



1502111

Name(s) as shown on Form 1040ME

Your Social Security Number

Blank input fields for name and social security number.

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

EZ PAY at 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

<input type="text"/>	<input type="text"/>	<input type="text"/>
Your signature	Date signed	Your occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>
Spouse's signature (If joint return, both must sign)	Date signed	Spouse's occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>
Preparer's signature	Date	Preparer's phone number
<input type="text"/>	<input type="text"/>	<input type="text"/>
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

Payment Plan <input type="checkbox"/>	Injured Spouse <input type="checkbox"/>
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DO NOT SEND PHOTOCOPIES OF RETURNS