Continue on Form 1040ME, page 2

MAINE INDIVIDUAL INCOME TAX **FORM 1040ME**



99 99 **2 0 2 3** to 99 99 9999 X Check here if this is an **AMENDED** return.

See instructions. Print neatly in blue or black ink only. * 23	3022V0*
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	999 99 9999 ty Number
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	999 99 9999 ecurity Number
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	99 999 9999
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	99 999 9999
	XX XXXXXX tate ZIP Code
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXX Foreign postal code
A. Maine Property Tax Fairness Credit / Maine Sales Tax Fairness Credit - Maine residents and part-y Schedule PTFC/STFC. Check this box if you are filing a return only to claim the Property Tax Fairness Credit on line 25e. Otherwise, leave this box blank. Follow the instructions on Schedule	edit on line 25d and/or the
1. Maine Clean Election Fund. Maine Residents Only. Check here if you, or your spouse, if filing jointly, want \$3 to go to this fund. X You X Spouse 2. Check here if you were engaged FARMING OR FISHING during	
FILING STATUS (Check one)	J 2020
3. X Single	
4. X Married filing jointly (Even if only one had income)	
5. X Married filing separately. Enter spouse's social security number and full name above.	
6. X Head of household (With qualifying person)	
7. X Qualifying surviving spouse with dependent child (Year spouse died 9999)	
RESIDENCY STATUS (Check one) 8. X Resident 8a. X Safe Harbor Resident 11. X Nonresident Alien (Maine nonresident) 9. X Part-Year Resident 10. X Nonresident 11a. X Nonresident Alien (Maine resident)	
12. 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 <i>EXEMPTIONS</i> . See instructions	
14. FEDERAL ADJUSTED GROSS INCOME	999999999.00
15a. INCOME ADDITION MODIFICATIONS. (From Schedule 1A, line 12.)	999999999.00
15b. INCOME SUBTRACTION MODIFICATIONS. (From Schedule 1S, line 27.) 15b.	999999999.00
14. FEDERAL ADJUSTED GROSS INCOME	999999999.00
X Itemized (See Maine Schedule 2 and page 4 of the instructions.) 18. EXEMPTION. (Multiply line 13 x \$4,700.)	99999.00

CAUTION - your exemption amount may be limited. See instructions.



19 TAXABLE INCOME. (Line 16 minus lines 17 and 18.)	III III 99
24 NET TAX . (Line 22 minus line 23.) (Nonresidents see instructions.)	
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	99.00
25 TAX PAYMENTS. a Maine income tax withheld. (Enclose W-2, 1099 and 1099ME forms.)	99.00
b 2023 estimated tax payments and 2022 credit carried forward, extension	99.00
payments and payments with original return. (Include any REAL ESTATE WITHHOLDING tax payments.)	99.00
c REFUNDABLE TAX CREDITS. (From Maine Schedule A, line 7.)	99.00
d Property Tax Fairness Credit (Schedule PTFC/STFC, line 15). (See instructions.) 25d 999999 (For Maine residents and part-year residents only.)	99.00
e Sales Tax Fairness Credit. (Schedule PTFC/STFC, line 16 or 16a.)	99.00
f TOTAL (Add lines 25a, b, c, d, and e.)	99.00
26 If this is an amended return, enter overpayment, if any, on original return or as previously adjusted	99.00
27 Line 25f minus line 26. (If negative, enter a minus sign in the box to the left of the number.) 27 9999999	99.00
28 INCOME TAX OVERPAID. If line 27 is larger than line 24, enter amount overpaid. (Line 27 minus line 24 - if line 24 is negative, enter line 27 here.)	99.00
29 INCOME TAX UNDERPAID. If line 24 is larger than line 27, enter amount underpaid. (Line 24 minus line 27.) (See instructions.)	99 00
30 USE TAX (SALES TAX). (See instructions.)	99.00
30a SALES TAX ON CASUAL RENTALS OF LIVING QUARTERS. (See instructions.) 30a 9999999	99.00
31 CHARITABLE CONTRIBUTIONS and PARK PASSES. (From Maine Schedule CP, line 12.) 31 9999999	99.00
NET OVERPAYMENT. (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 32 9999999 Amount of line 32 to be	99.00
33 Amount of line 32 to be CREDITED to 2024 estimated tax 33a 99999999.00 REFUND 33b 99999999	99.00
IF YOU WOULD LIKE YOUR REFUND SENT DIRECTLY TO YOUR BANK ACCOUNT (\$20,000 or less), see page 5 of the instruction in the lines below.	ons and fill
30 USE TAX (SALES TAX). (See instructions.)	
outside the United States X 33d Account Number 999999999999999999999999999999999999	
33e Type of Account: X Checking X Savings	

Name(s) as shown on Form 1040ME

DO NOT ENTER \$ signs, commas, or decimals.

Your Social Secur	rity Nun	nber
999	aa	aaa

	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	999 99 9999			
TAX DUE	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 34a	999999999 .00			
	b Underpayment Penalty. (Attach Form 2210ME.) Check here if you checked the box on Form 2210ME, line 17. X	999999999.00			
1	c TOTAL AMOUNT DUE. (Add lines 34a and 34b.) (Pay in full with return.)	999999999.00			
	Maine Maine TAX PORTAL at revenue.maine.gov or ENCLOSE CHECK payable to: Treasurer, State of I	Maine. DO NOT SEND CASH.			
	If taxpayer is deceased, enter date of death. 99 99 99 99 99 99 99 99 99 99 99 99 99	99 99 9999 nth) (Day) (Year)			
	See the instructions and check each box that applies.				
EALIH CAKE COVERAGE	35a. X I would like the Maine DHHS, Office of the Health Insurance Marketplace (" <u>CoverME.gov</u> ") to contact me to for free or reduced-cost health coverage. I authorize MRS to share the information indicated in boxes 35b th				
	35b. X I do not have health care coverage 35e. My preferred method of contact is (select one):	Mailing address listed on page 1			
Ē		Phone number listed on page 1			
	35d. X One or more of my dependent(s) do not have health X E	Email address listed below			
Des Se	ird Party signee Do you want to allow another person to discuss this return with Maine Revenue Services? X Yes (come page 5 of instructions.)	plete the following). X No.			
De	esignee's name: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	dentification #: 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.					
Kee cop his	Your signature Date signed Your occurs return your	ıpation			

Paid Preparer Use

Only

records.

Date signed

Date signed

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.

Your email address

Preparer's signature

- Be sure to enter amounts on correct lines.
- Leave unused lines blank. Do not enter zero.
- Line A. Check the Property Tax Fairness Credit/Sales Tax Fairness Credit box, if it applies.

Spouse's signature (If joint return, **both** must sign)

- 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 Plan	Χ	Injured Spouse	Χ
Plan	Λ	Spouse	21

Spouse's occupation

99999999

Preparer's phone number