

2024
Form
1040C-ME

Composite Filing of Maine Income Tax
for Nonresident Owners



99

2402125

For purposes of Form 1040C-ME, the term "owner" refers to a partner or shareholder of a pass-through entity.

For tax period 1/1/2024 to 12/31/2024 or

99 99
MM DD

2024
YYYY

to

99 99 9999
MM DD YYYY

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Entity Name

99 9999999
Federal EIN

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Entity Mailing Address

XXXXXXXXXXXXXXXXXXXX
City or Town

XX
State

99999
Zip Code

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Contact Person: First Name

XXXXXXXXXXXXXXXXXXXX
Last Name

999 999 9999
Phone Number

a) Check here if this is an amended return. If yes also see line a-1.....a. ☒

a-1) Check here if filing an amended return to report federal modification amended
return or alternative procedure report adjustments. (See Instructions).a-1. ☒

b) Number of owners participating in composite filing.
(Enclose Form 1040C-ME, Schedule 1040C-ME-1.).....b. 9999

c) Total number of owners of the entity.....c. 9999

1. **Composite income.** (From Schedule 1040C-ME-1, line 7.) 1. 99 999 999 999 .00

2. **Tax.** Multiply line 1 by 7.15% (0.0715). (See instructions.)..... 2. 99 999 999 999 .00

3. **Tax credit recapture amounts.** (Enclose worksheet(s).) 3. 99 999 999 999 .00

4. **Nonrefundable tax credits.** (From Form 1040C-ME, Schedule A, line 17.)..... 4. 99 999 999 999 .00

5. **Net tax.** Line 2 plus line 3 minus line 4. 5. 99 999 999 999 .00

6. **Tax payments**

a. Maine income tax withheld. (Enclose Form 1099ME.) 6a. 99 999 999 999 .00

b. 2024 estimated tax payments and 2023 credit carried forward, extension
payments and payments with original return.(Include any real estate
withholding tax payments.) 6b. 99 999 999 999 .00

c. Refundable tax credits. (From Form 1040C-ME, Schedule A, line 5.)..... 6c. 99 999 999 999 .00

d. If amended, enter overpayment, if any, on original return or as previously
adjusted. (See instructions.) 6d. 99 999 999 999 .00

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 to line 7b. Otherwise, go to line 7a.)..... 6e. 99 999 999 999 .00

99 9999999

Federal EIN



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2402126

7. Overpayment/Underpayment

a. **Overpayment.** If line 5 is less than line 6e, enter amount overpaid here and skip to line 8 (line 6e minus line 5.) 7a. 99 999 999 999.00

b. **Underpayment.** If line 5 is more than line 6e, enter amount underpaid here and skip to line 9 (line 5 minus line 6e.) 7b. 99 999 999 999.00

8. Amount of line 7a to be:

8a. Credited to 2024 estimated tax. 99 999 999 999.00 8b. REFUNDED. 99 999 999 999.00

IF YOU WOULD LIKE YOUR REFUND SENT DIRECTLY TO YOUR BANK ACCOUNT (\$20,000 or less), see instructions and fill in the lines below.

Check here if this refund will go to an account outside the United States ☒

8c. Routing Number 999999999

8d. Account Number 999999999999999999

8e. Type of Account: ☒ Checking ☒ Savings

9. Penalty for underpayment of estimated tax. (Enclose Form 2210ME.) Check here if you checked the box on Form 2210ME, line 17..... ☒ 9. 99 999 999 999.00

10. **Total Due.** Line 7b plus line 9. Pay in full with return. You may be required to make payments electronically. See instructions or MRS Rule 102. Make check payable to **Treasurer, State of Maine**. 10. 99 999 999 999.00

Third Party Designee

Do you want to allow another person to discuss this return with Maine Revenue Services? ☒ Yes (complete the following). ☒ No.

Designee's name: XXXXXXXXXXXXXXXXXXXX Phone #: 999 999 9999 Personal identification #: 999999

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.

Signature of Member/Owner

XXXXXXXXXXXXXXXXXXXX

Title

99 99 9999

Date

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Print Name

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Email Address

For Paid Preparers Only

Paid Preparer's Signature

99 99 9999

Date

99 9999999

Paid Preparer's EIN

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Firm's Name (or yours, if self-employed)

999 999 9999

Paid Preparer's Phone Number

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Paid Preparer's Mailing Address



File and Pay on the Maine Tax Portal
at revenue.maine.gov

If enclosing a check, make check payable to:
Treasurer, State of Maine
and MAIL WITH RETURN TO:
MAINE REVENUE SERVICES
P.O. BOX 1065
AUGUSTA, ME 04332-1065



If not enclosing a check,
MAIL RETURN TO:
MAINE REVENUE SERVICES
P.O. BOX 1064
AUGUSTA, ME 04332-1064