

2024

Maine Corporate Income Tax Return Form 1120ME



99

For calendar year 2024 or tax year

2024 to MM DD YYYY MM DD YYYY

2400100

Check if you filed federal Form 990-T, 1120-C, or 1120-H

Name of Corporation

Federal Business Code

Address

Federal EIN

State of Incorporation

City, Town or Post Office

State ZIP Code

Parent Company EIN

Contact Person's First Name

Contact Person's Last Name

Telephone Number

Large empty rectangular box for contact information.

Check this box if the address has changed.

Check this box if claiming an exemption from the Maine corporate income tax pursuant to PL 86-272.

Check this box if during the tax year any member of the combined group owned or disposed of an interest in a pass-through entity doing business in Maine and enter EIN of pass-through entity below (use a separate sheet, if necessary):

Check applicable boxes:

- (1) Initial return (2) Amended return (3) Combined return (Attach Form CR)
(4) Final return If final, indicate the final business date, and check the appropriate box below:
(a) Ceased doing business in Maine (b) Dissolved (c) Merged, acquired, or reorganized. Successor EIN:
(5) Member of an affiliated group filing a separate return (6) Based on a pro forma federal return

Table with 2 columns: Description and Amount. Rows include Federal consolidated income, Tentative total tax filed on federal Form 7004, Federal taxable income, Income subtraction modifications, Income addition modifications, Adjusted federal taxable income, Tax: Gross tax, Maine corporate income tax, Credit recapture, Total tax.



2400101

Federal EIN

Payments and credits:

| | | | |
|----|---|-----|-----|
| 7. | a. Maine estimated tax paid | 7a. | .00 |
| | b. Extension payment (Form 1120EXT-ME) | 7b. | .00 |
| | c. Tax credits (Schedule C, line 1s plus line 2e) | 7c. | .00 |
| | d. Income tax withheld (from a pass-through entity or from gambling winnings. Enclose Form 1099ME, W-2G, or other supporting documentation) | 7d. | .00 |
| | e. If amended, enter payments (see instructions) | 7e. | .00 |
| | f. If amended, enter overpayments (see instructions) | 7f. | .00 |
| | g. Total payments and credits (add lines 7a through 7e and subtract line 7f; if the result is negative, enter a minus sign to the left of the number) | 7g. | .00 |

Tax due or overpayment

| | | | |
|-----|--|-----|-----|
| 8. | a. If line 6c is greater than line 7g, subtract line 7g from line 6c and enter the TAX DUE | 8a. | .00 |
| | b. If line 7g is greater than line 6c subtract line 6c from line 7g and enter the OVERPAYMENT | 8b. | .00 |
| 9. | Penalty for underpayment of estimated tax (attach Form 2220ME) Check here if Form 2220ME, box 5a is checked | 9. | .00 |
| 10. | TOTAL DUE If you completed line 8a, OR line 8b is less than line 9, enter the total due. Pay in full with return. You may be required to make payments electronically. See instructions or Rule 102 | 10. | .00 |



Overpayment Carryforward/Refund

| | | | |
|------|--|-----|--------------------------|
| 11. | OVERPAYMENT If the amount on line 8b exceeds the amount on line 9, subtract the amount on line 9 from line 8b and complete line 12 | 11. | .00 |
| 12. | Amount of line 11 to be: | | |
| 12a. | CREDITED to next year's estimated tax | .00 | 12b. REFUNDED .00 |

REFUND DEPOSITED DIRECTLY TO YOUR CHECKING ACCOUNT (\$20,000 or less). See instructions.

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

12c. Routing Number

12d. Checking Account Number

This return MUST BE ACCOMPANIED BY a legible copy of the corporation's federal return (i.e. federal Form 1120, federal pro forma, or federal consolidated return), for the same tax period.

Please submit forms in the following order:

1. Pages 1 through 3 of Form 1120ME.
2. Schedules 1S, 1A, C, and X, if applicable.
3. Form CR, if required, including affiliation schedule.
4. Other statements for the Maine income tax return.
5. A copy of federal Form 1120, federal pro forma, or federal consolidated return.



Federal EIN

Schedule A - Apportionment of Tax

- Do not complete Schedule A if 100% of the business activity is attributable to Maine. Note that Schedule C may still be required.
- All others must complete Schedule A and enter amounts in columns A and B, even if those amounts are zero. If this schedule is left blank or excluded, the 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).

| | (A) Within Maine | (B) Everywhere | (C) Apportionment Factor Line 1, Col. (A)/Col. (B) Rounded to 6 Decimals |
|--|------------------------|-------------------|---|
| 1. Total Sales* | .00 ÷ | | .00 = . |
| 2. Total Payroll | .00 ÷ | | .00 |
| 3. Total Property | .00 ÷ | | .00 |
| 4. Gross tax (Form 1120ME, line 5) | | | .00 |
| 5. Maine corporate income tax (line 4 x line 1, column C factor. Enter here and on Form 1120ME, line 6a) | | | .00 |
| 6. What amount of line 3, column A is tangible personal property ? | | | .00 |

***Note:** Total Sales must exclude income claimed as a deduction on Form 1120ME, Schedule 1S, lines 5, 12, 13, and 14. Other limitations apply. See Schedule A instructions for additional information.

Paid Preparer Authorization (see instructions)

Check "Yes" to allow the paid preparer to discuss this return with Maine Revenue Services. Yes (complete the following). No.

| | | |
|--|------------------------------|---------------------------|
| Paid Preparer's Name | Paid Preparer's Phone Number | Personal Identification # |
| Corporation President's Name | Social Security Number | |
| Treasurer's Name | Social Security Number | |
| Company's Tax Department Email Address | | |

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.

| | | | |
|------|--|-------|------------------------|
| Date | Officer's Signature | Title | Social Security Number |
| Date | Signature and Address of Preparer (Individual or Firm) | | Preparer's SSN or PTIN |

| | |
|---|---|
| <p>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</p> | <p>If not enclosing a check, MAIL RETURN TO: MAINE REVENUE SERVICES P.O. BOX 1064 AUGUSTA, ME 04332-1064</p> |
|---|---|



Schedule 1S
Form 1120ME
2024

Income Subtraction Modifications

See Form 1120ME instructions, pages 7 through 10.
 Enclose with your Form 1120ME.

For more information, visit maine.gov/revenue/tax-return-forms.



2400103

99

Name as shown on Form 1120ME

Federal EIN

DO NOT ENTER \$ signs, commas, or decimals.

SUBTRACTIONS from federal taxable income.

| | | |
|---|-----|-----|
| 1. Nontaxable interest | 1. | .00 |
| 2. Foreign dividend gross-up..... | 2. | .00 |
| 3. Work Opportunity Credit and Empowerment Zone Credit deductions (attach federal Form 5884 and/or Form 8844, as appropriate)..... | 3. | .00 |
| 4. Income not taxable under the Constitution of Maine or the United States..... | 4. | .00 |
| 5. Dividends from certain affiliated corporations (limitations - see instructions)..... | 5. | .00 |
| 6. Net operating loss recapture (see instructions)..... | 6. | .00 |
| 7. Income from ownership interest in pass-through entity financial institutions (subject to Maine franchise tax) | 7. | .00 |
| 8. State income tax refunds (see instructions)..... | 8. | .00 |
| 9. Bonus depreciation/Section 179 expense recapture (see instructions)..... | 9. | .00 |
| 10. Medical cannabis business expenses (see instructions) | 10. | .00 |
| Enter the corporation's registration or sales tax number: _____ | | |
| 11. Adult use cannabis business expenses (see instructions) | 11. | .00 |
| Enter the corporation's registration or sales tax number: _____ | | |
| 12. 50% of apportionable subpart F income (see instructions)..... | 12. | .00 |
| 13. 80% of apportionable deferred foreign income (see instructions)..... | 13. | .00 |
| 14. 50% of Global Intangible Low-Taxed Income (GILTI) (see instructions) | 14. | .00 |
| 15. Northern Maine Transmission Corporation adjustment (see instructions) | 15. | .00 |
| 16. Gain on sale of multifamily affordable housing (see instructions)..... | 16. | .00 |
| 17. Seed capital investment tax credit (see instructions)..... | 17. | .00 |
| 18. Gains from sale of timberlands (see instructions)..... | 18. | .00 |
| 19. New markets capital investment credit (see instructions)..... | 19. | .00 |
| 20. Charitable contributions recapture (see instructions)..... | 20. | .00 |
| 21. Business interest deduction recapture (see instructions)..... | 21. | .00 |
| 22. Other (see instructions)..... | 22. | .00 |
| 23. Total subtractions (add lines 1 through 22 — enter here and on Form 1120ME, line 2)..... | 23. | .00 |

Schedule 1A
Form 1120ME
2024

Income Addition Modifications

See Form 1120ME instructions, page 10.
Enclose with your Form 1120ME.

For more information, visit maine.gov/revenue/tax-return-forms.



99

2400104

Name as shown on Form 1120ME

Federal EIN

DO NOT ENTER \$ signs, commas, or decimals.

ADDITIONS to federal taxable income.

| | | |
|---|-----|-----|
| 1. Income taxes (imposed by Maine or any other state, attach schedule)..... | 1. | .00 |
| 2. Participation exemption deduction add-back (see instructions)..... | 2. | .00 |
| 3. Foreign-derived intangible income (FDII) deduction add-back (see instructions) | 3. | .00 |
| 4. Global Intangible Low-Taxed Income (GILTI) deduction add-back (see instructions) | 4. | .00 |
| 5. Interest from state and municipal bonds (other than Maine)..... | 5. | .00 |
| 6. Net operating loss adjustment (see instructions)..... | 6. | .00 |
| 7. Maine capital investment credit bonus depreciation add-back (see instructions)..... | 7. | .00 |
| 8. Bonus depreciation add-back (see instructions)..... | 8. | .00 |
| 9. Losses, expenses, or deductions from ownership interest in financial institutions (see instructions)..... | 9. | .00 |
| 10. Wellness programs credit add-back (see instructions) | 10. | .00 |
| 11. Other (see instructions)..... | 11. | .00 |
| 12. Total additions (add lines 1 through 11 — enter here and on Form 1120ME, line 3)..... | 12. | .00 |



Name as shown on Form 1120ME

Federal EIN

Nonrefundable Credits

DO NOT ENTER \$ signs, commas, or decimals.

| | | | |
|-------|--|------------|-----|
| 1. a. | Seed capital investment tax credit..... | 1a. | .00 |
| b. | Employer-assisted day care credit and Quality child care investment credit carryforward..... | 1b. | .00 |
| c. | Employer-provided long-term care benefits credit carryforward..... | 1c. | .00 |
| d. | Pine Tree Development Zone regular tax credit..... | 1d. | .00 |
| e. | Maine capital investment credit..... | 1e. | .00 |
| f. | Research expense tax credit..... | 1f. | .00 |
| g. | Minimum tax credit (complete and attach the worksheet on page 2)..... | 1g. | .00 |
| h. | Employer family and medical leave credit..... | 1h. | .00 |
| i. | Employer support for volunteer firefighters and volunteer municipal emergency services persons tax credit..... | 1i. | .00 |
| j. | Wellness program credit..... | 1j. | .00 |
| k. | Certified visual media production credit | 1k. | .00 |
| l. | Biofuel commercial production tax credit..... | 1l. | .00 |
| m. | Renewable chemicals tax credit..... | 1m. | .00 |
| n. | Credit for disability income protection plans..... | 1n. | .00 |
| o. | Maine Life and Health Insurance Guaranty Association credit (see instructions) | 1o. | .00 |
| p. | Other nonrefundable credits (see instructions) | 1p. | .00 |
| q. | Total nonrefundable credits (add lines 1a through 1p)..... | 1q. | .00 |
| r. | Total tax (from Form 1120ME, line 6c) | 1r. | .00 |
| s. | Allowable nonrefundable credits (Enter amount from line 1q or line 1r, whichever is less. Also enter the sum of this line and line 2e below on Form 1120ME, line 7c)..... | 1s. | .00 |

Refundable Credits

| | | | |
|-------|--|------------|-----|
| 2. a. | Historic rehabilitation credit | 2a. | .00 |
| b. | New markets capital investment credit..... | 2b. | .00 |
| c. | Credit for affordable housing..... | 2c. | .00 |



2400106

Refundable Credits, continued

| | | |
|--|------------|-----|
| d. Other refundable credits (see instructions) | 2d. | .00 |
| e. Total refundable credits (add lines 2a through 2d. Also enter the sum of this line and line 1s above on Form 1120ME, line 7c) | 2e. | .00 |

2024 - Worksheet for Minimum Tax Credit - Schedule C, Line 1h

| | | |
|---|-----------|-----|
| 1. Minimum tax credit carryover from 2023 (2023 Worksheet for Minimum Tax Credit, Line 4)..... | 1. | .00 |
| 2. Regular income tax liability for 2024 (Form 1120ME, line 6a minus all Schedule C credits except minimum tax credit)..... | 2. | .00 |
| 3. Minimum tax credit: enter the smaller of line 1 or line 2 here and on Schedule C, line 1g..... | 3. | .00 |
| 4. Minimum tax credit carryover to 2025 (Line 1 minus line 3)..... | 4. | .00 |