2021

Maine Corporate Income Tax Return Form 1120ME

For calendar year 2021 or tax year

2021

to



2100100

	2021 Of tax your	MM DD YYYY	MM D	DD YYYY		2.00.00
		WWW DD 1111	IVIIVI L			Check if you filed federal Form 990-T, 1120-C, or 1120-H
Name	of Corporation				Federal Business Code	
Addre	ess				Federal Employer ID	Number State of Incorporation
City, 7	Town or Post Office		Sta	ate ZIP	Code Pare	ent Company Employer ID Number
Conta	act Person's First Name	Contact Person's La & payment requirements			Telephone I	Number
the et and the start of the sta	orations with total assets of \$5 million of ME electronically unless the taxpayer helectronic filing requirement because of Assessor. The request must be in writing umber of the corporation, a detailed expensip and when the taxpayer will be ableer requests to: Maine Revenue Service 12-9107. More information on Maine electronic filing ronic payment requirements (Rule 102),	r more as of the last day of has been granted a waiver, undue hardship may reque and must include the name planation of why filing electre to comply with the electroes, Corporate Tax Unit, P. ng requirements (Rule 104)	the tax year must Taxpayers unable est a waiver from , address, federal ronically poses a s onic filing requirem O. Box 9107 Aug) and information	e to meet the State employer significant nent. Mail usta, ME	Check the exempting income Check the any mentor owned of in a passibusines	his box if claiming an on from the Maine corporate tax pursuant to PL 86-272. his box if during the tax year mber of the combined group or disposed of an interest is-through entity doing is in Maine: If so, provide
	applicable boxes:	ge to <u></u>	<u>140</u> (001001	artaioo j.		pass-through entity (use a e sheet, if necessary):
1)	Initial return (2)	Amended (3) return	Combined re (Attach Form			
4)	Final return If final, indicate the final business dat	e , and ch	eck the appropriate	e box belov	v:	
(a)	Ceased doing (b) business in Maine	Dissolved (,	d, acquired ganized. Su	uccessor EIN:	
5)	Member of an affiliated (6) group filing a separate return	Based on a pro forma federal return				
4. F	ederal consolidated income (federal Fe	orm 1120, line 30)		A.		.00
3. To	entative total tax filed on federal Form	7004		В.		.00
	ederal taxable income (federal Form 11 mount from Form CR, line 11). If negative	•	•	1.		.00
Subtra	actions from federal taxable income:					
2. a.	Nontaxable interest			2a.		.00
b	. Foreign dividend gross-up			2b.		.00
C.	Work Opportunity Credit and Empow (attach federal Form 5884 and/or Form			2c.		.00
d	. Income not taxable under the Consti	tution of Maine or the Uni	ted States	2d.		.00
e.	Dividends from certain affiliated corp			0.		.00
	(limitations - see instructions)					
	Net operating loss recapture (see ins Income from ownership interest in p			2f.		.00
y	(subject to Maine franchise tax)			2g.		.00
h	. State income tax refunds (included in	line 1 above)		2h.		.00
						Continue on page 2

Subtr	actions, continued:	
i.	Bonus depreciation/Section 179 expense recapture (see instructions)2i.	.00
j.	Medical marijuana business expenses (see instructions)2j.	.00
k	50% of apportionable subpart F income (see instructions)	.00
1.	80% of apportionable deferred foreign income (see instructions)2l.	.00
n	n.50% of Global Intangible Low-Taxed Income (GILTI) (see instructions)	.00
n	Northern Maine Transmission Corporation adjustment (see instructions)	.00
0	Gain on sale of multifamily affordable housing (see instructions)	.00
р	. Seed capital investment tax credit (see instructions)	.00
q	Gains from sale of timberlands (see instructions)2q.	.00
r.	New markets capital investment credit (see instructions)	.00
s	Charitable contributions recapture (see instructions)2s.	.00
t.	Business interest deduction recapture (see instructions)	.00
u	Other 2u.	.00
٧	Total subtractions (add lines 2a through 2u)2v.	.00
Addit	ions to federal taxable income:	
3. a	Income taxes (imposed by Maine or any other state, attach schedule)	.00
b	Deferred foreign income (see instructions)	.00
С	Participation exemption deduction add-back (see instructions)3c.	.00
d	Foreign-derived intangible income (FDII) deduction add-back (see instructions) 3d.	.00
е	Global Intangible Low-Taxed Income (GILTI) deduction add-back (see instructions). 3e.	.00
f.	Interest from state and municipal bonds (other than Maine)	.00
g	Net operating loss adjustment (see instructions)	.00
h	Maine capital investment credit bonus depreciation add-back (see instructions) 3h.	.00
i.	Bonus depreciation add-back (see instructions)	.00
j.	Losses, expenses, or deductions from ownership interest in financial institutions (see instructions)	.00



ditions, continued:					
k. Wellness programs credit add-back (see instructions)	3k.				.00
I. Business meals deduction add-back (see instructions)	3l.				.00
m. Other	3m.				.00
n. Total additions (add lines 3a through 3m)	3n.				.00
Adjusted federal taxable income (line 1 minus line 2v plus line 3n)	4.				.00
c					
Gross tax (from rate schedule on page 8 of instructions)	5.				.00
a. Maine corporate income tax (from line 5 above or Schedule A, line 5)	6a.				.00
b. Credit recapture (see instructions)	6b.				.00
c. Total tax (add lines 6a and 6b)	6c.				.00
yments and credits:					
a. Maine estimated tax paid	7a.				.00
b. Extension payment (Form 1120EXT-ME)	7b.				.00
c. Tax credits (Schedule C, line 1u 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
k due or overpayment					
a. If line 6c is greater than line 7g, subtract line 7g from line 6c and enter the TAX DUE 8a.		.00	A ESA		
b. If line 7g is greater than line 6c subtract line 6c from line 7g and enter the OVERPAYMENT 8b.		.00	APVEZ D	maine.gov	wrevenue
Penalty for underpayment of estimated tax (attach Form 2220ME) Check here if Form 2220ME box 5a is checked	9.				.00
Pay in full with return. You may be required to make payments electronically.					.00
	I. Business meals deduction add-back (see instructions) m. Other	k. Wellness programs credit add-back (see instructions)			

Overpayment Carryforward/Refund								
11. OVERPAYMENT If the amount on line 8b the amount on line 9 from line 8b and com						.00		
12. Amount of line 11 to be:								
12a. CREDITED to next year's estimated tax		.00	12b. REFUNDED			.00		
REFUND DEPOSITED DIREC	TLY TO YOUR CHECKIN	IG ACCO	OUNT (\$20.000 or le	ss). SEE INSTR	UCTIONS.			
Check this box if this			•	·				
refund will go to an	12c. Routing Number			12d . Checking A	ACCOUNT NUMBER			
account outside the United States								
This return MUST BE ACCON	IPANIED BY a legible co	py of Fe	ederal Form 1120, pa	ages 1-6, for the	e same tax period.			
Please submit forms in t	the following order:							
	s 1 through 6 of Form 1							
	CR, if required, includi statements for the Ma	•						
	y of federal Form 1120							
	Paid Preparer Auth	orizatio	n (see instructions)					
Check "Yes" to allow the paid preparer to disc	uss this return with Maine	e Revenu	ue Services.	Yes (comp	olete the following).	No.		
Paid Preparer's Na	me		Paid Preparer's	Phone Number	Personal Ide	entification #		
Corporation President's Name			Social Securit	ty Number				
Treasurer's Name			Social Securit	ty Number				
0								
Company's Website Address								
Under penalties of perjury, I declare that I have belief they are true, correct and complete. Decl								
Date Officer's	Signature		Title		Social Security	Number		
Date Signature	and Address of Preparer	(Individu	ual or Firm)		Preparer's SSN	or PTIN		
If on	closing a check make sh	ock paval	ale to: If not enclos	sing a check,				
	closing a check, make che Treasurer, State of Maine	ok payal		TURN TO:				

<u>Treasurer, State of Maine</u> and MAIL WITH RETURN TO:

MAINE REVENUE SERVICES P.O. BOX 1065 AUGUSTA, ME 04332-1065

MAINE REVENUE SERVICES



P.O. BOX 1064 AUGUSTA, ME 04332-1064

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Schedule A - Apportionment of Tax



Federal EIN

2100104

- Do not complete Schedule A if 100% of the business activity is attributable to Maine. Note that Schedules C and D 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)		4.		.00
5.	Maine corporate income tax (line 4 x line 1 column Enter here and on Form 1120ME, line 6a)	c factor.	5.		.00
6.	What amount of line 3, column A is tangible persona	al property?	6.		.00

*Note: Total Sales must exclude income claimed as a deduction on Form 1120ME, lines 2e, 2k, 2l, and 2m. Other limitations apply. See Schedule A instructions for additional information.

Schedule B - Alternative Minimum Tax Repealed for tax years beginning on or after January 1, 2018

Schedule C - See page 6

Schedule D - Minimum Tax Credit

1.	а.	Minimum tax credit carryover from 2020 (2020 Form 1120ME, Schedule D, line 1d)1a.	.00
	b.	Regular income tax liability for 2021 (Form 1120ME, line 6a minus all Schedule C credits except minimum tax credit)	.00
	c.	Minimum tax credit: enter the smaller of line 1a or line 1b here and on Schedule C, line 1i 1c.	.00
	d.	Minimum tax credit carryover to 2022 (line 1a minus line 1c)1d.	.00

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Schedule C - Tax Credits (Attach worksheets. To get worksheets, see www.maine.gov/revenue/tax-return-forms)

Federal EIN

No	nref	undable Credits	2100103	
1.	a.	Seed capital investment tax credit	1a.	.00
	b.	Jobs and investment tax credit carryforward	1b.	.00
	c.	Employer-assisted day care credit and Quality child care investment credit carryforward	1c.	.00
	d.	Employer-provided long-term care benefits credit carryforward	1d.	.00
	e.	Pine Tree Development Zone regular tax credit	1e.	.00
	f.	Maine capital investment credit	1f.	.00
	g.	Research expense tax credit	1g.	.00
	h.	Super credit for substantially increased research and development carryforward	1h.	.00
	i.	Minimum tax credit (from Schedule D, line 1c)	1i.	.00
	j.	Employer family and medical leave credit	1j.	.00
	k.	Credit for educational opportunity	1k.	.00
	I.	Wellness program credit	11.	.00
	m.	Certified visual media production credit	1m.	.00
	n.	Biofuel commercial production tax credit	1n.	.00
	о.	Renewable chemicals tax credit	10.	.00
	p.	Credit for disability income protection plans	1p.	.00
	q.	Maine Life and Health Insurance Guaranty Association credit (see instructions)	1q.	.00
	r.	Other nonrefundable credits (see instructions)	1r.	.00
	s.	Total nonrefundable credits (add lines 1a through 1r)	1s.	.00
	t.	Total tax (from Form 1120ME, line 6c)	1t.	.00
	u.	Allowable nonrefundable credits (Enter amount from line 1s or 1t, whichever is less. Also enter the sum of this line and line 2e below on Form 1120ME, line 7c)	1u.	.00
Re	fund	able Credits		
2.	a.	Historic rehabilitation credit	2a.	.00
	b.	New markets capital investment credit	2b.	.00
	c.	Credit for affordable housing	2c.	.00
	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 1u above on Form 1120ME, line 7c)	2e.	.00



2100106

Schedule X - Amended Return Adjustments

a. IRS	
e. Other (attach explanation) (A) (B) (C) (C) (D) (D) Adjustment Correct Amount a. b. c. d. e. f. g. h. i. j. k. l. m. n. o.	
Correct Amount Corr	
b. c. d. e. f. g. h. i. j. k l. m. n.	ınt
c. d. e. f. g. h. i. j. k. l. m. o.	
c. d. e. f. g. h. i. j. k. l. m. o.	
d. e. f. g. h. i. j. k. l. m. n.	
e. f. g. h. i. j. k. l. m. n.	
f. g. h. i. j. k. l. m. n.	
g. h. i. j. k. l. m. n.	
h. i. j. k. l. m. n.	
i. j. k. l. m. n.	
i. j. k. l. m. n.	
j. k. l. m. n. o.	
k. I. m. n. o.	
1. m. n. o.	
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