2012 For tax period

MAINE INDIVIDUAL INCOME TAX FORM 1040ME

2012 to



See instructions on pages 2 and 3. Print neatly in blue or black ink only.

					IMPORTANT! You must enter your SSN(s) below.						
	Your F	irst Name			MI						
	Your L	ast Name									
						Your Social Security	Number				
	Spous	e's First Name			MI	,					
						Spouse's Social Sec	urity Numl	oer			
	Spous	e's Last Name					,				
	Mailing	Address (PO Box, number, street and apt. no)									
						Work Phone Number					
-	City		State	ZIP Code							
		NOTE: If either spouse is deceased, enter the date of death	h on Forn	n 1040ME, pag	e 3 in the space	s provided above the signa	ature area.				
1		ne Clean Election Fund. Maine Residents Only.				e if you were engaged in					
		ck here if you, or your spouse, if filing jointly, at \$3 to go to this fund.	You	Spouse	FARMING	OR FISHING during 201	2				
		FILING STATUS (Check one)	RESIL	DENCY STATU	S (Check one)	12 CHECK IF:	You were	Spous	e		
3		Single	_				WOIC	<u> </u>			
4		Married filing joint return (Even if only one had income)	8	Resident		65 or over 12a		12c			
_			8a	"Safe Ha	rbor" Resident						
5		M arried filing s eparate return. Enter spouse's social security number and full name above.	9	Part-Year	Resident	Blind12b		12d			
6		Head of household (With qualifying person)									
7		Qualifying widow(er) with dependent child	10	Nonresid	ent	13 Enter the TOTAL					
•		Qualifying Woon(of) with appointed it of the	11	Nonresid	ent A lien	exemptions cla on your federal re					
	(Year spouse died)		Chook ho	ere if you are						
		Composite Return (Pass-through Entities ONLY)			edule NRH						
									_		
	14	FEDERAL ADJUSTED GROSS INCOME			14			.00)		
9	15	INCOME MODIFICATIONS (From Schodulo 1 line 2)			15			.00	,		
Calculate Your Taxable Income	15	INCOME MODIFICATIONS. (From Schedule 1, line 3.)			15			.00	_		
able I	16	MAINE ADJUSTED GROSS INCOME. (Line 14 plus or	minus li	ne 15)	16			.00)		
r Taxa	17	DEDUCTION. Standard (See instructions on p	age 2)		17			.00)		
e You		h : 1/5 M : 0 1 1 1	0.11	- \							
culat	18	Itemized (From Maine Schedule EXEMPTION. Multiply the number of exemptions on line		*	structions.)	18		.00)		
Ca								0.0			
	19 20	TAXABLE INCOME. (Line 16 minus lines 17 and 18.) INCOME TAX. (Find the tax for the amount on line 19 in			19			.00	,		
		on pages 19-20 or compute your tax using the tax rate						0.0			
		schedules at www.maine.gov/revenue/forms.)			20			.00	j		

				1202101
	21	TAX ADDITIONS. (From Maine Schedule A, line 3.)	21	.00
its	22	LOW-INCOME TAX CREDIT. (See instructions.) NOTE: You must		
Credits		file a return only if you are claiming a refund.)	22	.00
Calculate Your Tax and	23	TOTAL TAX. (Line 20 plus line 21 minus line 22.)	23	.00
our.	24	TAX CREDITS. (From Maine Schedule A, line 21.)	24	.00
late)	25	NONRESIDENT CREDIT. (For part-year residents, nonresidents and		
alcul		"Safe Harbor" residents only.) From Schedule NR, line 9 or NRH, line 11	25	.00
S	26	(You MUST attach a copy of your federal return and/or TDY papers.) NET TAX. (Subtract lines 24 and 25 from line 23.) (Nonresidents see instructions.)	26	.00
		7-2-7-7-2-1 (0-2-2-2-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		.00
Tax Payments/Refundable Credit		TAX PAYMENTS. Maine Income Tax Withheld. (Enclose W-2, 1099 and 1099ME forms) →	27a	.00
lable	b	2012 Estimated Tax Payments and 2011 Credit Carried Forward and Extension		20
Jund	D	payment. (Include any REAL ESTATE WITHHOLDING Tax Payments.)	27b	.00
ts/Re		EFUNDABLE TAX CREDITS. Enclose applicable worksheet with your return. Rehabilitation of historic properties after 2007 (worksheet, line 6)	27c	.00
men				
с Рау	d.	Child care credit. (Child Care Credit worksheet, line 5.)	27d	.00
Тау	e.	TOTAL (Add lines 27a, b, c and d.)	27e	.00
suc	28	INCOME TAX OVERPAID. If line 27e is larger than line 26, enter amount		
butic	29	overpaid (Line 27e minus line 26.)	28	.00
ontri	23	underpaid (Line 26 minus line 27e.)	29	.00
ary C				
olunt	30	USE TAX (SALES TAX). (See instructions.)	30	.00
Use Tax/Voluntary Contributions	30a	SALES TAX ON CASUAL RENTALS OF LIVING QUARTERS. (See instructions.)	30a	.00
Use	24	CHARITABLE CONTRIBUTIONS and PARK PASSES. (From Maine Schedule CP, line 12.)	24	.00
	31	CHARITABLE CONTRIBUTIONS and PARK PASSES. (From Maine Scriedule OP, line 12.)	31	.00
	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 below	32	.00
	33	Amount to be CREDITED to 2013 estimated tax 33a • 0 0 REFUND ©	22h	.00
	IF Y	OU WOULD LIKE YOUR REFUND SENT DIRECTLY TO YOUR BANK ACCOUNT (
	PL	AN® ACCOUNT, see the instructions on page 3 and fill in the lines below.	* 10,000 01	,
当		Check here if this refund		
AXE		will go to an account outside the United 33c Routing Number*		
orT		States 33d Account Number*		
REFUND or TAX DUE	*For	NextGen Accounts, enter 043000261 on line 33c and the account owner's 9-digit social	l security no	umber on line 33d (do not enter hyphens).
REF	33e	Type of Account: Checking Savings NextGer	n®	
		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	.00
		b Underpayment Penalty. (Attach Form 2210ME.) Check here if you checked the box on Form 2210, line 17	34b	.00
			J .~	
		c TOTAL AMOUNT DUE. (Add lines 34a and 34b.) (Pay in full with return.)	34c	.00
		/ E _{CA}		



35 MAINE RESIDENTS ONLY: Check this box if you would like to receive a Maine Residents Property Tax and Rent Refund Application in 2013: See www.maine.gov/revenue for information about the Tax and Rent "Circuitbreaker" Program. THE APPLICATION WILL BE MAILED

TO TOO IN ACCOUNT 2010 difficus your moonic on line to exceeds the moonic limits for this program.											
IMPO	RTANT NOTE	If taxpayer is deceased, enter date of death.	(Month)	(Day)	(Year)	If spouse is decea enter date of deat	h.	(Month)	(Day)	(Year)	
Third Party Designee See page 3)	·	low another person to di	scuss thi	is return with		ue Services?	`	'	e the follow	ring).	No.
		clare that I have examine I complete. Declaration o		er (other than			nation of		oreparer ha		

SIGN HERE			
Keep a copy of this return for your	Your signature	Date signed	Your occupation
records	Spouse's signature (If joint return, both must sign)	Date signed	Spouse's occupation
Paid	Preparer's signature	Date	Preparer's phone number
Preparer's Use			
Only	Print preparer's name and name of business		Preparer's SSN or PTIN

ERRORS THAT DELAY PROCESSING OF RETURNS:

- IF YOU ARE OVER 65 AND/OR BLIND, SEE THE INSTRUCTIONS ON PAGE 2 AND CLAIM THE ADDITIONAL AMOUNT AS ALLOWED.
 - USE THE CORRECT COLUMN FROM THE TAX TABLE FOR YOUR FILING STATUS.
- •IF YOU OVERPAID YOUR TAX, ENTER THE AMOUNT YOU WANT TO BE REFUNDED ON LINE 33B.
 - SOCIAL SECURITY NUMBERS THAT ARE NOT CORRECT.
 - FILING STATUS AND NUMBER OF EXEMPTIONS INCOMPLETE.
 - W-2 FORMS ARE NOT ENCLOSED WITH THE RETURN.
 - ERRORS IN CALCULATION.
 - AMOUNTS ENTERED ON WRONG LINE.
 - USE BLACK OR BLUE INK. DO NOT USE RED INK.
 - BE SURE TO SIGN YOUR 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

DO NOT SEND PHOTOCOPIES OF RETURNS

Payment Injured Spouse Plan