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.

| | | | | | | IMPO You must enter | RTANT! 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 | | | | | , | | |
| | | | | | | Home Phone Number | | | |
| | Mailing | Address (PO Box, number, street and apt. no) | | | | | | | |
| | | | | | | Work Phone Number | | | |
| City | | | | 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 | е |
| 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 in office | 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 | DUCTION. Standard (See instructions on page 2) | | | | | .00 |) |
| e You | | h : 1/5 M : 0.1 11 | 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 |
| lits | 22 | LOW-INCOME TAX CREDIT. (See instructions.) NOTE: You must | | |
| Crec | | file a return only if you are claiming a refund.) | 22 | .00 |
| Calculate Your Tax and Credits | 23 | TOTAL TAX. (Line 20 plus line 21 minus line 22.) | 23 | .00 |
| Your | 24 | TAX CREDITS. (From Maine Schedule A, line 21.) | 24 | .00 |
| ılate | 25 | NONRESIDENT CREDIT. (For part-year residents, nonresidents and | | 0.0 |
| Calcı | | "Safe Harbor" residents only.) From Schedule NR, line 9 or NRH, line 11 | 25 | .00 |
| | 26 | NET TAX. (Subtract lines 24 and 25 from line 23.) (Nonresidents see instructions.) | 26 | .00 |
| | | | | |
| Tax Payments/Refundable Credit | | TAX PAYMENTS. Maine Income Tax Withheld. (Enclose W-2, 1099 and 1099ME forms) → | 27a | .00 |
| undabl | b | 2012 Estimated Tax Payments and 2011 Credit Carried Forward and Extension payment. (Include any REAL ESTATE WITHHOLDING Tax Payments.) | 27b | .00 |
| /Ref | | EFUNDABLE TAX CREDITS. Enclose applicable worksheet with your return. | 27c | .00 |
| nents | C. | Rehabilitation of historic properties after 2007 (worksheet, line 6) | 216 | .00 |
| Payr | d. | Child care credit. (Child Care Credit worksheet, line 5.) | 27d | .00 |
| Тах | e. | TOTAL (Add lines 27a, b, c and d.) | 27e | .00 |
| ns | 28 | INCOME TAX OVERPAID. If line 27e is larger than line 26, enter amount | | |
| butio | 20 | overpaid (Line 27e minus line 26.) | 28 | .00 |
| ontri | 29 | underpaid (Line 26 minus line 27e.) | 29 | .00 |
| tary C | | | | |
| /olun | 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 | | AVARITARY F CONTRIBUTIONS A DARK PAGGES (F M | | 0.0 |
| | 31 | CHARITABLE CONTRIBUTIONS and PARK PASSES. (From Maine Schedule CP, 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 • 00 REFUND © | 33b | .00 |
| | IF Y | OU WOULD LIKE YOUR REFUND SENT DIRECTLY TO YOUR BANK ACCOUNT (| | NVESTING |
| | PL | AN® ACCOUNT, see the instructions on page 3 and fill in the lines below. | | |
| REFUND or TAX DUE | | Check here if this refund will go to an account 33c Routing Number* | | |
| TAX | | outside the United | | |
| ō QZ | *For | States | I security number on line 33d (do not enter hyphens | s). |
| EFU | | | is decarry framition of this dead (at first office hypricial | 5). |
| ~ | 33e | Type of Account: Checking Savings NextGer | n® | |
| | 34 a | 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 |
| | | | | |
| | | c TOTAL AMOUNT DUE. (Add lines 34a and 34b.) (Pay in full with return.) | 34c | .00 |



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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 YOU IN AUGUST 2013 unless your income on line 16 exceeds the income limits for this program.

| 3: | \Rightarrow |
|----|---------------|
| | |

| INIPO | MPORTANT NOTE | If taxpayer is deceased, enter date of death. | (Month) | (Day) | ()() | If spouse is decear enter date of deat | h. | (Manth) | (Davi) | ()() | |
|----------------------------|---------------------|---|--------------|---------------|---------------|---|----------|------------|--------------|--------------|------|
| | | | | (Day) | (Year) | | | (Month) | (Day) | (Year) | |
| d Party gnee page 3) | Do you want to a | allow another person to c | liscuss this | s return with | n Maine Reve | enue Services? | Yes (| complete | e the follow | ving). | N |
| | Designee's nam | е | | Phone no |). | | Person | nal identi | ification #: | | |
| r penalti | es of perjury, I de | eclare that I have examin | ed this ret | urn and acc | companying s | schedules and stater | ments, | and to th | e best of n | ny knowle | edge |
| t, they ar | e true, correct an | nd complete. Declaration | of prepare | r (other tha | n taxpayer) ı | s hased on all inform | | it which n | renarer ha | as anv kni | าพโร |
| | | | | | | | lation 0 | - Willon p | лорагог по | | |
| | > | | | | | | iation o | - willon p | | | |
| a of eturn | Your signature | | | | Date signed | | | occupation | <u>'</u> | 20 0119 1011 | |
| E Do a v of return our rds | | ure (If joint return, both must | sign) | | Date signed | | Your o | | <u>'</u> | | |
| a of return | Spouse's signatu | , | sign) | | Date signed | | Your o | e's occupa | ation | | |
| e a of return our | | , | sign) | | J | | Your o | occupation | ation | 20 (11) | |

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
Plan Spouse