2020

Calculate Your Tax

17 DEDUCTION. X

MAINE INDIVIDUAL INCOME TAX FORM 1040ME



99999999.00

99999999.00

99 99 2020 to 99 99 9999 See instructions. Print neatly in blue or black ink only.		20021V0*
XXXXXXXXXXXXXX Your First Name	X MI Your Social Secu	999 99 9999 rrity Number
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Spouse's Social	999 99 9999 Security Number
XXXXXXXXXXXXXXX Spouse's First Name	X S MI Home Phone Number	999 999 9999 r
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Work Phone Number	999 999 9999
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX XXXXXX State ZIP Code
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX Foreign province/state/county	XXXXXX Foreign postal code
A X PTFC/STFC. Check this box if you are filing a return on Fairness Credit on line 25e. Otherwise, leave this box bit 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 FILING STATUS (Check one) 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 widow(er) with dependent child (Year spouse died 9999) X Composite Return (Pass-through Entities ONLY)		TFC. ed in COMMERCIAL
RESIDENCY STATUS (Check one) 8	11 X Nonresident Alien (Maine nonresident) 11a X Nonresident Alien (Maine resident) Spouse was: 12c X 65 or over	Check here if you are X filing Schedule NRH
13 Enter the TOTAL number of <i>EXEMPTIONS</i> . See instructions		
14 FEDERAL ADJUSTED GROSS INCOME	line 13.)15a	999999999.00 999999999.00 999999999.00

2002101

			2	2002101
dits		DO NOT ENTER \$ signs, commas, or deci	imals:	
ole Crec	19 20	TAXABLE INCOME. (Line 16 minus lines 17 and 18.)	19	99999999.00
Calculate Your Tax and Nonrefundable Credits		in this booklet or compute your tax using the tax table or tax rate schedules available at www.maine.gov/revenue/tax-return-forms .).	20	99999999.00
	20a	TAX CREDIT RECAPTURE AMOUNTS (Enclose worksheet(s) - see instructions).	. 20a	999999999.00
ır Tax and	21	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.)	21	999999999.00
e You	22	TOTAL TAX. (Line 20 plus line 20a minus line 21)	22	999999999.00
Calculat	23	NONREFUNDABLE TAX CREDITS. (From Maine Schedule A, line 23.)	23	99999999.00
	24	NET TAX. (Line 22 minus line 23.) (Nonresidents see instructions.)	24	99999999.00
redits	25	TAX PAYMENTS. a Maine income tax withheld. (Enclose W-2, 1099 and 1099ME forms.) →	· 25a	999999999.00
ble C		b 2020 estimated tax payments and 2019 credit carried forward, extension		
Refunda		payments and payments with original return. (Include any REAL ESTATE WITHHOLDING tax payments.)	25b	99999999.00
Tax Payments/Refundable Credits		c REFUNDABLE TAX CREDITS. (From Maine Schedule A, line 7.)	25c	99999999.00
Тах Рау		d Property Tax Fairness Credit (Schedule PTFC/STFC, line 12). (See instructions.) (For Maine residents and part-year residents only.)	25d	999999999.00
		e Sales Tax Fairness Credit. (Schedule PTFC/STFC, line 13 or 13a.)	25e	99999999.00
		f TOTAL. (Add lines 25a, b, c, d, and e.)	25f	99999999.00
	26	If this is an amended return, enter overpayment, if any, on original return or as previously adjusted	26	99999999.00
	27	Line 25f minus line 26. (If negative, enter a minus sign in the box to the left of the number.)	27	99999999.00
	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.)	28	99999999.00
	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 h	30	USE TAX (SALES TAX). (See instructions.)	30	99999999.00
/ Refund	30a	SALES TAX ON CASUAL RENTALS OF LIVING QUARTERS. (See instructions.)	30a	99999999.00
tions	31	CHARITABLE CONTRIBUTIONS and PARK PASSES. (From Maine Schedule CP, line 11.	.) 31	99999999.00
Calculate Use Tax / Voluntary Contributions / Refund Due	32	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		99999999.00
luntary (33	Amount of line 32 to be CREDITED to 2021 estimated tax 33a 99999999.00 REFUND	33b	99999999.00
Tax / Vo		YOU WOULD LIKE YOUR REFUND SENT DIRECTLY TO YOUR BANK ACCOUNTIES BEIOW.	JNT (\$20,000 or less), see page 5	of the instructions and fill
ate Use		will go to an account	999999999	
Calcul		outside the United States X 33d Account Number	9999999999999999)
	33e	Type of Account: X Checking X Savings		

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

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 99999999.00 31 is greater than line 28, enter the difference as an amount due on this line. **b** Underpayment Penalty. (Attach Form 2210ME.) TAX DUE 99999999.00 Check here if you checked the box on Form 2210, line 17. 34b 99999999.00 c TOTAL AMOUNT DUE. (Add lines 34a and 34b.) (Pay in full with return.) EZ PAY at www.maine.gov/revenue or ENCLOSE CHECK payable to: Treasurer, State of Maine. DO NOT SEND CASH. If taxpayer is deceased. If spouse is deceased, **IMPORTANT NOTE** 99 99 9999 99 9999 enter date of death. enter date of death. (Month) (Day) (Month) (Day) Third Party Do you want to allow another person to discuss this return with Maine Revenue Services? X Yes (complete the following). No. Designee (See page 5 of the instructions.) 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 Your signature Date signed Your occupation copy of this return for your records. Spouse's signature (If joint return, both must sign) Date signed Spouse's occupation Your email address Paid Preparer's 99999999 Use Only Preparer's signature Date Preparer's phone number Print preparer's name and name of business Preparer's SSN or PTIN Avoid errors that delay processing of returns: • Use black or blue ink. Do not use red ink. • Double check social security numbers, filing status, and

- Be sure to enter amounts on correct lines.
- Line A. Check the Property Tax Fairness Credit/Sales Tax Fairness Credit box, if it applies.
- Line 20. Use the correct column from the tax table for your
- Refund. If you overpaid your tax, enter the amount you want to be refunded on line 33b.
- 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 Plan Spouse

SCHEDULE 1A FORM 1040ME Attachment 2020

INCOME ADDITIONS

See instructions on pages 5 and 6. Enclose with your Form 1040ME

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



2002104

Name(s) as shown on Form 1040ME

Sequence No. 4

Your Social Security Number

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

AD	DITIONS to federal adjusted gross income.		
1.	Income from municipal and state bonds, other than Maine	. 1.	.00
2.	Net operating loss recovery adjustment. (Attach a schedule showing your calculation.)	. 2.	.00
3.	Maine Public Employees Retirement System contributions	3.	.00
4.	Bonus depreciation add-back. (See instructions.)	. 4.	.00
5.	Maine capital investment credit bonus depreciation add-back. (See instructions.)	5.	.00
6.	Fiduciary adjustment - additions only. (Attach a copy of your federal Schedule K-1.)	6.	.00
7.	Certain gains on installment sales of real or tangible property - nonresident individuals only (See instructions.)	. 7.	.00
8.	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	8.	.00
9.	Enter the amount claimed as a deduction in determining federal adjusted gross		
	income that is used to calculate the wellness programs credit under 36 M.R.S. § 5219-FF	9.	.00
10.	Excess business losses for noncorporate taxpayers	. 10.	.00
11.	Business interest deduction exceeding 30% of federal adjusted taxable income	. 11.	.00
12.	Reserved.	. 12.	.00
13.	Total Additions. (Add lines 1 through 12 — enter here and on 1040ME, line 15a.)	. 13.	.00



INCOME SUBTRACTIONS

See instructions on pages 6 through 8. Enclose with your Form 1040ME

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



2002105

Your Social Security Number

Name(s) as shown on Form 1040ME

Sequence No. 4

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

	-	o ito i altitut y olgilo, collillac, ci acollil	u.o.
SUE	BTRACTIONS from federal adjusted gross income.		
1.	U.S. Government Bond interest included in federal adjusted gross income. (See instructions.)	1	00
2.	State income tax refund. (Only if included in federal adjusted gross income.)	2	00
3.	Social Security and Railroad Retirement Benefits included in federal adjusted gross		
	income. (See instructions.)	. 3.	00
		,	
4.	Pension income deduction. (Complete and attach the worksheet on back.)	. 4.	00
	Check here if the amount on line 4 includes military retirement pay		
5.	(from line 6 of the Worksheet for Pension Income Deduction)		
5.	compensation received by a nonresident of Maine. (See instructions.)	E (00
	Compensation received by a nomesident of Maine. (See instructions.)		, ,
6.	Military annuity payments made to a survivor of a deceased member of the military	6.	00
7.	Maine Public Employees Retirement System pick-up contributions paid to the taxpayer	. •	
	during 2020 which have been previously taxed by the state	. 7.	00
8.	Fiduciary adjustment - subtractions only. (Attach a copy of your federal Schedule K-1.)	. 8.	00
9.	Bonus depreciation and section 179 recapture. (See instructions.)	9.	00
10.	Medical marijuana business expenses. (See instructions.)	10.	00
	Enter your registration number or sales tax number:		
	Net operating loss recapture.	.11.	00
12.	Student loan payments made by your employer under the Maine educational		
	opportunity program.	12.	00
12	Qualified health care student lean navmente made by your employer	42	00
13.	Qualified health care student loan payments made by your employer	. 13.	, ,
14	Municipal property tax benefits for senior citizens	14 . (00
	That hope property tax periodic for center disperse.		
15.	Holocaust victim settlement payments	.15	00
16.	Family Development Account proceeds	16.	00
17.	Earnings on funds held in an ABLE savings account	.17.	00
18.	Interest from Maine Municipal General Obligation Bonds, Private Activity Bonds,		
	and Airport Authority Bonds included in federal adjusted gross income	18.	00
19.	Amount of the reduction in your salaries and wages expense deduction related		
	to claiming the federal Work Opportunity Credit or Empowerment Zone Credit	. (00
20.	Earnings from fishing operations contributed to a capital construction fund	20.	00
0.4	North and Maine Transmission Communities investigation investigation	04	
21.	Northern Maine Transmission Corporation investment income	.41.	00
22	Maine Waste Management & Recycling Program, interest income and		
22.	Maine Waste Management & Recycling Program - interest income and capital gains from the sale of program bonds	22	
	Capital yants notti tile sale oi program bonus	. (00

2002203

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

23.	All items of income, gain, interest, dividends, royalties and other items of		
24.	income of a pass-through f nancial institution due to an ownership share in the f nancial institution. EIN of f nancial institution		

2020 - Worksheet for Pension Income Deduction - Schedule 1S, Line 4 Enclose this worksheet and copies of your 1099 form(s) with Form 1040ME.

The benefits received under a United States military retirement plan, including survivor benefits, are fully exempt from Maine income tax. See line 6 of the worksheet below. Only military retirement pay received as a result of service in the United States Army, Navy, Air Force, Marines, or Coast Guard qualify for the military retirement deduction on line 6.

In addition, you and your spouse (if married) may each deduct up to \$10,000 of other eligible pension income* that is included in your federal adjusted gross income. The \$10,000 cap must be reduced by <u>any</u> social security and railroad retirement benef ts received, whether taxable or not.

Deductible pension income, other than military retirement pay, includes state and federal pension benef ts and retirement benef ts received from plans established and maintained by an employer for the benef t of its employees under Internal Revenue Code (IRC) sections 401(a) (qualif ed pension plans, including qualif ed 401 SIMPLE plans), 401(k) (qualif ed cash or deferred arrangements) and 403 (employee annuities). Deductible pension income also includes benef ts received from an individual retirement account under IRC section 408, Roth IRA accounts under IRC section 408A, SIMPLE individual retirement accounts under IRC section 408(k), simplif ed employee pension plans under IRC section 408(p), benef ts received under IRC section 457(b) (state and local government/tax exempt organizations/eligible deferred compensation plans), **except** that pick-up contributions received from the Maine Public Employees Retirement System ("MainePERS") allowed to be deducted on Form 1040ME, Schedule 1S, line 7 and pension income from 457(b) plans received prior to age 55 that is not part of a series of equal

periodic payments made over the life of the recipient and the recipient's designated beneficiary, if applicable, may <u>not</u> be included in the deductible pension amount.

Note that a conversion of benefits from one account to another does not qualify for the pension income deduction. For example, a deduction may not be taken when a taxpayer converts a traditional IRA to a Roth IRA. The taxpayer, in this case, does not receive a retirement or IRA benefit at the time of conversion.

Pension benef ts that **do not qualify** are those received from an ineligible deferred compensation plan under IRC section 457(f), refunds of excess contributions, lump-sum distributions included on federal Form 4972 and distributions subject to the additional 10% federal tax on early distributions. See federal Form 5329, Part 1, or federal Form 1040 or 1040-SR, Schedule 2, line 6. Also, disability benef ts reported as wages on your federal income tax return do not qualify.

*Eligible pension income does not include benefits earned by another person, **except** in the case of a surviving spouse. Only the individual who earned the benefit from prior employment may claim the pension income for the deduction. However, a widowed spouse receiving survivor's benefits under an eligible pension plan may claim that amount for purposes of this deduction, but the total pension deduction for the surviving spouse may not exceed \$10,000.

NOTE: Enter eligible non-military pension benef ts on line 1 and eligible military retirement pay line 6.	Taxpayer	Spouse*	
1. Total eligible non-military pension income (both Maine and non-Maine sources) included in your federal adjusted gross income (from federal Form 1040, lines 4b and 5b or Form 1040-SR, lines 4b and 5b). CAUTION: Include only deductible pension benef ts that are <u>not</u> specif cally excluded. See the instructions above.	1.	\$	\$
Maximum allowable deduction.	2.	\$10,000.00	\$10,000.00
3. Total social security and railroad retirement benef ts you received - whether taxable or not.	3.	\$	\$
4. Subtract line 3 from line 2 (if zero or less, enter zero).	4.	\$	\$
5. Enter the smaller of line 1 or line 4 here.	5.	\$	\$
6. Total eligible military retirement pay included in your federal adjusted gross income (from federal Form 1040, lines 4b and 5b or Form 1040-SR, lines 4b and 5b).	6.	\$	\$
7. Add line 5 and line 6 and enter the total for both spouses on Schedule 1S, line 4.	7.	\$	\$

^{*}Use this column only if you are married f ling jointly and only if your spouse separately earned an eligible pension.

SCHEDULE 2 **FORM 1040ME**

ITEMIZED DEDUCTIONS

for Form 1040ME. line 17

Enclose with Form 1040ME

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



Your Social Security Number

.00

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

Name(s) as shown on Form 1040ME

Attachment Sequence No. 6

Total itemized deductions from federal Form 1040 or 1040-SR, Schedule A, line 17...... 1 .00 Taxes you paid included in line 1 above from federal Form 1040 or 1040-SR, Schedule A, line 5e...2a .00 Deductible costs, included in line 1 above, incurred in the production of .00 c Amount included in line 1 attributable to income from an ownership interest in a pass-through entity financial institution. .00 Medical and dental expenses included in line 1 above from federal Form 1040 or .00 a Deductible costs of producing income exempt from federal income tax, but taxable by .00 State and local real estate taxes you paid from federal Form 1040 or 1040-SR, Schedule A, line 5b. . 3b .00 Personal property taxes you paid from federal Form 1040 or 1040-SR, Schedule A, line 5c. . 3c .00 .00 Maximum allowable itemized deduction. 5 3 0,0 5 0 .00 .00

*NOTE: If the amount on line 7 above is less than your allowable standard deduction, use the standard deduction. 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 \$82,900 if single or married filing separately; \$124,350 if head of household; or \$165,800 if married filing jointly or qualifying widow(er).

SCHEDULE A **FORM 1040ME** Attachment

Name(s) as shown on Form 1040ME

Sequence No. 7

ADJUSTMENTS TO TAX

Enclose with Form 1040ME.

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



Your Social Security Number

Sec	tion 1. REFUNDABLE CREDITS:	O NOT ENTER	signs, commas, or d	ecimals:
1.	CHILD CARE CREDIT - for Maine residents and part-year residents only. Enter the amount		00000000	
	from line 5, or line 5a, of the Child Care Credit Worksheet on the next page. (Enclose worksheet)	e t.) *1	99999999	.00
2.	ADULT DEPENDENT CARE CREDIT. Enter amount from line 7, or line 7a, of the Adult		999999999	
_	Dependent Care Credit Worksheet. (Enclose worksheet.)		99999999	.00
3.	EARNED INCOME TAX CREDIT - for Maine residents and part-year residents only. Ente	r		
	the amount from line 2, 3, or 4, whichever applies, of the Earned Income Tax Credit Worksheet. (Enclose worksheet.)	*2	999999999	.00
4.	CREDIT FOR EDUCATIONAL OPPORTUNITY- for Maine residents and part-year	3		.00
4.	residents only. (Enclose worksheet.)	*4	999999999	.00
	Tosidents only. (Enclose worksheet.)	4		
5.	REHABILITATION OF HISTORIC PROPERTIES AFTER 2007. (Enclose worksheet.)	5	999999999	.00
	,			
6.	NEW MARKETS TAX CREDIT. (Enclose worksheet.)	6	999999999	.00
7.	TOTAL REFUNDABLE CREDITS. Add lines 1 through 6. Enter result here and on		00000000	
	Form 1040ME, line 25c.	7	999999999	.00
Sec	tion 2. NONREFUNDABLE CREDITS (See instructions for details):			
8.	DEPENDENT EXEMPTION TAX CREDIT. See instructions and, if necessary, enclose		999999999	0.0
	worksheet on the next page. Enter the amount from Form 1040ME, line 13a x \$3	00*8		.00
9.	CHILD CARE CREDIT. Enter amount from line 6, or line 6a, of the Child Care Credit		999999999	00
	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	*40	999999999	.00
11	Dependent Care Credit Worksheet. (Enclose worksheet.)			.00
11.	Earned Income Tax Credit Worksheet. (Enclose worksheet.)		999999999	.00
12	CREDIT FOR INCOME TAX PAID TO OTHER JURISDICTIONS. Enter the amount from line			
12.	of the worksheet for the Credit for Income Tax Paid to Other Jurisdictions. (Enclose worksheet)		999999999	.00
	(-,-,-		
13.	MAINE SEED CAPITAL CREDIT. (Enclose worksheet.)	13	999999999	.00
14.	CREDIT FOR EDUCATIONAL OPPORTUNITY- for Maine residents and part-year		999999999	
	residents only. (Enclose worksheet.)	*14	999999999	.00
			999999999	00
15.	MAINE CAPITAL INVESTMENT CREDIT. (Enclose worksheet.)	15		.00
4.0		4.0	999999999	.00
16.	RESEARCH EXPENSE TAX CREDIT. (Enclose worksheet.)	16		.00
17	CARRYFORWARD OF CERTAIN CREDIT AMOUNTS. (Enclose worksheet.)	17	999999999	.00
	PINE TREE DEVELOPMENT ZONE CREDIT - Enter the amount from the Credit	17		
10.	Application Worksheet. (Enclose worksheet.)	18	999999999	.00
	(<u></u>			
19.	EMPLOYER CREDIT FOR FAMILY AND MEDICAL LEAVE	19	999999999	.00
			00000000	
20.	OTHER TAX CREDITS. (Enclose applicable worksheet(s).)	20	999999999	.00
			999999999	00
21.	TOTAL NONREFUNDABLE CREDITS - Add lines 8 through 20.	21	JJJJJJJJJJ	.00
			999999999	.00
	MAINE INCOME TAX - Form 1040ME, line 22.			. 00
23.	ALLOWABLE NONREFUNDABLE CREDITS - Amount on line 21 or line 22, whichever is less		999999999	.00
	Enter here and on Form 1040ME, line 23.	23		. 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 2020

Charitable Contributions and Purchase of Park Passes

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



2002202
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.

			,					otals below. DO NOT commas, or decimals:
	1.	Endangered & Nongame Wildlife Fund "Chickadee Check-off"	\$5	\$10	\$25	Other \$	1	.00
SNC	2.	Maine Children's Trust	\$5	\$10	\$25	Other \$	2	.00
BUTIC	3.	Companion Animal Sterilization Fund	\$5	\$10	\$25	Other \$	3	.00
	4.	Maine Military Family Relief Fund	\$5	\$10	\$25	Other \$	4	.00
CONTRIBUTIONS	5.	Maine Veterans' Memorial Cemetery Maintenance Fund	\$5	\$10	\$25	Other \$	5	.00
Ä	6.	Maine Public Library Fund	\$5	\$10	\$25	Other \$	6	.00
	7.	Maine Children's Cancer Research Fund	\$5	\$10	\$25	Other \$	7	.00
	8.	TOTAL CONTRIBUTIONS. (Add lines	1 through 7.)				8	.00
X S	9.	Number of Individual Day-use Park Pas	sses:	x \$55			9	.00
PAI		Number of Vehicle Day-use Park Passe					10	.00
	11.	TOTAL CONTRIBUTIONS AND PAR Enter result here and on Form 1040ME					11	.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. Photocopies or electronic photos of park passes are not accepted.

MRS will issue park passes through July 31, 2021. 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 7 above may qualify for a charitable contributions deduction on your 2021 federal and Maine income tax returns if you itemize deductions. For more information, see federal Publication 526, "Charitable Contributions" available at www.irs.gov.

SCHEDULE PTFC/STFC **FORM 1040ME**

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/tax-return-forms.



Attachment Sequence No. 3

Name(s) as shown on Form 1040ME

Your Social Security Number

999 99 9999

Note: If your filing	ig status		0 1	,, ,		,	MM	DD	YYYY	
Enter your	99	99	9999		If mar	ried, enter your	99	99	9999	
date of birth	9 9 MM	DD DD	YYYY		spous	se's date of birth	99	99	9999	
^o hysical locatio				during 2020	(if different from	your mailing addre	ss): XXX	XXXXX	XXXXXXXX	XXX
XXXXXXXX	XXXXX	XXXXX	XXXXXX	XXXXXXX	XXXXXXXX	XXXXXXXXXX	XXXXXX	XXXXX	XXXXXXXX	XXX
						iplete line 1 if you		e federa	l Form 1040 o	r Form
1040-SR. Com	nlata lina	2 if wan	-d- 6:1- 6-4							
	piete iiile	z II you	ao ille lea	eral Form 10)40 or Form 104	l0-SR. Then go to		D ¢ alama		-! -
						•		R \$ signs	, commas, or de	cimals
F YOU DO <u>NOT</u>	FILE FED	ERAL FOI	RM 1040 OF	R FORM 1040-	SR, ENTER:	•	NOT ENTE		99999	
F YOU DO <u>NOT</u> 1. (a) Social	FILE FED	ERAL FOI penefits a	RM 1040 OR	retirement be	SR, ENTER: enefits. (See inst	DC	NOT ENTE	1a.		9.00
1. (a) Social (b) Interes	FILE FED security b	ERAL FOI penefits a idends. (\$	RM 1040 OF and railroad See instruc	retirement be	SR, ENTER: enefits. (See inst	DC	NOT ENTE	1a. 1b.	99999	9.00 9.00
F YOU DO NOT 1. (a) Social (b) Interes (c) Pension	FILE FED security bet and divi	ERAL FOI benefits a idends. (\$ ities and	RM 1040 OF and railroad See instruc	retirement bettiens.)utions. (See in	SR, ENTER: enefits. (See inst	DC	NOT ENTE	1a. 1b. 1c.	99999	9.00 9.00 9.00

OR, IF YOU DO FILE FEDERAL FORM 1040 OR FORM 1040-SR, ENTER:

۷.	(a)	Federal total income. (From lederal Form 1040, line 9 of Form 1040-5K, line 9.)	0.0.0.0
		If filing Schedule NRH - see instructions	9999.00

` '	,		`	,		
lin	ne 6b or Form 1040-SR	, line 6a minus line 6b) and	railroad retireme	nt benefits not included		00000
or	n line 2a above. (See ir	structions.)			2b.	999999.00

(c) Interest not included on line 2a above. If filing Schedule NRH - see instructions2c.	999.00
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(d)	Loss add-backs.	(See instructions.))2d.	999999.00
-----	-----------------	---------------------	------	-----------

Note that if the amount on line 3 is more than the amount shown in the table below for your filing status and the number of qualifying children and dependents on Form 1040ME, line 13a, you do not qualify for the property tax fairness credit.

(b) Social security benefits not included on line 2a above. (Federal Form 1040, line 6a minus

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	\$42,000	\$42,000	\$42,000				
Head of Household	\$54,000	\$54,000	\$67,000				
Married filing Jointly or Qualifying Widow(er)	\$54,000	\$67,000	\$67,000				

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.

999999.00

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.



2002206

PROPERTY TAX FAIRNESS CREDIT (lines 4 through 12):

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

4.	Enter the property tax yo	ou paid on your home in	2020. (See instruction	ns.)	4.	9999	99.00
5.	If you paid no property tax in 2020, skip to line 5a. 5. (a) Enter the rent you paid on your home in 2020. (See instructions.)						99.00
٠.	If you paid no rent in 2020, skip to line 6.						
	` '			similar items?	5b.	$^{ m X}$ Yes	X No
	(c) If line 5b is yes and similar items, enter t	you know the amount pa that amount on line 5c. I					
			•	b is no, enter "0" on line 50	c5c.	9999	99.00
	(d) Line 5a minus line 5	c			5d.	9999	99.00
	(e) Multiply line 5d by 1	5% (15)			50	9999	99.00
	(f) Landlord's name and	d telephone number: XX	XXXXXXXXXXX	XXXXXXXXXXXXX	XXX		.00
	XXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXX	xxxxxxxxxxx	XXX		
6.	Add lines 4 and 5e				6.	9999	99.00
7.	Enter the amount shown					9999	99.00
							33.00
	If your Filing Status is:		rm 1040ME, line 13a is				
			1 0 maximum benefit base				
	Single	\$2,100	\$2,100	\$2,100			
	Head of Household	\$2,700	\$2,700	\$3,350			
	Married filing Jointly or Qualifying Widow(er)	\$2,700	\$3,350	\$3,350			
8.	Benefit base. Enter the s	maller of line 6 or line 7.			8.	99	99.00
9.	Multiply line 3 by 5% (.05	5)			0	999	99.00
9.		,		o to line 10 below. If no, y			.00
	do not qualify for the proper					$^{ m X}$ Yes	No
10.	Subtract line 9 from line	8			10.	99	99.00
11.	Were you or your spouse	e (if married filing jointly)	at least 65 years of a	age during the tax year?	11.	X Yes	No
						90	99.00
	(a) If yes, enter \$1,200.	If no, enter \$750			11a.		
12.	Enter line 10 or line 11a,	whichever is smaller, he	ere <u>and</u> on Form 104	0ME, line 25d	12.	9	99.00
SA	LES TAX FAIRNESS CRE	EDIT (lines 13 and 13a):					
13.	See the table on page 18	3 for your filing status. E	nter the amount shov	vn for your total income fr	om		
	O	199					
	Schedule NRH, go to line	e 13a. Otherwise, enter th	is amount on Form 10	40ME, line 25e	13.	3	99.00
	(a) PART-YEAR RESIDEN	NTS FILING SCHEDULE N	IR OR SCHEDULE NRI	H - You must prorate the sa	ales		
	tax fairness credit. Se	<u>chedule NR,</u> multiply line	: 13 by the Maine-soเ	irce income ratio (1.0000			
		•		ne Maine-source income r	atio		
	•	000 minus Schedule NR and on Form 1040ME,			13a.	9	99.00
		,					





Form 1040ME, Schedule A, Line 20 - Other Tax Credits Worksheet for Tax Year 2020



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 www.maine.gov/revenue/tax-return-forms (select Worksheets for Tax Credits) or call 626-8475.

Nan	ne(s) as shown on Form 1040ME		Your Social Security Number
	xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx		999 99 9999
1.	AccessAble Home Tax Credit for qualified expenses incurred for certain home modifications to make a homestead accessible to an individual with a disability or physical hardship	1.	99999999 .00
2.	Credit for Disability Income Protection Plans in the Workplace	2.	99999999 .00
3.	Media Production Credit	3.	99999999 .00
4.	Wellness Programs Credit	4.	999999999 .00
5.	Dental Care Access Credit for individuals certified as eligible dentists by the Department of Health and Human Services, Oral Health Program	5.	99999999 .00
6.	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.	6.	99999999 .00
7.	Dual Residence Tax Credit for individuals who are considered residents of both Maine and another state for income tax purposes may qualify for a reduction of tax provided the other taxing jurisdiction allows a similar tax reduction	7.	99999999 .00
8.	Total Other Tax Credits (add lines 1 through 7 and enter the total here and on Form 1040ME, Schedule A, line 20)	8.	99999999 .00

99

2020 Educational Opportunity Tax Credit Worksheet



for Maine Resident & Part-year Resident Individuals 36 M.R.S. § 5217-D



2002207

IMPORTANT NOTE: Use this worksheet if you paid education loan payments directly to the lender. If you are claiming the credit for more than one degree, complete a separate worksheet for each degree. If your employer also made student loan payments on your behalf, you must complete and attach the Educational Opportunity Tax Credit - Employer/Employee Affidavit. See instructions.

Note: If this is the first year you are claiming this credit, you **must** include a <u>complete</u> copy of your college transcript, proof of the educational loans that qualify for the credit and proof of the educational loan payments you paid directly to the lender during the tax year. Additionally, Maine Revenue Services may request additional documentation supporting your claim in subsequent tax years.

Nar	ne of Taxpayer (Graduate)						Grad	uate's Social Security N	lumber		
X	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXX	XΧX	XXXXXXX	XX			999	99	99	99
Lin	es A - C. Check the type of degree	Α	Χ	Bachelor's		D	If Box A is checked,				
you received. Check only one box.		В	Χ	Associate		this is a degree in So Engineering or Math See instructions.		• • • • • • • • • • • • • • • • • • • •	Χ		
		С	Χ	Graduate		E	Date you graduated:	99 99 99	99		
F	College or university from which yo	u obt	aine	d the degree:	XXXX	XXX	XXXXXXXXXXX	XXXXXXXXXX	XXXXX	XX	XX
G	State where the college or universit	y is l	ocate	ed: XX	(Enter	the	two-digit state abbrev	viation)			
Н	Name of degree as it appears on yo (Example: Bachelor of Science Com				XXXXX	XXX	XXXXXXXXXXX	XXXXXXXXXX	XXXX		
1	Check this box if your employer also complete and enclose the Education									Χ	
1.	Eligible payments. Enter the amo Payment Schedule, line 4 or if box I								999	9	.00
	Proration factor. If your education loan degree before January 1, 2008, comple										
2.	Enter the number of credit hours you	ı earr	ned to	oward your de	gree <u>afte</u>	<u>r</u> De	cember 31, 20072.		99	9	
3.	Enter the total number of credit hours total number of credit hours required								99	9	
4.	Divide line 2 by line 3. (Round the result	t to fo	ur de	cimal places. D	o not ente	er mo	re than 1.0000.) 4.	9.	999	9	
5.	If you completed lines 2, 3 and 4, m from line 1			•					999	9	.00
	a) Refundable credit. If either bo from line 5. Also enter this amo								999	9	.00
	b) If neither box B nor box D above	e is c	heck	ed, enter the	amount f	from	line 5 5b.		999	9	.00
6.	Enter the carryforward of unused cr	edit	amoı	unts from prio	r tax yeaı	rs	6.		999	9	.00
7.	Nonrefundable credit. Add lines 5 Schedule A, line 14						•		999	9	.00

Note: MRS may request additional information supporting the credit claimed before the return can be processed.

The credit amount on line 7 cannot exceed your tax due; however, unused credit amounts may be carried forward for up to 10 years - see instructions.

Keep a record of the unused credit amount available for future tax years.

99

2020 Educational Opportunity Tax Credit Worksheet



for Employers of Qualified Employees 36 M.R.S. § 5217-D



2002208

IMPORTANT NOTE: Use this worksheet if you paid education loan payments directly to the lender on behalf of your employee. If you are claiming the credit for more than one employee, complete a separate worksheet for each employee. See instructions.

Note: If this is the first year you are claiming this credit, you **must** include a <u>complete</u> copy of the employee's college transcript, proof of the educational loans that qualify for the credit and proof of the educational loan payments you paid directly to the lender during the tax year. Additionally, Maine Revenue Services may request additional documentation supporting your claim in subsequent tax years.

En	nployer name:	EIN/SSN:			
X	xxxxxxxxxxxxxxxxxxxxxxxxxxxxxx		99	99 99 9	999
	me of employee (Graduate)	Boxes A - C. Check the type of degree employee received:	A X	Bachelor'	s
Em	ployee's Social Security Number		в	Associate	
	999 99 9999		c X	Graduate	
D	Location where employee worked: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXX E Date of graduat	ion:	99 99 9	999
F	College or university from which the degree was obtained: XXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXX	XXXXXXX	XX
G	Name of degree as it appears on employee's diploma: XXXXXX (Example: Bachelor of Science Computer Science)	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXX	XXXXXXX	Z
1.	Eligible payments. Enter the amount from the Educational Opport Credit - Loan Payment Schedule, line 4			9999	.00
	Proration factor. If the loans include amounts borrowed for credit hours before January 1, 2008, complete lines 2, 3 and 4. Otherwise, enter the a	•			
2.	Enter the number of credit hours earned toward the degree <u>after</u> Dece	ember 31, 2007 2.		999	
3.	Enter the total number of credit hours earned toward the degree (Dethe total number of credit hours required to earn the degree.)			999	
4.	Divide line 2 by line 3. (Round the result to four decimal places. Do not ent	er more than 1.0000.) . 4.	9.	9999	
5.	If you completed lines 2, 3 and 4, multiply line 1 by line 4. Otherwise, from line 1			9999	.00
6.	If the employee worked for you full-time (at least 32 hours/week), enter If the employee worked for you part-time (at least 16 hours/week), e			9999	
7.	Credit amount. Multiply line 5 by line 6	7.		9999	.00
8.	Enter the carryforward of unused credit amounts from prior tax year	rs8.		9999	.00
9.	Total credit available (line 7 plus line 8)	9.		9999	.00

C corporations: Add the line 9 amounts of all worksheets completed and enter the total on Form 1120ME, Schedule C, line 1l. **Individuals**: Add the line 9 amounts of all worksheets completed and enter the total on Form 1040ME, Schedule A, line 14. **Pass-through entities**: Enter the result here and see instructions for reporting amounts to owners.

Note: MRS may request additional information supporting the credit claimed before the return can be processed.

The credit amount on line 9 cannot exceed your tax due; however, unused credit amounts may be carried forward for up to 10 years - see instructions.

Keep a record of the unused credit amount available for future tax years.