## FOR

## FORM 941CF-ME Maine Revenue Services

## Nonresident Member Affidavit and Agreement to Participate in a Composite Filing of Maine Income Tax

| 1. | I am a nonresident member of a pass-through entity with Maine-source income.                                                                                                                                                                         |       |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|
|    | Member's name:                                                                                                                                                                                                                                       |       |
| 2. | Member's address:                                                                                                                                                                                                                                    |       |
| 3. | Member's social security number or taxpayer identification number:                                                                                                                                                                                   |       |
| 4. | The pass-through entity for which this agreement applies:                                                                                                                                                                                            |       |
|    | Pass-through entity's name:                                                                                                                                                                                                                          |       |
|    | Pass-through entity's address:                                                                                                                                                                                                                       |       |
|    | Pass-through entity's taxpayer identification number:                                                                                                                                                                                                |       |
| 5. | I agree that I am subject to the personal jurisdiction of the State of Maine and its agencies and courts for the puriod determining and collecting Maine income taxes due, including estimated taxes, together with any related integrand penalties. |       |
| 6. | I agree to participate in composite income tax filings by the entity listed in paragraph 4 above.                                                                                                                                                    |       |
| 7. | This agreement is binding upon my heirs, representatives, assigns, successors, executors and administrators.                                                                                                                                         |       |
| 8. | I understand and agree that Maine Revenue Services may revoke the pass-through entity withholding exemption any time it determines that I am not abiding by the terms of this agreement.                                                             | on at |
| 9. | I certify that I earn no Maine-source income other than through the entity listed in paragraph 4. (Note: this does exclude you from participating in another composite return.)                                                                      | not   |
|    | Under penalties of perjury, I declare that I have examined this form and statements and to the best of my knowl and belief they are true, correct and complete.                                                                                      | ledge |
|    | Signature of member Date                                                                                                                                                                                                                             |       |
|    | Printed name                                                                                                                                                                                                                                         |       |

This affidavit must be held by the pass-through entity. It is not necessary to submit a new affidavit each year. The affidavit will remain in force continuously as long as the member retains an ownership interest in the pass-through entity and it is not revoked. The affidavit is automatically revoked if for any reason the pass-through entity does not include the nonresident member on Schedule 3P submitted with the Maine annual pass-through entity return (Form 941P-ME). A revoked affidavit must be retained by the pass-through entity for at least three years after the year in which it is revoked.