

2015

MAINE CORPORATE INCOME TAX RETURN
FORM 1120ME



99

For calendar year
2015 or tax year

2015 to
MM DD YYYY MM DD YYYY

\*1400100\*

Name of Corporation, Federal Business Code, Address, Federal Employer ID Number, State of Incorporation, City, Town or Post Office, State, ZIP Code, Parent Company Employer ID Number, Contact Person's First Name, Contact Person's Last Name, Telephone Number

ELECTRONIC FILING & PAYMENT REQUIREMENTS
Corporations with total assets of \$5 million or more as of the last day of the tax year must file the 2015 Maine return electronically unless the taxpayer has been granted a waiver.

Check here if you are claiming an exemption from the Maine corporate income tax pursuant to PL 86-272.
Check this box if any member of the combined group owned an interest in a pass-through entity doing business in Maine.

CHECK APPLICABLE BOXES:
(1) Initial Return
(2) Change of name/address
(3) Combined return (Attach Form CR)
Final return. If final, check appropriate box below.
Ceased doing business in Maine Date
Dissolved Date
Merged, acquired or reorganized Date
Successor EIN

Check this box if during the tax year any member of the combined group disposed of an interest in a pass-through entity doing business in Maine.
Based on a pro-forma

Table with columns for description, line number, and amount. Rows include: FEDERAL CONSOLIDATED INCOME (line 30), TENTATIVE TOTAL TAX FILED ON FEDERAL FORM 7004, FEDERAL TAXABLE INCOME (line 30), SUBTRACTIONS FROM FEDERAL TAXABLE INCOME: NONTAXABLE INTEREST, FOREIGN DIVIDEND GROSS-UP, WORK OPPORTUNITY CREDIT AND EMPOWERMENT ZONE CREDIT DEDUCTIONS, INCOME NOT TAXABLE UNDER THE CONSTITUTION OF MAINE OR THE U.S., DIVIDENDS FROM CERTAIN AFFILIATED CORPORATIONS, NET OPERATING LOSS RECAPTURE, INCOME FROM OWNERSHIP INTEREST IN PASS-THROUGH ENTITY FINANCIAL INSTITUTIONS.



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SUBTRACTIONS, cont:

h. STATE INCOME TAX REFUNDS (included in line 1 above) .....	2h.	[Redacted]	.00
i. BONUS DEPRECIATION/SECTION 179 EXPENSE RECAPTURE .....	2i.	[Redacted]	.00
j. OTHER (see instructions) .....	2j.	[Redacted]	.00
k. TOTAL SUBTRACTIONS (add lines 2a through 2j) .....	2k.	[Redacted]	.00
3. LINE 1 MINUS 2k. If negative, enter a minus sign in the box to the left of the number.....	3.	[Redacted]	.00

ADDITIONS TO FEDERAL TAXABLE INCOME:

4 a. INCOME TAXES (imposed by Maine or any other state, attach schedule) .....	4a.	[Redacted]	.00
b. RESERVED.....	4b.	[Redacted]	.00
c. INTEREST FROM STATE AND MUNICIPAL BONDS (other than Maine).....	4c.	[Redacted]	.00
d. NET OPERATING LOSS ADJUSTMENT.....	4d.	[Redacted]	.00
e. MAINE CAPITAL INVESTMENT CREDIT BONUS DEPRECIATION ADD-BACK.....	4e.	[Redacted]	.00
f. BONUS DEPRECIATION ADD-BACK .....	4f.	[Redacted]	.00
g. OTHER (see instructions) .....	4g.	[Redacted]	.00
h. TOTAL ADDITIONS (add lines 4a through 4g) .....	4h.	[Redacted]	.00
5. ADJUSTED FEDERAL TAXABLE INCOME (add lines 3 and 4h) .....	5.	[Redacted]	.00

TAX:

6. GROSS TAX (from rate schedule on page 6 of instructions).....	6.	[Redacted]	.00
7 a. MAINE CORPORATE INCOME TAX (from line 6 above or Schedule A, line 17).....	7a.	[Redacted]	.00
b. ALTERNATIVE MINIMUM TAX: (from Schedule B, line 28c - attach federal Form 4626) .....	7b.	[Redacted]	.00
c. TOTAL TAX (add lines 7a and 7b) .....	7c.	[Redacted]	.00

PAYMENTS AND CREDITS:

8 a. MAINE ESTIMATED TAX PAID.....	8a.	[Redacted]	.00
b. EXTENSION PAYMENT (Form 1120EXT-ME).....	8b.	[Redacted]	.00
c. NON-REFUNDABLE TAX CREDITS (Schedule C, line 29o, may not exceed tax on line 7a plus any recapture amounts included on line 7b) .....	8c.	[Redacted]	.00
d. INCOME TAX WITHHELD (from a pass-through entity or from gambling winnings. Enclose Form 1099ME, W-2G, or other supporting documentation) .....	8d.	[Redacted]	.00
e. REFUNDABLE CREDITS (Schedule C, Line 30c) .....	8e.	[Redacted]	.00
f. TOTAL PAYMENTS AND CREDITS (add lines 8a through 8e) .....	8f.	[Redacted]	.00



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Use EZ Pay at  
maine.gov/revenue

9 a. If line 7c is greater than line 8f, enter **TAX BALANCE DUE**. 9a. [Redacted] .00

b. Enter **PENALTY** for underpayment of estimated tax (attach Form 2220ME) ..... 9b. [Redacted] .00

c. **TOTAL AMOUNT DUE** (add lines 9a and 9b). Pay in full with return. You may be required to make payments electronically. See instructions or Rule 102. (make check payable to **Treasurer, State of Maine**).....9c. [Redacted] .00

Check here if Form 2220ME block 5a is checked.

10. If line 8f minus line 9b is greater than line 7c, enter **OVERPAYMENT**..... 10. [Redacted] .00

11. Amount of line 10 to be:

a. **CREDITED** to next year's estimated tax [Redacted] .00      11b. **REFUNDED** [Redacted] .00

**REFUND DEPOSITED DIRECTLY TO YOUR CHECKING ACCOUNT (\$10,000 or less). SEE INSTRUCTIONS.**

Check this box if this refund will go to an account outside the United States

11c. Routing Number [Redacted]

11d. Checking Account Number [Redacted]

CORPORATION PRESIDENT'S NAME [Redacted]

SOCIAL SECURITY NUMBER [Redacted]

TREASURER'S NAME [Redacted]

SOCIAL SECURITY NUMBER [Redacted]

COMPANY'S WEB SITE ADDRESS [Redacted]

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.

[Redacted]      [Redacted]      [Redacted]      [Redacted]

DATE      OFFICER'S SIGNATURE      TITLE      SOCIAL SECURITY NUMBER

[Redacted]      [Redacted]      [Redacted]

DATE      SIGNATURE AND ADDRESS OF PREPARER (INDIVIDUAL OR FIRM)      PREPARER'S SSN OR PTIN

THIS RETURN MUST BE ACCOMPANIED BY A LEGIBLE COPY OF THE U.S. CORPORATE INCOME TAX RETURN, FEDERAL FORM 1120, PAGES 1-5, FOR THE SAME TAXABLE PERIOD.

Please submit forms in the following order:

1. Pages 1 through 5 of Form 1120ME, as required.
2. Form CR, if required, including affiliation schedule.
3. Other statements for the Maine income tax return.
4. A copy of federal Form 1120, pages 1 through 5.

If enclosing a check, make check payable to:

**Treasurer, State of Maine**  
and MAIL WITH RETURN TO:  
MAINE REVENUE SERVICES  
P.O. BOX 1065  
AUGUSTA, ME 04332-1065



If not enclosing a check, MAIL RETURN TO:

MAINE REVENUE SERVICES  
P.O. BOX 1064  
AUGUSTA, ME 04332-1064



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SCHEDULE A - APPORTIONMENT OF TAX

Do not complete this schedule if 100% of your business activity is attributable to Maine. Schedules B, C, and D may still be required.

All others must complete this schedule and enter amounts in columns A and B, even if those amounts are zero. If this schedule is left blank or excluded, your Maine apportionment factor will be set at 100%. Round all dollar amounts to whole numbers.

Check if using an alternate apportionment as provided by 36 M.R.S. § 5211(17) or if this is a mutual fund service provider electing to use the special apportionment formula under 36 M.R.S. § 5212(2),

Table with 3 columns: (A) Within Maine, (B) Everywhere, (C) Apportionment Factor. Rows include Total Sales, Total Payroll, Total Property, MAINE APPORTIONMENT FACTOR, GROSS TAX, MAINE CORPORATE INCOME TAX, and TANGIBLE PERSONAL PROPERTY.

SCHEDULE B - ALTERNATIVE MINIMUM TAX (Attach federal Form 4626)

Table with 2 columns: Description and Amount. Rows include FEDERAL ALTERNATIVE MINIMUM TAXABLE INCOME, MODIFICATIONS, TENTATIVE ALTERNATIVE MINIMUM TAXABLE INCOME, EXEMPTION, ADJUSTED TENTATIVE ALTERNATIVE MINIMUM TAXABLE INCOME, APPORTIONMENT FACTOR, ALTERNATIVE MINIMUM TAXABLE INCOME, TENTATIVE MINIMUM TAX, MAINE CORPORATE INCOME TAX, and ALTERNATIVE MINIMUM TAX CREDITS.



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SCHEDULE C - TAX CREDITS

(Attach worksheets. To get worksheets, see www.maine.gov/revenue/forms.)

Non-refundable Credits

29. a.	SEED CAPITAL INVESTMENT TAX CREDIT .....	29a.	[Redacted]	.00
b.	JOBS AND INVESTMENT TAX CREDIT .....	29b.	[Redacted]	.00
c.	EMPLOYER-ASSISTED DAY CARE CREDIT AND QUALITY CHILD CARE INVESTMENT CREDIT .....	29c.	[Redacted]	.00
d.	EMPLOYER-PROVIDED LONG-TERM CARE BENEFITS CREDIT .....	29d.	[Redacted]	.00
e.	PINE TREE DEVELOPMENT ZONE REGULAR TAX CREDIT .....	29e.	[Redacted]	.00
f.	MAINE CAPITAL INVESTMENT CREDIT .....	29f.	[Redacted]	.00
g.	RESEARCH EXPENSE TAX CREDIT .....	29g.	[Redacted]	.00
h.	SUPER CREDIT FOR SUBSTANTIALLY INCREASED RESEARCH AND DEVELOPMENT .....	29h.	[Redacted]	.00
i.	HIGH-TECHNOLOGY INVESTMENT TAX CREDIT .....	29i.	[Redacted]	.00
j.	MINIMUM TAX CREDIT (from Schedule D, line 31g) .....	29j.	[Redacted]	.00
k.	CREDIT FOR DEPENDENT HEALTH BENEFITS PAID .....	29k.	[Redacted]	.00
l.	CREDIT FOR EDUCATIONAL OPPORTUNITY .....	29l.	[Redacted]	.00
m.	WELLNESS PROGRAM CREDIT .....	29m.	[Redacted]	.00
n.	OTHER CREDITS (Credit Name) [Redacted] .....	29n.	[Redacted]	.00
o.	TOTAL NON-REFUNDABLE CREDITS: (add lines 29a through 29n, enter result here and on line 8c. Credit limited to the tax liability on line 7a and the amount of recapture included in line 7b) .....	29o.	[Redacted]	.00

Refundable Credits

30. a.	HISTORIC REHABILITATION CREDIT .....	30a.	[Redacted]	.00
b.	NEW MARKETS CAPITAL INVESTMENT CREDIT .....	30b.	[Redacted]	.00
c.	TOTAL REFUNDABLE CREDITS: (add lines 30a and 30b, enter result here and on line 8e) .....	30c.	[Redacted]	.00



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SCHEDULE D - MINIMUM TAX CREDIT

31. a.	ALTERNATIVE MINIMUM TAX FOR 2014 (2014 Form 1120ME, Schedule B, line 28c).....	31a.	[Redacted]	.00
b.	MINIMUM TAX CREDIT CARRYOVER FROM 2014 (2014 Form 1120ME, Schedule D, line 31h).....	31b.	[Redacted]	.00
c.	AVAILABLE MINIMUM TAX CREDIT (line 31a plus line 31b) .....	31c.	[Redacted]	.00
d.	REGULAR INCOME TAX LIABILITY FOR 2015 (line 7a minus all Schedule C credits except minimum tax credit).....	31d.	[Redacted]	.00
e.	TENTATIVE MINIMUM TAX (Schedule B, line 26).....	31e.	[Redacted]	.00
f.	MINIMUM TAX CREDIT LIMIT (line 31d minus line 31e - if zero or less, enter zero) .....	31f.	[Redacted]	.00
g.	MINIMUM TAX CREDIT: enter the smaller of line 31c or line 31f here and on Schedule C, line 29j .....	31g.	[Redacted]	.00
h.	Maine minimum tax credit CARRYOVER TO 2016 (line 31c minus line 31g) .....	31h.	[Redacted]	.00