

Taxpayer Information as shown on joint tax return

Enter the names and Social Security Number(s) exactly as shown on the tax return for which you are filing this form. The spouse's name and Social Security Number shown first on that tax return must also be shown first **below**.

Check here if
injured spouse

<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
First name	MI	Last name	Social Security Number	
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
Spouse's first name	MI	Last name	Social Security Number	

Street address

City or Town State ZIP code+4

Foreign Country Name Foreign Province/State/County

Foreign Postal Code

- Is the address on your joint return different from the address shown above? Yes No
- Check this box only if you are divorced or separated from the spouse with whom you filed the joint return and you want your refund issued in your name only.

Allocation Between Spouses See instructions.

ALLOCATION ITEMS	JOINT	INJURED SPOUSE	OTHER SPOUSE
A. Income items from Federal Form 1040			
1. Wages	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
2. Other income	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
3. Adjustments to income	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
B. Items from Maryland returns			
1. Additions- Form 502, Line 6 • Form 505, Line 20	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
2. Subtractions- Form 502, Line 15 • Form 505NR, Line 7	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
3. Deductions- Form 502, Line 17 • Form 505NR Lines 10A,10B	<input type="text"/> 00		
4. Exemptions- Enter number from exemptions area	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Earned income and/or poverty level credit- Form 502, Lines 22, 23 • Form 505, Line 33	<input type="text"/> 00		
6. Withholding taxes- Form 502, Line 40 • Form 505, Line 43	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
7. Refundable earned income credit- Form 502, Line 42	<input type="text"/> 00		
8. Estimated taxes- Form 502, Line 41 • Form 505, Line 44, 45	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
8a. Electing pass-through entities tax paid- Form 502CR, Part CC, Line 9	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00
9. Other credits- Forms 502 Lines 24, 25, and 43 • 505 Lines 34, 35, and 46	<input type="text"/> 00	<input type="text"/> 00	<input type="text"/> 00

The Comptroller's Office will calculate the amount that may be due to you based on the above information. You will be notified of the amount. Any portion of the joint refund due to you will be issued directly from the intercepting agency if the refund has already been intercepted.

Under penalties of perjury, I declare that I have examined this form, and to the best of my knowledge 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.

Signature of injured spouse Date Daytime telephone no.

Signature of paid preparer **Required by Law** Date Preparer/Firm name (if applicable) PTIN **Required by Law**

Preparer's Mailing Address (PO Box, Number, Street and Apt. No) City or Town State ZIP Code+4