# 2018

# 2018 MAINE INDIVIDUAL INCOME TAX FORM 1040ME



99 99 **2018** to 99 99 9999 X Check here if this is an **AMENDED** return.

Continue on page 2

	S Park		99 <b>2</b> ructions. <b>F</b>	U 1 Print ne			9 99 or black				eck here if		WILIADE	.b retuin.	*1802	1100	
Your Social Security Number	X	XXXXXXX	XXXXXX	XXX									X		9	99 99	999
Spouse's Social Security Number  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX														Your Socia	_		222
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	X	XXXXXX	XXXXXX	ζΧΧΧ	XXXX	X									9	99 99	999
Spouse's First Name  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Your L	_ast Name												Spouse's S	_		
Spouse's First Name  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	X	XXXXXXX	XXXXX	XXX									X		999	999	999
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Spous	se's First Name	Э									N	11	Home Phone N			
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	X	XXXXXXX	XXXXX	ΚΧΧΣ	XXXX	X									999	999	999
Current Mailing Address (PO Box, number, street and apartment number)  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Spous	se's Last Name	e											Work Phone No			
### Author Clean Election Fund. Maine Property Tax Fairness Credit / Maine Sales Tax Fairness Credit - Maine residents and part-year residents only - see Schedu.  ### X	X	XXXXXX	XXXXX	XXXX	XXXX	XXXX	XXXX	XXX		XX	XXXXX	XXXX	XXX	XXXXX	XX	XX	XXXX
Maine Property Tax Fairness Credit / Maine Sales Tax Fairness Credit - Maine residents and part-year residents only - see Schedule PTFC/STFC. Check this box if you are filing a return only to claim the Property Tax Fairness Credit on line 25d and/or the Sales Tax Fairness Credit on line 25d Check here if you were engaged in Commercial Tax Fairness Credit on Inc 25d And/or Sales Tax Fairness Credit on Inc 25d And/or Sales Tax	Surre	nt Mailing Addr	ress (PO Bo	x, numb	er, stree	et and ap	oartment n	umber	)	City	or Town				State	ZIP C	ode
Maine Property Tax Fairness Credit / Maine Sales Tax Fairness Credit - Maine residents and part-year residents only - see Schedule PTFC/STFC. Check this box if you are filing a return only to claim the Property Tax Fairness Credit on line 25d and/or the Sales Ta Fairness Credit on line 25d and/or the Sales Tax Fairness Credit on Schedule 2 Check here if you were engaged in COMMERCIAL Fax Fairness Credit on Sales Tax Fairness Credit on S	X	XXXXXX	XXXXX	XXXX	XXXX	XXXX	XXXX	X						XX		XX	XXXX
### PTFC/STFC. Check this box if you are filing a return only to claim the Property Tax Fairness Credit on line 256 and/or the Sales T Fairness Credit on line 256. Otherwise, leave this box blank. Follow the instructions on Schedule PTFC/STFC.  #### Adding Clean Election Fund. Maine Residents Only, Check or If you, or your spouse, if filing jointly, want \$3 to go to this fund. X You X Spouse  #### Spouse If STATUS (Check one)  ### Single  ### Married filing separately. Enter spouse's social security number and full name above. Head of household (With qualifying person)  ### X Qualifying widow(er) with dependent child (Year spouse died 9999)  ### X Composite Return (Pass-through Entities ONLY)  ### RESIDENCY STATUS (Check one)  ### X Part-Year Resident 10 X Nonresident 11 X Nonresident Alien X filing Schedule NRH  ### CHECK IF: You were: 12a X 65 or over 12b X blind Spouse was: 12c X 65 or over 12d X blind  ### Enter the TOTAL number of qualifying children and dependents - see instructions.  ### 13 999999999 0  ### FEDERAL ADJUSTED GROSS INCOME.  ### In Aline ADJUSTED GROSS INCOME. (Line 14 plus or minus line 15.)	Foreig	gn country nam	ne									Fo	reign p	ovince/state/co	unty F	oreign post	al code
social security number and full name above. Head of household (With qualifying person)  Qualifying widow(er) with dependent child (Year spouse died 9999)  X Composite Return (Pass-through Entities ONLY)  RESIDENCY STATUS (Check one)  X Resident 8a X "Safe Harbor" Resident 10 X Nonresident 11 X Nonresident Alien X filing Schedule NRH  CHECK IF: You were: 12a X 65 or over 12b X blind Spouse was: 12c X 65 or over 12d X blind  Enter the TOTAL number of EXEMPTIONS - see instructions		Single Married filin	ng <b>j</b> ointly		,												
X Head of household (With qualifying person) X Qualifying widow(er) with dependent child (Year spouse died 9999) X Composite Return (Pass-through Entities ONLY)  RESIDENCY STATUS (Check one) X Resident 8a X "Safe Harbor" Resident X Part-Year Resident 10 X Nonresident 11 X Nonresident Alien X filing Schedule NRH  CHECK IF: You were: 12a X 65 or over 12b X blind Spouse was: 12c X 65 or over 12d X blind  Enter the TOTAL number of EXEMPTIONS - see instructions	X	Married filin	ng <b>s</b> eparate	ely. Ent	er spou												
(Year spouse died 9999)  X Composite Return (Pass-through Entities ONLY)  RESIDENCY STATUS (Check one)  X Resident 8a X "Safe Harbor" Resident X Part-Year Resident 10 X Nonresident 11 X Nonresident Alien X filing Schedule NRH  CHECK IF: You were: 12a X 65 or over 12b X blind Spouse was: 12c X 65 or over 12d X blind  Enter the TOTAL number of EXEMPTIONS - see instructions	Х		•														
X Composite Return (Pass-through Entities ONLY)  RESIDENCY STATUS (Check one)  X Resident 8a X "Safe Harbor" Resident 10 X Nonresident 11 X Nonresident Alien X filing Schedule NRH  CHECK IF: You were: 12a X 65 or over 12b X blind Spouse was: 12c X 65 or over 12d X blind  Enter the TOTAL number of EXEMPTIONS - see instructions	X		` '			child											
X Resident X Part-Year Resident 10 X Nonresident 11 X Nonresident Alien X filing Schedule NRH  CHECK IF: You were: 12a X 65 or over 12b X blind Spouse was: 12c X 65 or over 12d X blind  Enter the TOTAL number of EXEMPTIONS - see instructions	Х	Composit	e Return (			h											
X Resident X Part-Year Resident 10 X Nonresident 11 X Nonresident Alien X filing Schedule NRH  CHECK IF: You were: 12a X 65 or over 12b X blind Spouse was: 12c X 65 or over 12d X blind  Enter the TOTAL number of EXEMPTIONS - see instructions	F	RESIDENCY	STATUS (	Check	one)												
Enter the TOTAL number of EXEMPTIONS - see instructions								Resid		X	Nonre	esident <b>A</b> li	ien				
a Enter the TOTAL number of qualifying children and dependents - see instructions	СН	ECK IF: You	ı were:	12a	X 65	or ove	r <b>12b</b>	Х	blind		Spou	se was:	120	X 65 or	over 12	d X bli	nd
15 INCOME MODIFICATIONS. (From Schedule 1, line 3.)       15       999999999.0         16 MAINE ADJUSTED GROSS INCOME. (Line 14 plus or minus line 15.)       16       999999999.0         17 DEDUCTION. X Standard (See page 3 of the instructions.)       17       999999999.0         X Itemized (See Maine Schedule 2 and page 3 of the instructions.)       2000000000000000000000000000000000000			number of	EXEM	PTION:	<b>S</b> - see										13	
16 MAINE ADJUSTED GROSS INCOME. (Line 14 plus or minus line 15.)		er the TOTAL				nildren a	and depe	nden	is - see	instru	ctions					13a	9
17 DEDUCTION. X Standard (See page 3 of the instructions.)	_		L number o	of qualif	fying ch												9
X Itemized (See Maine Schedule 2 and page 3 of the instructions.)	14	FEDERAL	L number o	of qualif	fying ch	ICOME	<u> </u>					14			99	99999	9.00
,	14	FEDERAL	L number o	of qualif	OSS IN	n Schee	dule 1, lir	ne 3.)				14			99 99 99	999999	99.00
	14 15 16	FEDERAL INCOME I	L number of ADJUSTICAL DJUSTED ON. X	ED GROSS Stand	oss IN  From Sinco dard (S	n Schee	dule 1, lir Line 14 p	ne 3.) lus or	minus	line 1:	5.)	14			99 99 99	999999	99.00

			*1	802101*
Calculate Your Tax and Nonrefundable Credits	19 20	TAXABLE INCOME. (Line 16 minus lines 17 and 18.)		999999999.00
Jonrefunda		available at www.maine.gov/revenue/forms	20	
d Non	20a	TAX CREDIT RECAPTURE AMOUNTS (Enclose worksheet(s) - see instructions).	20a	99999999.00
r Tax an	21	TOTAL TAX. (Line 20 plus line 20a)	21	99999999.00
e You	22	TAX CREDITS. (From Maine Schedule A, line 23.)	22	99999999.00
Calculat	23	NONRESIDENT CREDIT. (For part-year residents, nonresidents and "Safe Harbor" residents only.) From Schedule NR, line 9 or NRH, line 11(You MUST attach a copy of your federal return and TDY papers, if applicable.)	23	999999999.00
	24	$\textit{\textbf{NET TAX}}. \ (\text{Subtract lines 22 and 23 from line 21.}) \ (\text{Nonresidents see instructions.}) \$	24	99999999.00
Credits	25	TAX PAYMENTS.  a Maine income tax withheld. (Enclose W-2, 1099 and 1099ME forms.)	· 25a	999999999.00
Tax Payments/Refundable Credits		b 2018 estimated tax payments and 2017 credit carried forward, extension payments and payments with original return. (Include any REAL ESTATE WITHHOLDING tax payments.)	25b	999999999.00
ents/F		c REFUNDABLE TAX CREDITS (from Maine Schedule A, line 7)	25c	999999999.00
ax Paym		d Property Tax Fairness Credit (Schedule PTFC/STFC, line 13). (See instructions.) (For Maine residents and part-year residents only)	25d	999999999.00
_		e Sales Tax Fairness Credit (Schedule PTFC/STFC, line 14 or 14a)	25e	999999999.00
		(See instructions.) (For Maine residents and part-year residents only)  f TOTAL. (Add lines 25a, b, c, d, and e.)	25f	999999999.00
	26	If this is an amended return, enter overpayment, if any, on original return or		999999999.00
	27	as previously adjusted  Line 25f minus line 26. (If negative, enter a minus sign in the box to the left		999999999.00
	28	of the number.)	27	
		overpaid. (Line 27 minus line 24 - if line 24 is negative, enter line 27 here.)	28	999999999.00
	29	INCOME TAX UNDERPAID. If line 24 is larger than line 27, enter amount underpaid. (Line 24 minus line 27 - see instructions.)	29	99999999.00
and pue	30	USE TAX (SALES TAX). (See instructions.)	30	999999999.00
/ Refun	30a	SALES TAX ON CASUAL RENTALS OF LIVING QUARTERS. (See instructions.)	30a	999999999.00
utions	31	CHARITABLE CONTRIBUTIONS and PARK PASSES. (From Maine Schedule CP, line 10.	.) 31	999999999.00
Contrib	32 33	<b>NET OVERPAYMENT.</b> (Line 28 minus lines 30, 30a and 31.) – NOTE: If total of lines 30, 30a and 31 is greater than line 28, enter as amount due on line 34a. Amount of line 32	32	999999999.00
luntary	33	to be CREDITED to 2019 estimated tax 33a 99999999.00 REFUND	33b	999999999.00
Fax / Vo		OU WOULD LIKE YOUR REFUND SENT DIRECTLY TO YOUR BANK ACCOUNTY TO BE SEEN TO YOUR BANK ACCOUNTY OF THE SECOND SEEN TO YOUR BANK ACCOUNTY OF THE SECOND	JNT (\$20,000 or less), see page 5	of the instructions and fill
Calculate Use Tax / Voluntary Contributions / Refund Due		will go to an account	99999999	
Calcul		outside the United States X 33d Account Number	999999999999999	
	33e	Type of Account: X Checking X Savings		

#### 2018 FORM 1040ME, Page 3



Name(s) as shown on Form 1040ME

Your Social Security Number

#### 

999 99 9999

34a TAX DUE. (Add lines 29, 30, 30a and 31) - NOTE: If total of lines 30, 30a and 31 is greater than line 28, enter the difference as an amount due on this line .......

99999999.00

**b** Underpayment Penalty. (Attach Form 2210ME.) Check here if you checked the box on Form 2210, line 17

99999999.00

c TOTAL AMOUNT DUE. (Add lines 34a and 34b.) (Pay in full with return.) ........ 34c

99999999.00

EZ PAY at www.maine.gov/revenue or ENCLOSE CHECK payable to: Treasurer, State of Maine. DO NOT SEND CASH

.....

34b

**IMPORTANT NOTE** 

If taxpaver is deceased. enter date of death

99 9999 (Day)

If spouse is deceased. enter date of death.

9999

(Month)

Third Party Do you want to allow another person to discuss this return with Maine Revenue Services? X Yes (complete the following).

(Month)

No.

(See page 5 of the instructions)

Designee

TAX DUE

Designee's name XXXXXXXXXXXXXXXX

Phone no. 999

999 9999

Personal identification #: 99999

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

SIGN HERE Keep a copy of this return for your records Paid Preparer's Use

Only

Your signature Date signed Your occupation

Spouse's signature (If joint return, both must sign) Date signed Spouse's occupation

Preparer's signature Date Preparer's phone number

99999999

Preparer's SSN or PTIN Print preparer's name and name of business

#### Avoid errors that delay processing of returns:

- Use black or blue ink. Do not use red ink.
- Be sure to enter amounts on correct lines.
- Line A. Check the Property Tax Fairness Credit/Sales Tax Fairness Credit box, if it applies.
- Lines 12 and 17. If you are over 65 and/or blind, see the instructions on page 4 and claim the additional amount as allowed.
  - Line 20. Use the correct column from the tax table for your filing status.
  - Refund. If you overpaid your tax, enter the amount you want to be refunded on line 33b.
    - Double check social security numbers, filing status, and number of exemptions.
      - Double check mathematical calculations.
        - Be sure to sign your return.
        - Enclose W-2 forms with the return.

If requesting a REFUND, mail to: Maine Revenue Services, P.O. Box 1066, Augusta, ME 04332-1066 If NOT requesting a refund, mail to: Maine Revenue Services, P.O. Box 1067, Augusta, ME 04332-1067

**Payment** Injured Χ Χ Spouse Plan

#### SCHEDULE 1 FORM 1040ME Attachment

Sequence No. 4

### **INCOME MODIFICATIONS**

See instructions on page 6. Enclose with your Form 1040ME For more information, visit www.maine.gov/revenue/forms.



Name(s) as shown on Form 1040ME

Your Social Security Number

	SCHEDULE 1 — INCOME MODIFICATIONS - For Form 1040ME, line 15	
1 AE	DDITIONS to federal adjusted gross income.	
á	a Income from municipal and state bonds, other than Maine	.00
ı	<b>b</b> Net Operating Loss Recovery Adjustment. (Attach a schedule showing your calculation.)1b	.00
(	c Maine Public Employees Retirement System Contributions	.00
(	d Bonus Depreciation Add-back. (See instructions.)1d	.00
•	e Maine Capital Investment Credit Bonus Depreciation Add-back. (See instructions.)1e	.00
f	Fiduciary Adjustment - additions only. (Attach a copy of your federal Schedule K-1.)1f	.00
(	g Other. (Attach worksheet(s) - see instructions.)	.00
	h Total Additions. (Add lines 1a through 1g.)	.00
2 :	SUBTRACTIONS from federal adjusted gross income.	
	a U.S. Government Bond interest included in federal adjusted gross income. (See instructions.)2a	.00
	b State Income Tax Refund. (Only if included in federal adjusted gross income.) <b>2b</b> c Social Security and Railroad Retirement Benefits included in federal adjusted gross	.00
`	income. (See instructions.)2c	.00
(	Pension Income Deduction. (Complete and attach the worksheet on back.)2d  Check here if the amount on line 2d includes military retirement pay (from	.00
	line 6 of the Worksheet for Pension Income Deduction)	
•	Interest from Maine Municipal General Obligation, Private Activity and Airport	
	Authority Bonds included in federal adjusted gross income. (See instructions.)2e	.00
f	Maine Public Employees Retirement System Pick-Up Contributions paid to the taxpayer	
	during 2018 which have been previously taxed by the state2f	.00
(	g Fiduciary Adjustment - subtractions only. (Attach a copy of your federal Schedule K-1.)2g	.00
ı	h Bonus Depreciation and Section 179 Recapture. (See instructions.)2h	.00
i	Medical marijuana business expenses2i	.00
j	Net operating losses disallowed for federal tax purposes2j	.00
ı	k Other. (Attach worksheet(s) - see instructions.)	.00
ı		.00
	Net Modification. (Subtract line 2I from line 1h — enter here and on 1040ME, page 1, line 15.) (If negative, enter a minus sign in the box to the left of the number.)	.00

#### **SCHEDULE 2 FORM 1040ME**

ITEMIZED DEDUCTIONS for Form 1040ME, line 17

Enclose with Form 1040ME For more information, visit www.maine.gov/revenue/forms.



Your Social Security Number

Sequence No. 6 Name(s) as shown on Form 1040ME

Attachment

1	То	otal itemized deductions from federal Form 1040, Schedule Å, line 17	.00
2	а	Taxes you paid included in line 1 above from federal Form 1040, Schedule Å, line 5e2a	.00
	b	Deductible costs, included in line 1 above, incurred in the production of  Maine exempt income	.00
	С	Amount included in line 1 attributable to income from an ownership interest in a pass-through entity financial institution	.00
	d	Medical and dental expenses included in line 1 above from federal Form 1040,  Schedule A, line 4	.00
3	а	Deductible costs of producing income exempt from federal income tax, but taxable by	
		Maine3a	.00
	b	State and local real estate taxes you paid from federal Form 1040, Schedule A, line 5b 3b	.00
	С	Personal property taxes you paid from federal Form 1040, Schedule A, line 5c3c	.00
4	Lir	ne 1 minus lines 2a, b, c, and d plus lines 3a, b and c	.00
5	Ma	aximum allowable itemized deduction	2 9,0 5 0 .00
6	En	nter the smaller of line 4 or line 5	.00
7	Ad	dd line 2d and line 6. Enter the result here and on Form 1040ME, line 17*	.00

\*NOTE: If the amount on line 7 above is <u>less</u> than your allowable standard deduction, <u>use the standard deduction</u>. If Married Filing Separately, however, both spouses must either itemize or use the standard deduction.

CAUTION: Your deduction, on line 7 above may be limited. You must complete the Worksheet for Standard / Itemized Deductions (for Form 1040ME, line 17) to calculate your reduced deduction amount if the amount on Form 1040ME, line 16 is more than \$80,000 if single or married filing separately; \$120,000 if head of household; or \$160,000 if married filing jointly or qualifying widow(er).

### SCHEDULE A FORM 1040ME

Attachment Sequence No. **7** 

2018

### **ADJUSTMENTS TO TAX**

See manuchons.

Enclose with Form 1040ME.

For more information, visit www.maine.gov/revenue/forms.



\*1802103\*
Your Social Security Number

#### Section 1. REFUNDABLE CREDITS:

Name(s) as shown on Form 1040ME

1.	CHILD CARE CREDIT - for Maine residents and part-year residents only. Enter the amount	
	from line 5, or line 5a, of the Child Care Credit Worksheet on the next page. (Enclose worksheet)*1	.00
2.	ADULT DEPENDENT CARE CREDIT - Enter amount from line 7, or line 7a, of the Adult	
	Dependent Care Credit Worksheet. (Enclose worksheet)*2	.00
3.	EARNED INCOME TAX CREDIT - for Maine residents and part-year residents only. Enter	
	the amount from line 2, or line 3, whichever applies, of the Earned Income Tax Credit	
	Worksheet on the next page. (Enclose worksheet)*3	.00
4.	CREDIT FOR EDUCATIONAL OPPORTUNITY- for Maine residents and part-year	
	residents only. (Enclose worksheet)*4	.00
5.	REHABILITATION OF HISTORIC PROPERTIES AFTER 2007 (Enclose worksheet)	.00
5.	REHABILITATION OF HISTORIC PROPERTIES AFTER 2007 (Eliciose worksheet)	.00
6.	NEW MARKETS TAX CREDIT (Enclose worksheet)	.00
7.	TOTAL REFUNDABLE CREDITS - Add lines 1 through 6. Enter result here and on	
	Form 1040ME, page 2, line 25c	.00
Sec	tion 2. NONREFUNDABLE CREDITS (See instructions for details):	
8.	<b>DEPENDENT EXEMPTION TAX CREDIT</b> - See instructions and, if necessary, enclose	
	worksheet on the next page. Enter the amount from Form 1040ME, line 13a x \$300*8	.00
9.	CHILD CARE CREDIT - Enter amount from line 6, or line 6a, of the Child Care Credit	
	Worksheet on the next page. (Enclose worksheet)*9	.00
10.	ADULT DEPENDENT CARE CREDIT - Enter amount from line 8, or line 8a, of the Adult	
	Dependent Care Credit Worksheet. (Enclose worksheet)*10	.00
11.	<b>EARNED INCOME TAX CREDIT for nonresidents only.</b> Enter amount from line 3 of the	
	Earned Income Tax Credit Worksheet on the next page. (Enclose worksheet)*11	.00
12.	CREDIT FOR INCOME TAX PAID TO OTHER JURISDICTIONS - Enter the amount from line	
	5 of the worksheet for the Credit for Income Tax Paid to Other Jurisdictions (Enclose worksheet) .*12	.00
13	MAINE SEED CAPITAL CREDIT (Enclose worksheet)	.00
	CREDIT FOR EDUCATIONAL OPPORTUNITY- for Maine residents and part-year	
	residents only. (Enclose worksheet)*14	.00
	Tooldonia only. (Enologo Workenbot)	
15.	MAINE CAPITAL INVESTMENT CREDIT (Enclose worksheet)	.00
	,	
16.	RESEARCH EXPENSE TAX CREDIT (Enclose worksheet)	.00
		0.0
	CARRYFORWARD OF CERTAIN CREDIT AMOUNTS (Enclose worksheet)	.00
18.	PINE TREE DEVELOPMENT ZONE CREDIT - Enter the amount from the Credit	0.0
	Application Worksheet. (Enclose worksheet)	.00
10	EMPLOYED CREDIT FOR FAMILY AND MEDICAL LEAVE	.00
19.	EMPLOYER CREDIT FOR FAMILY AND MEDICAL LEAVE	• • • • • • • • • • • • • • • • • • • •
20.	OTHER TAX CREDITS (Enclose applicable worksheet(s))	.00
21.	TOTAL NONREFUNDABLE CREDITS - Add lines 8 through 20	.00
		22
	MAINE INCOME TAX - Form 1040ME, line 21	.00
23.	ALLOWABLE NONREFUNDABLE CREDITS - Amount on line 21 or line 22, whichever is less.	00
	Enter here and on Form 1040ME, line 22	.00

\*NOTE: Personal credits (lines 1, 2, 3, 4, 8, 9, 10, 11, 12, and 14 above) taken by part-year residents, nonresidents and "Safe Harbor" residents are limited to the Maine residency period or prorated based on the ratio of Maine-source income to total income. Generally, these credits are prorated on the related credit worksheet. Maine business credits are claimed in their entirety, some refundable and some limited up to the Maine tax liability (carryover provisions may apply).



Attachment Sequence No. 2 2018

# Charitable Contributions and Purchase of Park Passes

For more information, go to www.maine.gov/revenue/forms.



\*1802202\*
Your Social Security Number

Name(s) as shown on Form 1040ME

WHO SHOULD FILE SCHEDULE CP? You need to file Schedule CP only if you want to make voluntary charitable contributions to any of the organizations listed below or if you choose to purchase a park pass for entry into Maine State Parks. Otherwise do not file Schedule CP.

								Enter line totals below:
10	1.	Endangered & Nongame Wildlife Fund "Chickadee Check-off"	\$5	\$10	\$25	Other \$	1	.00
A. CONTRIBUTIONS	2.	Maine Children's Trust	\$5	\$10	\$25	Other \$	2	.00
IBUT	3.	Companion Animal Sterilization Fund	\$5	\$10	\$25	Other \$	3	.00
NTR		Maine Military Family Relief Fund Maine Veterans' Memorial Cemetery	\$5	\$10	\$25	Other \$	4	.00
); CO:		Maintenance Fund	\$5	\$10	\$25	Other \$	5	.00
•	6.	Maine Public Library Fund	\$5	\$10	\$25	Other \$	6	.00
	7.	TOTAL CONTRIBUTIONS. (Add lines 1	through 6)				7	.00
ARK SES	8.	Number of Individual Day-use Park Pas	ses	x \$55			8	.00
B. P.	9. 10.	Number of Vehicle Day-use Park Passe					9	.00
	10.	TOTAL CONTRIBUTIONS AND PARK Enter result here and on Form 1040ME		`	-		10	.00

Neither Maine Revenue Services nor the Bureau of Parks and Lands are responsible for undelivered, lost, destroyed, or stolen park passes. Replacement passes will be sold at the original purchase price.

For additional park pass options, fees, and rules, or to purchase your park pass online directly from the Bureau of Parks and Lands, visit:

www.MaineStateParkPass.com.

Note: If you are filing an amended return, the correct amount of your charitable contributions and park passes <u>must</u> agree with the total amounts shown on your original return. Contribution and park pass amounts cannot be changed on your amended return.

Any voluntary charitable contribution you make on lines 1 through 6 above may qualify for a charitable contributions deduction on your 2019 federal and Maine income tax returns if you itemize deductions. For more information, see federal Publication 526, "Charitable Contributions" available at <a href="https://www.irs.gov">www.irs.gov</a>.

#### **SCHEDULE** PTFC/STFC **FORM 1040ME** 2018

### PROPERTY TAX FAIRNESS CREDIT SALES TAX FAIRNESS CREDIT

For MAINE RESIDENTS and PART-YEAR RESIDENTS ONLY.

Enclose with Form 1040ME. See instructions.

For more information, visit www.maine.gov/revenue/forms.

Note: If your filing status is married filing separately, you cannot claim either the property tax fairness credit or the sales tax fairness credit.

If married, enter your



YYYY

Attachment Sequence No. 3

**Enter your** 

Name(s) as shown on Form 1040ME

Your Social Security Number

DD

MM

dat	e of	birth				spouse's date of birth		
Phy	/sica	MM I location of prop	DD erty where	YYYY you lived duri	ing 2018 (if differe	ent from your mailing address):		
		INCOME - Com you <u>do</u> file fede			•	h. Complete line 1 if you do <u>n</u>	<u>not</u> file federal Form 10	40. Complete
IF Y	ou i	OO <u>NOT</u> FILE FED	ERAL FOR	M 1040, ENTER	₹:			
1.	(a)	Social security	benefits ar	nd railroad reti	rement benefits (	see instructions)	1a.	.00
	(b)	Interest and div	idends (se	e instructions)	)		1b.	.00
	(c)	Pensions, annu	ities and II	RA distribution	s (see instruction	ns)	1c.	.00
	(d)	Wages, salaries	s, tips, etc.	(see instruction	ons.)		1d.	.00
	(e)	Other income (	see instruc	tions)			1e.	.00
OR	, IF Y	OU <u>DO</u> FILE FEDI	ERAL FOR	M 1040, ENTER	:			
2.	(a)	Federal total in	come (fron	n federal Form	1040, <mark>line 6</mark> ). If f	filing Schedule NRH - see instru	uctions2a.	.00
	(b)	-			·	deral Form 1040, line <mark>5a minus</mark> ine 2a above (see instructions)		.00
	(c)	Interest not incl	uded on lir	ne 2a above. If	f filing Schedule I	NRH - see instructions	2c.	.00
	(d)	Loss add-backs	s (see instr	uctions)			2d.	.00
3.	Not	e that if the amo	unt on line	3 is more than	n the amount sho	2d above own in the table below for your fi on Form 1040ME, line 13a, you	iling	.00

If your Filing Status is:	AND Form 1040ME, line 13a is:					
	0	OR 1 C	R more than 1			
	Your maximum income limitation is:					
Single	\$34,167	\$34,167	\$34,167			
Head of Household	\$44,167	\$44,167	\$54,167			
Married filing Jointly or Qualifying Widow(er)	\$44,167	\$54,167	\$54,167			

qualify for the property tax fairness credit.

Continue on next page. To apply for the property tax fairness credit, go to line 4. If you are applying only for the sales tax fairness credit, go to line 13.

If the amount on line 3 is more than the maximum income amount shown in the sales tax fairness credit table (see instructions for line 13) for your filing status and the number of qualifying children and dependents on Form 1040ME, line 13a, you do not qualify for the sales tax fairness credit.



\*1802206\*

#### PROPERTY TAX FAIRNESS CREDIT (lines 4 through 12):

	If you paid no property to	ou paid on your home in 20 ax in 2018, skip to line 5a.	,				.00
5.		aid on your home in 2018. n 2018, skip to line 6.	. (See instructions.)		5a.		.00
		ed on line 5a include heat,	utilities, furniture or sim	ilar items?	5b.	Yes	No
		you know the amount paid					
		that amount on line 5c. If y	-				
	multiply line 5a by 15	5% (.15) and enter the resul	It on line 5c. If line 5b is	no, enter "0" on line 5	c5c.		.00
	(d) Line 5a minus line 5	ic			5d.		.00
	(e) Multiply line 5d by 1	5% (.15)			5e.		.00
	(f) Landlord's name an	d telephone number					
6.	Add lines 4 and 5e				6		.00
7.		in the table below for your					•00
		1040ME, line 13a:	-				.00
	If your Filing Status is:	AND Form	n 1040ME, line 13a is:				
	•	0 OR	1 OR	more than 1			
	▼ [	Your m	naximum benefit base is:				
	Single	\$2,050	\$2,050	\$2,050			
	Head of Household	\$2,650	\$2,650	\$3,250			
	Married filing Jointly or Qualifying Widow(er)	\$2,650	\$3,250	\$3,250			
8.	Benefit base. Enter the s	smaller of line 6 or line 7			8.		.00
0	Multiply line 2 by CO/ / O/	2)			0		.00
9.		6)e 8 more than the amount					.00
		rty tax fairness credit. Go to I				Yes	No
	. ,		,				
10.	Subtract line 9 from line	8			10.		.00
11	Were you or your shouse	e (if married filing jointly) a	at least 65 years of age	during the tax year?	11	Yes	No
	vvoice you or your opouce	o (ii mamea iiing joinay) a	it loads of years or age	daming the tax year.		100	110
	(a) If yes, enter \$1,200.	If no, enter \$750			11a.		.00
12	Enter line 10 or line 11a	whichever is smaller, here	e and on Form 1040M	F line 25d	12		.00
12.	Litter line to or line tra,	Willonever is sindiler, nere	c <u>and</u> on <b>i o</b> im io-om	L, IIIIe 23a	12.		•00
SA	LES TAX FAIRNESS CRI	EDIT (lines 13 and 13a):					
40	0 11 1 1 1	o.c					
13.		6 for your filing status. Ent qualifying children and de		•			
		erwise, enter this amount on	•	-			.00
	, 3: :: :::: ::::: 00	-,	,,				
		NTS FILING SCHEDULE NR		-			
		<u>chedule NR,</u> multiply line 1 , line 7). <u>Schedule NRH,</u> r	•	·			
		000 minus Schedule NRH,		Manie-source income	iallo		
		e and on Form 1040ME, lir	· · · · · · · · · · · · · · · · · · ·		13a.		.00





### Form 1040ME, Schedule A, Line 20 - Other Tax Credits Worksheet for Tax Year 2018



Use this worksheet to list your Other Tax Credits included on Form 1040ME, Schedule A, line 20. For more information on all tax credits and to see the worksheets, visit <a href="www.maine.gov/revenue/forms">www.maine.gov/revenue/forms</a> (select Worksheets for Tax Credits) or call 626-8475.

Name(s) as shown on Form 1040ME Your Social Security Number Maine Fishery Infrastructure Credit for investments in, or contributions to, public .00 2. AccessAble Home Tax Credit for qualified expenses incurred for certain home modifications to make a homestead accessible to an individual with a disability or .00 .00 .00 .00 Dental Care Access Credit for individuals certified as eligible dentists by the .00

7. **Primary Care Access Credit** for individuals certified as eligible primary care professionals by the Department of Health and Human Services, Rural Health

and Primary Care. ...... 7.

Total Other Tax Credits (add lines 1 through 8 and enter the total here and on

.00

.00

.00



# Worksheet for Form 1040ME, Schedule 1, Line 1g Income Modifications - Other Additions



\*1802213\*

Use this worksheet to list Other Addition Income Modifications that are taxable by Maine but not by the federal government that must be included on Form 1040ME, Schedule 1, line 1g. Include only items listed below.

Include the taxpayer's distributive share of each item from partnerships, S corporations and other pass-through entities.

See page 2 for a description of each item listed below.

Nar	ne(s) as shown on Form 1040ME	Your Social Security Number	
1.	Enter the amount of loss, deductions and other expenses of a financial institution subject to Maine franchise tax that are included in your federal adjusted gross income due to an ownership share in the financial institution that is a partnership, S corporation or entity disregarded as separate from its owner		.00
2.	Enter the amount claimed as a deduction in determining federal adjusted gross income that is used to calculate the <b>Maine fishery infrastructure investment</b> credit under 36 M.R.S. § 5216-D		.00
3.	Enter the amount claimed as a deduction in determining federal adjusted gross income that is used to calculate the <b>wellness programs credit</b> under		

Schedule 1, line 1g) ......4.

**Total Other additions** (Add lines 1 through 3 and enter on Form 1040ME,

.00

.00





## Worksheet for Form 1040ME, Schedule 1, Line 2k Income Modifications - Other Subtractions



Use this worksheet to list Other Subtraction Income Modifications - for amounts that are taxable by the federal government but not by Maine in order to complete Form 1040ME, Schedule 1, line 2k. Include only items specifically listed below.

Include the taxpayer's distributive share of each item from partnerships, S corporations and other pass-through entities.

See pages 2 and 3 for a description of each item listed below.

Name(s) as shown on Form 1040ME Your Social Security Number 1. .00 2. .00 3. .00 4. Military annuity payments made to a survivor of a deceased member of the military ..... 4. .00 5. .00 6. Discharge of indebtedness 6. .00 7. Student loan payments made by your employer under the Maine educational .00 8. Amount of the reduction in your salaries and wages expense deduction related .00 Holocaust victim Settlement Payments 9. .00 .00 Earnings from fishing operations contributed to a capital construction fund......11. .00 .00 .00 14. Maine Waste Management & Recycling Program - interest income and .00 15. All items of income, gain, interest, dividends, royalties and other items of income of a pass-through financial institution due to an ownership share in the .00 16. The total of capital gains and ordinary income resulting from depreciation .00 .00 .00 .00 20. Total Other Subtractions (add lines 1 through 19 and enter the total here and on .00