

2015

MAINE INDIVIDUAL INCOME TAX FORM 1040ME



99

For tax period 1/1/2015 to 12/31/2015 or

2015 to

\*1502100\*

See instructions. Print neatly in blue or black ink only.

Your First Name [ ] MI [ ]

Your Last Name [ ]

Spouse's First Name [ ] MI [ ]

Spouse's Last Name [ ]

Current Mailing Address (PO Box, number, street and apt. no) [ ]

City or Town [ ]

State [ ]

ZIP Code [ ]

Home Phone Number [ ]

Work Phone Number [ ]

Foreign country name [ ]

Foreign province/state/county [ ]

Foreign postal code [ ]

NOTE: If either spouse is deceased, enter the date of death on Form 1040ME, page 3 in the spaces provided above the signature area.

Check here if this is an AMENDED return. [ ]

Your Social Security Number [ ]

Spouse's Social Security Number [ ]

A [ ] Maine Property Tax Fairness Credit - Maine residents and part-year residents only - see Schedule PTFC. Check this box if you are filing a return only to claim the Property Tax Fairness Credit on line 25d. Otherwise, leave this box blank. Follow the instructions on Schedule PTFC.

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. [ ] You [ ] Spouse

2 Check here if you were engaged in COMMERCIAL FARMING OR FISHING during 2015..... [ ]

FILING STATUS (Check one) 3 Single 4 Married filing jointly (Even if only one had income) 5 Married filing separately. Enter spouse's social security number and full name above. 6 Head of household (with qualifying person) 7 Qualifying widow(er) with dependent child (Year spouse died [ ] ) Composite Return (Pass-through Entities ONLY)

RESIDENCY STATUS (Check one) 8 Resident 8a "Safe Harbor" Resident 9 Part-Year Resident 10 Nonresident 11 Nonresident Alien Check here if you are filing Schedule NRH [ ]

12 CHECK IF: You were [ ] Spouse was [ ] 65 or over ..... 12a [ ] 12c [ ] Blind..... 12b [ ] 12d [ ]

13 Enter the TOTAL number of EXEMPTIONS claimed on your federal return....13 [ ]

Table with 3 columns: Line number, Description, and Amount. Rows include: 14 FEDERAL ADJUSTED GROSS INCOME .00, 15 INCOME MODIFICATIONS (From Schedule 1, line 3.) .00, 16 MAINE ADJUSTED GROSS INCOME (Line 14 plus or minus line 15.) .00, 17 DEDUCTION Standard (See instructions on page 2) .00, 17 DEDUCTION Itemized (From Maine Schedule 2, line 7.) .00, 18 EXEMPTION (See instructions.) .00

Calculate Your Taxable Income



\*1502101\*

Calculate Your Tax and Credits

19	<b>TAXABLE INCOME.</b> (Line 16 minus lines 17 and 18.)	19		.00
20	<b>INCOME TAX.</b> (Find the tax for the amount on line 19 in the tax table in this booklet or compute your tax using the tax table or tax rate schedules available at <a href="http://www.maine.gov/revenue/forms">www.maine.gov/revenue/forms</a> .)	20		.00
20a	<b>TAX CREDIT RECAPTURE AMOUNTS</b> (Enclose worksheet(s) - see instructions).	20a		.00
21	<b>TOTAL TAX.</b> (Line 20 plus line 20a)	21		.00
22	<b>TAX CREDITS.</b> (From Maine Schedule A, line 23.)	22		.00
23	<b>NONRESIDENT CREDIT.</b> (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.)	23		.00
24	<b>NET TAX.</b> (Subtract lines 22 and 23 from line 21.) (Nonresidents see instructions.)	24		.00

Tax Payments/Refundable Credits

25	<b>TAX PAYMENTS.</b>			
	a Maine income tax withheld. (Enclose W-2, 1099 and 1099ME forms.)	25a		.00
	b 2015 estimated tax payments and 2014 credit carried forward, extension payments and payments with original return. (Include any <b>REAL ESTATE WITHHOLDING</b> tax payments.)	25b		.00
	c REFUNDABLE TAX CREDITS (from Maine Schedule A, line 5)	25c		.00
	d Property Tax Fairness Credit ( <b>Schedule PTFC, line 13</b> ). (See instructions.) (For Maine Residents and Part-year Residents Only)	25d		.00
	e TOTAL. (Add lines 25a, b, c and d.)	25e		.00

26	If this is an amended return, enter overpayment, if any, on original or as previously adjusted.	26		.00
27	Line 25e minus line 26. (If negative, enter a minus sign in the box to the left of the number.)	27		.00
28	<b>INCOME TAX OVERPAID.</b> If line 27 is larger than line 24, enter amount overpaid (Line 27 minus line 24.)	28		.00
29	<b>INCOME TAX UNDERPAID.</b> If line 24 is larger than line 27, enter amount underpaid (Line 24 minus line 27.) (See instructions if line 27 is negative.)	29		.00

Calculate Use Tax / Voluntary Contributions / Refund Due

30	<b>USE TAX (SALES TAX).</b> (See instructions.)	30		.00
30a	<b>SALES TAX ON CASUAL RENTALS OF LIVING QUARTERS.</b> (See instructions.)	30a		.00
31	<b>CHARITABLE CONTRIBUTIONS and PARK PASSES.</b> (From Maine Schedule CP, line 10.)	31		.00
32	<b>NET OVERPAYMENT.</b> (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 <b>CREDITED</b> to 2016 estimated tax ... 33a		.00	<b>REFUND</b> ..... 33b

**IF YOU WOULD LIKE YOUR REFUND SENT DIRECTLY TO YOUR BANK ACCOUNT (\$10,000 or less) OR TO A NEXTGEN COLLEGE INVESTING PLAN® ACCOUNT, see the instructions on page 3 and fill in the lines below.**

Check here if this refund will go to an account outside the United States. .... 33c Routing Number\*

33d Account Number\*

\*For NextGen Accounts, enter 084301767 on line 33c and the 8-digit NextGen Account Number on line 33d (do not enter hyphens).

33e Type of Account:  Checking  Savings  NextGen®



\*1502111\*

Name(s) as shown on Form 1040ME

Your Social Security Number



TAX DUE

<b>34a TAX DUE.</b> (Add lines 29, 30, 30a and 31) - <b>NOTE:</b> 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>b Underpayment Penalty.</b> (Attach Form 2210ME.) Check here if you checked the box on Form 2210, line 17 <input type="checkbox"/> .....	34b	.00
<b>c TOTAL AMOUNT DUE.</b> (Add lines 34a and 34b.) (Pay in full with return.) .....	34c	.00

**EZ PAY** at [www.maine.gov/revenue](http://www.maine.gov/revenue) or **ENCLOSE CHECK** payable to: **Treasurer, State of Maine. DO NOT SEND CASH**

**IMPORTANT NOTE**

If taxpayer is **deceased**,  
enter **date of death**.

(Month) (Day) (Year)

If spouse is **deceased**,  
enter **date of death**.

(Month) (Day) (Year)

**Third Party Designee** Do you want to allow another person to discuss this return with Maine Revenue Services?  **Yes** (complete the following).  **No**.  
(See page 3)

Designee's name  Phone no.  Personal identification #:

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 copy of this return for your records

Your signature

Date signed

Your occupation

Spouse's signature (If joint return, **both** must sign)

Date signed

Spouse's occupation

Preparer's signature

Date

Preparer's phone number

Print preparer's name and name of business

Preparer's SSN or PTIN

**Paid Preparer's Use Only**

**Avoid errors that delay processing of returns:**

- Use black or blue ink. Do not use red ink.
- Be sure to enter amounts on correct lines.
- **Line A.** Check the Property Tax Fairness Credit box, if it applies.
- **Lines 12 and 17.** If you are over 65 and/or blind, see the instructions on page 2 and claim the additional amount as allowed.
- **Line 20.** Use the correct column from the tax table for your filing status.
- **Refund.** If you overpaid your tax, enter the amount you want to be refunded on line 33b.
  - Double check social security numbers, filing status, and 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

**DO NOT SEND PHOTOCOPIES OF RETURNS**

Payment Plan <input type="checkbox"/>	Injured Spouse <input type="checkbox"/>
---------------------------------------	---