Composite Filing of Maine Income Tax for Nonresident Owners and Partnership Audit Return



For purposes of Form 1040C-ME, the term "owner" refers to a partner or shareholder of a pass-through entity. to 99 99 99 99 9999 2023 For tax period 1/1/2023 to 12/31/2023 or MM DD YYYY MM DD YYYY 99 9999999 Federal EIN Entity Name 99999 XX **Entity Mailing Address** City or Town State Zip Code 999 999 9999 Contact Person: First Name Last Name Phone Number Х a) Check here if this is an amended returna. b) Number of owners participating in composite filing......b. 9999 (Complete Form 1040C-ME, Schedule 1040C-ME-1.) 9999 c) Total number of owners of the entity.c. d) Partnership Audit. If filing Form 1040C-ME due to a Centralized Partnership Audit Adjustment, check here and complete Schedule 1040PA-ME.....d. X 99 999 999 999 .00 1. Composite income. (See instructions.).....1. 999 999 99 999 .00 99 999 999 999 .00 999 999 999 99 .00 99 999 999 999 .00 5. Net tax. Line 2 plus line 3 minus line 4.....5. 6. Tax payments 999 999 999 99 .00 a. Maine income tax withheld. (Enclose Form 1099ME.)6a. b. 2023 estimated tax payments and 2022 credit carried forward, 999 999 999 99 .00 extension payments and payments with original return......6b. (Include any real estate withholding tax payments.) 99 999 999 999 .00 d. If amended, enter overpayment, if any, on original return or 999 999 999 99 .00 as previously adjusted. (See instructions.).....6d. e. Total payments and credits. (Add lines 6a, 6b, and 6c and subtract line 6d. If the result is negative, enter a minus sign to the left of the number and skip 99 999 999 999 .00 to line 7b. Otherwise, go to line 7a.).....6e.

2023 Form 1040C-ME, Page 2													99
	99	99999999											
		Federal EIN								*2	30212	6*	
7. (Overpay	ment/Underpayr	nent										
a. Overpayment. If line 5 is less than line 6e, enter amount overpaid here and skip to line 8 (line 6e minus line 5.)									a.	99	999	999	999 .00
1	b. Underpayment. If line 5 is more than line 6e, enter amount underpaid here and skip to line 9 (line 5 minus line 6e.)							7	b.	99	999	999	999 .00
8.		t of line 7a to be: dited to 2024 es	stimated tax.	99 9	99 999 999	.00	8b. RE	EFUNDE	D.	99	999	999	999. 00
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	Check	here if this refund	I	8c.	Routing Number	999	9999	99					
		to an account the United States	s X	8d.	Account Number	999	9999	99999	9999	9			
	8е. Тур	e of Account:	X Checking	V	Savings								
9.					lose Form 2210M 0ME, line 17		х		9.	99	999	999	999. 00
10.	make p	ayments electron	nically. See ins	structions of	turn. You may be or MRS Rule 102. ne			1	0.	99	999	999	999 .00
	-	Designee							x				х
Do	you wan				eturn with Maine F				Yes	(complete	the follo	0,	No.
De	signee's	name: XXXXX	XXXXXXXX	XXXXX	Phone #:	99	999	9999	Perso	nal identifi	cation #	99	9999
my	knowled		ey are true, co		mined this return complete. Declar								
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	Signatu	re of Member/Ow	/ner				Title				Date		
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	Firm's N	Firm's Name (or yours, if self-employed)					Paid Preparer's Phone Number						
	XXXXX	*****											
	Paid Pre	eparer's Mailing A	Address										
		Maine Image: Comparison of the state						N	If not enclosing a check, MAIL RETURN TO: MAINE REVENUE SERVICES P.O. BOX 1064 AUGUSTA, ME 04332-1064				