAX COMPUTATION - COMPLETE FORM 505NR BEFORE CONTINUING. c. Total Maryland tax (Add lines 32a and 32b.)

MARYLAND FORM 505

NONRESIDENT INCOME TAX RETURN



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Name	Deal	SSN				
34. 0	ther income tax	redits for individuals from Part K, li	ne 11 of Form 50	2CR (Attach Form 502CR.)	34.	
35 . 8	usiness tax credit	s Yo	u must file this	form electronically to claim bus	iness tax credits on Form 5	00CF
36. T	otal credits (Add	ines 33 through 35.)			36.	
37. M	aryland tax after	credits (Subtract line 36 from line 3	(2c.) If less than	0, enter 0	0	
38. C	ontribution to Che	sapeake Bay and Endangered Speci	ies Fund (See Ins	truction 21.)	> 38.	
39. C	ontribution to De	elopmental Disabilities Services and	Support Fund (S	See Instruction 21.)	▶ 39.	
10. C	ontribution to Ma	yland Cancer Fund (See Instruction	21.)		> 40.	
11. C	ontribution to Fai	Campaign Financing Fund (See Ins	struction 21.)		> 41.	
				141.)		
13. T	otal Maryland tax	withheld (Enter total from and atta	ich your W-2 an	d 1099 forms if MD tax is withhel	d.) ► 432651	· · —
14. 2	016 estimated ta:	payments, amount applied from 20	015 return, paym	ents made with Form 502E and Form	1	
•	IW506NRS		· · · · · · · · · · · · · · · · · · ·		> 44.	
15. N	onresident tax pa	id by pass-through entities (Attach	Maryland Scho	edule K-1 (510))	▶ 45.	
16. R	efundable income	tax credits from Part M, line 6 of F	orm 502CR (Atta	ch Form 502CR. See Instruction 22	.)46.	
17. To	otal payments an	credits (Add lines 43 through 46.)			47.	
2400 FF 10 TO MICH.	AND THE PARTY AND ADDRESS OF THE PARTY AND T		MANAGEMENT AND A STREET WAS A STREET OF THE	42.)		
19 . 0	verpayment (If li	ne 42 is less than line 47, subtract l	line 42 from line	47.)	▶ 492651	
					0/51	
				from line 49.) See line 54 REFUI		
52. Ir	nterest charges fr	om Form 502UP or f	for late filing	(See Instruction 23.) Tota	1 . ► 52	
53. T	OTAL AMOUNT	DUE (Add line 48 and line 52.) IF \$	1 OR MORE, PA	Y IN FULL WITH THIS RETURN.		
				nformation is correct. For Splitting I		
		osit option, complete the following in		y and legibly: ► 54a. Type of account Account number ►	it: Checking Sav	vings
	nosting nombo					
Check	here if you	authorize your preparer to discuss th	is return with us.	Check here ▶ if you authorize	e your paid preparer not to file	
of per	ue, correct and co	t I have examined this return, includ	ing accompanying	Tax Refund statement electronically (S g schedules and statements and to the the declaration is based on all informal	best of my knowledge and belie	ef
You	r signature	anticom marihmento a major e discome si disconsista con con tanto da contra della coloni. A falla di Salver y Aces di di Palesto	Date	Signature of preparer other than taxpayer		
and the same of th	The Barry had in Constitution and Constitution of The State of The Sta	makada ra dala dakan angala rama sagrap ang		Frequency among any action of a graph and any angular and action of the		
Spo	use's signature		Date	Street address of preparer		
	0					
Daytime telephone no.				City, State, ZIP	- American de como como contrato contrato contrato contrato de Contrato de Contrato de Contrato de Contrato de	
Hon	ne telephone no.	refragation aug to dissipate to dissipate to dissipate and		Telephone number of preparer	Preparer's PTIN (Required by la	aw)
	•				·	
				▶.	CODE NUMBERS (3 digits per l	line)

For returns filed without payments, mail your completed return to:

Comptroller of Maryland Revenue Administration Division 110 Carroll Street Annapolis, MD 21411-0001 For returns filed with payments, attach check or money order to Form IND PV. Make checks payable to Comptroller of Maryland. Do not attach Form IND PV or check/money order to Form 505. Place Form IND PV with attached check/money order on top of Form 505 and mail to:

Comptroller of Maryland Payment Processing PO Box 8888 Annapolis, MD 21401-8888

MARYLAND FORM **505NR**

NONRESIDENT INCOME TAX CALCULATION

ATTACH TO YOUR TAX RETURN



2016

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An	irew	0	Deal		
First Na	TITE	Initial	Last Name	Social Security Number	
Gay		L	-		
Spouse	's First Name	Initial	Spouse's Last Name	Spouse's Social Security Number	
			SNR Instructions appearing on page 2 of this form. SNR Instructions appearing in Instruction 18 of the	Form 515 Instructions.	
			ALLOWING CERTAIN MODIFICATIONS	0	
			line 31 (or Form 515, line 32)		
************			Vorksheet Schedules I or II. Continue to Part II 2		
	II - CALCULATION OF MARYLA				
3.	Enter your federal adjusted gross in		2		
	•				
			olus additions from Form 505 (or 515) line 21 4		
5.	Enter the Taxable Military Income o	f a Non	resident from line 22 of Form 505 5	magainty tain in partie on the statement conditions are not all permission actions of the sense appeals you	
	•		m 505 or Form 515	тине нем виче и простительности поставления принага принага поставления в поставления пост	
6b.	Enter non-Maryland income from Fo	rm 505	(or 515) not included on lines 5	_	
	or 6a of this form (See instructions.	.)			
	•			_	
8.			line 7 from line 4		
	If you are using the standard de				
			8 and enter on line 8a8a		
9.	•	-	ne 3. The factor cannot exceed 1.000000 and		
			, the factor is 0. If line 8 is greater than 0 and	1	
	line 3 is 0 or less, the factor is 1.00	00000.			
10.	Deduction amount.				
	If you are using the standard ded				
	deduction on line 8a by line 9 of	this for	m and enter on line 10a 10a 1500		
	If you are itemizing your deduction		• •		
	Form 505, line 26d, by line 9 of t	his forn	n and enter on line 10b 10b.		
	Form 515 Users, see Instruction			^	
			line 8.)	•	
12.	Exemption amount. Multiply the tot		•	2200	
			e 12 from line 11.)	_	
			rm	0	
15.	•		nount on line 13 on this form by line 1.	^	
			0 or less, the factor is 0		
16.			Enter this amount on Form 505, line 32a	٥	
			<i></i>	·	
17.			this form by .0175. Enter this amount	0	
		0 or le	ss, enter 0	. 0	
If yo	income or earnings tax on Mary	land re	aryland and (2) you are a resident of a local jurisdi sidents, then you must file a Form 515 to report an i income tax instead of the Special Nonresident Tax	d pay a tax on your	
18.	(or Baltimore City) where you are e	mploye	orm by the local rate of the Maryland county d. Enter this amount on Form 515, line 39.		