Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

	For the	2008 calen	dar year,	or tax year b	eginning 4/0	1	, 2008	, and ending	3/3	31		, 2009	
В	Check if a									D Employ	er Identi	fication Number	
		ess change	Please use IRS label	NATURAL	RESOURCES	COUNCIL	OF MAIN	IE		01-	0270	690	
		e change	or print or type,	36 WADE	ST			ENT'S	nong -	E Telepho	one numt	per	
		_	See	AUGUSTA	, ME 04330-	6318	P .			(20)	7) 6	22-3101	
		il return	specific Instruc-			i	L)PY	j	(20	1) 0.	22 0101	
	\vdash	nination	tions.							^ -		. 4 207	E 4 2
Ċ	 	nded return							(-)) - (5 in -	G Gross r			
	Appli	ication pending		and address of pr				l l		group retur affiliates incl		===	
				AS C ABO		[• •	atlach a list.		tructions) Yes	No
<u>I</u>		exempt statu		***************************************)◀ (insert no.)	494	7(a)(1) or	527					
<u>J</u>	Webs	site:► Ww	W.NRCM							xemption no			
<u>K</u>	Type of	f organization:	X Corpora	ation Trust	Association	Other ►	L	Year of Formatio	n: 1959) Mis	State of le	egal domicile: ME	
Pa	art I	Summ											******
	1 B	riefly descri	ibe the org	ganization's i	mission or most s	significant a	ctivities: <u>E</u>	<u>NVIRONME</u>	NTAL A	<u>ADVOCA</u>	<u>.CY</u>		
ø	_												
Governance													
Ë					<u></u>								
ò		theck this bo			zation discontinue								0.0
ಳ					governing body (F						3 4		20
e e	i			_	nbers of the gove						5		20 34
Ξŧ					', line 2a) te if necessary).						6		0
Activities					enue from Part V						7a		0.
·	5				ome from Form 9						7b		0.
	, D	tot dimotato	u 5001100	Taxable in	21110 1101111 01111 0	00 11 111/0 0			1	rior Year		Current Y	
		\anteihutiana	and are	te (Dort VIII	, line 1h)					,328,8			,107.
e	\$		-		, line 2g)					, 320, 0	,50.	2,037	110/-
Revenue	1			•	mn (A), lines 3, 4					937,4	129	-788	,816.
æ	,				4), lines 5, 6d, 8d					15,5			,683.
					h 11 (must equal				3	,281,8			,974.
					Part IX, column (/					111,6	***********		/
	1				art IX, column (A								
	1				oloyee benefits (P					,481,4	180	1 605	,160.
e.S	15 5			-	=					, 101, 1	100.	1,000	, 100.
Expenses	16a ⊢				X, column (A), l								
×	ьт	otal fundrai	sing expe	nses (Part I)	K, column (D), lin	e 25) 🟲	5.	86,691.					
	17 C				A), lines 11a-11d					,199,3			,083.
	18 ⊤	otal expens	ses. Add li	nes 13-17 (r	nust equal Part IX	K, column (A	A), line 25).		2	,792,4		2,390	,243.
	19 R	Revenue les	s expense	s. Subtract I	ine 18 from line	12				489,4	108.	-1,105	,269.
7 0									Begin	ning of Y	rear	End of Y	ear
Net Assets or Fund Balances	20 T	otal assets	(Part X, I	ne 16)					6	,514,5	556.	4,755	,265.
4 P	21 T	otal liabiliti	es (Part X	, line 26)						252,0	069.	154	,798.
2 2	22	let assets o	r fund bal	ances. Subtr	act line 21 from l	ine 20	,		6	,262,4	187.	4,600	,467.
P	art II		ure Blo								--		
Inniidina		Under penalti	es of perjury,	I declare that	nave examined this return preparer (other than of	yrn, including ac	companying sch	nedules and state	ments, and	to the best	of my kn	owledge and belief	, it is
		true, correct,	and complete	e. Declaration of	preparer (otner than or	ticer) is based o	on an information	a or which prepar	er nas any ŧ	кпоwieage.			
Si	gn	>											
He	ere	Signature	of officer						Dat	te			
		► LISA	POHLM	ANN					DEPUT	Y DIR	ECTO:	R	
		Type or p	rint name an	d title.									
***********				01	01.			Date		neck if	Pr	eparer's identifying eé instructions)	, number
	aid	Preparer's		A STATE OF THE PARTY OF THE PAR	~ / Mart			10/15/09	se en	nployed P		•	
	e-	signature		10		•		. 113/02			P	00321474	
	rer's	Firm's name	or MAC	DONALD I	PAGE & CO L	LC	,						
Us		yours if self- employed), > 30 LONG CREEK DR					EIN ► 01-0242373						
U	nly	address, and ZIP + 4			LAND, ME 04	106						-774-5701	
Ma	v the IR				parer shown abov		tructions)					X Yes	No

Form 990 (2008) NATURAL RESOURCES COUNCIL OF MAINE	01-0270690	Page 2
Part III Statement of Program Service Accomplishments (see instructions)		
1 Briefly describe the organization's mission: ENVIRONMENTAL ADVOCACY		
	. بود. وبيد بيد بيد عليه المنا الله المنا الله المنا الله المنا الله الله الله الله الله الله	
2 Did the organization undertake any significant program services during the year which were not listed	on the prior	
Form 990 or 990-EZ?		X No
If 'Yes,' describe these new services on Schedule O.		
3 Did the organization cease conducting, or make significant changes in how it conducts, any program	services? Yes	X No
If 'Yes,' describe these changes on Schedule O.		
4 Describe the exempt purpose achievements for each of the organization's three largest program servi and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants expenses, and revenue, if any, for each program service reported.	ces by expenses. Section 50' and allocations to others, the	1(c)(3) e total
4a (Code:) (Expenses \$ 1,550,186. including grants of \$) (Revenue \$)
PROGRAMS TO UNITE AND COORDINATE THE EFFORTS FOR THE ADVANCEMEN	IT OF NATURAL RESOU	RCES
CONSERVATION AND RELATE THE ECONOMY OF MAINE TO ITS NATURAL RES		
ADDRESSED INCLUDE AIR AND WATER POLLUTION, RIVERS, LAND USE, PU	BLIC LANDS, ENERGY	_ <u>AND</u>
FORESTRY.		
	e some some some some brinds blifted from though bloods blood without without should somet	
	, une unit mit and unit unit unit unit unit unit unit unit	
4b (Code:) (Expenses \$ including grants of \$	_) (Revenue \$)
	- بين هيد بسد بسد بسد بسد بسد بسد بسد بدد	
	· · · · · · · · · · · · · · · · · · ·	
	. The time and mark mark and time the thirty and mak and and	panja junia spini
4c (Code: \$ including grants of \$) (Revenue \$	١
70 (00dd:		
~		

4d Other program services. (Describe in Schedule O.)	. 6	
(Expenses \$ including grants of \$) (Revenue 4e Total program service expenses ▶ \$ 1,550,186. (Must equal Part IX. Line 25. column		

\$

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Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete X Schedule A..... 2 X Is the organization required to complete Schedule B, Schedule of Contributors?..... 3 Χ Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II......... 4 X Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III. 5 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I...... 6 Χ Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II...... 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 X Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete 9 X Schedule D, Part IV..... Χ 10 Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V. Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, 11 Χ VII, VIII, IX, or X as applicable..... 11 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII. 12 X Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E..... 13 Χ Χ 14a Did the organization maintain an office, employees, or agents outside of the U.S.? 14a 14b Χ Χ 15 Χ 16 Χ Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I... 17 17 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. 18 Χ Χ 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III...... 19 Х 20 20 Χ 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II. 21 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III. 22 Χ Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Χ 23 Schedule J..... 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25...... Χ 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?..... 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I. 25 a Χ b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from Χ 25b a prior year? If 'Yes,' complete Schedule L, Part I. Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II. 26 Χ Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III..... Χ

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
á	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		X
i	Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		Х
(Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х

BAA Form **990** (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance			
		Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable 1a 21			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Χ	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	<u> </u>
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
b If 'Yes,' enter the name of the foreign country: ►			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c		
6a Did the organization solicit any contributions that were not tax deductible?	6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7 a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year	T		
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х

11 a a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against

10b

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?..... **b** If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.....

b Did the organization make any distribution to a donor, donor advisor, or related person?

Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12..... **b** Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities....

g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?.....

h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?.. Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

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7h

8

9a 9b

12 a

10 Section 501(c)(7) organizations. Enter:

11 Section 501(c)(12) organizations. Enter:

BAA

Form **990** (2008)

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Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

<u>>e</u>	ction A.	Governing Body and	vianagement					·	,
	For each	'Yes' response to lines 2-7b s, or changes in Schedule O	below, and for a 'No See instructions.	o' response to li	nes 8 or 9b below,	describe the circumstan	ces,	Yes	No
1	a Enter the	number of voting members	of the governing boo	dy		1a	20		
	b Enter the	number of voting members	that are independen	ıt		1 b	20		
2	2 Did any officer, o	officer, director, trustee, or ke irector, trustee or key employ	ey employee have a vee?	family relations	hip or a business re	efationship with any othe	r 2		Х
3	B Did the of officer	rganization delegate control s, directors or trustees, or ke	over management d y employees to a m	luties customaril anagement com	y performed by or ι pany or other perso	under the direct supervison?	ion 3		X
4	Did the o	rganization make any signific	cant changes to its o	organizational d	ocuments		4		X
		prior Form 990 was filed?					I .		
5		rganization become aware di			=				<u>X</u>
		organization have members					6		X
7	governin	organization have members body?	, ,					+	Х
	b Are any	decisions of the governing bo	dy subject to approv	val by members	, stockholders, or o	ther persons?	7b		_X
8	the follow	•	-	-					
	9	rning body?						+	X
_		nmittee with authority to act	-					+	X
5		organization have local chap					 		X
	and brar	loes the organization have w ches to ensure their operatio	ns are consistent wi	ith those of the	organization?		9b		
		py of the Form 990 provided in Schedule O the process, i					t <u>10</u>	Х	
	organiza	any officer, director or trustee ion's mailing address? If 'Ye	, or key employee li s,' provide the name	isted in Part VII es and addresse	, Section A, who ca es in Schedule O	innot be reached at the	11		Х
Se	ction B.	Policies							,
12	2 a Does the	organization have a written	conflict of interest p	olicy? If 'No,' go	o to line 13		12 a	Yes	No
		ers, directors or trustees, and ts?					12b	X	
	Schedul	organization regularly and c					12 c		Х
13		organization have a written						X	
14	Does the	organization have a written	document retention	and destruction	policy?	• • • • • • • • • • • • • • • • • • • •	14		X
15	Did the p persons,	rocess for determining comp comparability data, and cont	ensation of the follo emporaneous subst	wing persons in antiation of the	clude a review and deliberation and de	approval by independen cision:	t		
	-	nization's CEO, Executive Di		-					X
		icers of key employees of the					15b		X
	Describe	the process in Schedule O.	(see instructions)						
16		rganization invest in, contrib ring the year?							Х
	in ioint v	nas the organization adopted enture arrangements under a th respect to such arrangeme	policable federal tax	x law, and taker	i steps to safeguard	d the organization's exen	not James		
Se		Disclosures	•						
17	7 List the	tates with which a copy of th	is Form 990 is requi	ired to be filed	► NONE				
18	Section inspection	i104 requires an organization n. Indicate how you make the	to make its Forms ese available. Check	1023 (or 1024 i k all that apply.	applicable), 990, a	and 990-T (501(c)(3)s on	ly) availab	le for	public
	_		er's website	X Upon req					
19	Describe statemer	in Schedule O whether (and its available to the public.	if so, how) the orga SEE SCHEDULE	nization makes ≟ 0	its governing docur	ments, conflict of interes	t policy, a	nd fina	ncial
20		name, physical address, an YN THOMPSON 3 WADE			•		organizat	ion: 	

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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) or more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)			•	c)			(D)	(E)	(F)
Name and Title	Average hours					hat app		Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W·2/1099-MISC)	compensation from the organization and related organizations
EVERETT B CARSON										
EXECUTIVE DIREC	40			Χ				90,672.	0.	12,441.
ELEANOR KINNEY										
PRESIDENT	1	X		X				0.	0.	0.
BILL HOUSTON	_									
VICE PRESIDENT	1	X		X				0.	0.	0.
DIANE GUETHLEN										
SECRETARY	1	X		X				0.	0.	0.
RONDI_NELSON										
TREASURER	1	X		Х				0.	0.	0.
SANDRA ARMINGTON										
DIRECTOR	1	X						0.	0.	0.
LISA BISCEGLIA										
DIRECTOR	1	X						0.	0.	0.
CHRIS BOND										
DIRECTOR	11	X						0.	0.	0.
EDMUND CERVONE										
DIRECTOR	1	X						0.	0.	0.
LANI GRAHAM										
DIRECTOR	1	X						0.	0.	0.
CYNTHIA HYDE										٠
DIRECTOR	1 1	X				<u> </u>		. 0.	0.	0.
WARREN KESSLER	_									
DIRECTOR	1	X	<u> </u>					0.	0.	0.
ADAM LEE	_									
DIRECTOR	1	X	ļ					0.	0.	0.
LYNNE LEWIS										
DIRECTOR	1	X	<u> </u>			<u> </u>	<u> </u>	0.	0.	0.
ANTHONY MARPLE										
DIRECTOR	1	X			<u> </u>	ļ	<u> </u>	0.	0.	0.
KEN OLSON	_									
DIRECTOR	1	X			<u> </u>		ļ	0.	0.	0.
TONY OWENS	_									
DIRECTOR	1	X	1	1	1	}	1	0.	0.	0.

Form 990 (2008) TEEA0107L 04/24/09 BAA

Part VII Section A. Officers, Directors, Trus	tees, k	(еу	En	ıplo	уе	es,	an	d Highest Con	pensated Emp	loyees (cont.)
(A)	(B)	3) (c)						(D)	(E)	(F)
Name and Title	Average hours	1	tion (check				Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	Indiv or di	insti	Officer	Key	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
		Individual trustee or director	nstitutional trustee	Œ	key employee	est c	Ğ	(,, 2, 1033 1, 1123,	(1, 2, 1433 1, 1144)	organization and related
		trus	nal tr		loyee	omp				organizations
		ee	uste			ensa				TATAL CONTRACTOR OF THE CONTRA
			(5)			fed				
KATHY REMMEL										
DIRECTOR	1	X						0.	0.	0.
SARAH RHEAULT										
DIRECTOR	1	Х						0.	0.	0.
THOMAS TIETENBERG										
DIRECTOR	1	X						0.	0.	0.
STEVEN DIAZ										
DIRECTOR	1	X						0.	0.	0.
		ļ	ļ	ļ	ļ					
					 					
			-		-					
			 	 	┼					
			-		†					
	<u> </u>	<u></u>	<u> </u>	<u> </u>	<u></u>					
1 b Total							▶	90,672.	0.	12,441.
2 Total number of individuals (including those in 1a) v	who rec	eived	d mo	ore t	thar	\$10	0,00	00 in reportable c	ompensation from t	he
organization ► 0										TV N-
										Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or trust	ee, k	кеу	emp	oloye	ee, o	r hi	ghest compensate	d employee	. 3 X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t	han \$15	0,00	00?	lf 'Y	es'	com	plet	e Schedule J for s	uch	
individual										. 4 X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sci	compens	atio	n fro	om a	any	unre	late	d organization for	services	. 5 X
Section B. Independent Contractors	icauic c	101	300	ii pe	1130			, ,		. 3
Complete this table for your five highest compensate	ed inde	pend	dent	cor	ntrad	ctors	tha	t received more th	nan \$100,000 of	
compensation from the organization.								I		
(A)								(B), , ,	(C)
Name and business addres	55							Description of	or Services	Compensation
			•							
				~~~~						
2 Total number of independent contractors (including	those in	า 1)	who	rec	eive	ed m	ore	than \$100,000 in	66	

compensation from the organization ► 0

rai	<u>L VI</u>	II Statement of Re	everiue		(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribution All other contributions, gifts, gifts, gifts) amounts not included in Noncash contribus included in Total. Add lines 1a-1f	1b 1c 1d ons) 1e grants, and above 1f Ins 1a-1f: \$	, , , <i>, , ,</i> , , , , ,	2,057,107.			
PROGRAM SERVICE REVENUE	b c d e f	All other program servic	te revenue	Business Code				
	3 4 5	Investment income (inc other similar amounts). Income from investmen Royalties.	t of tax-exempt t	oond proceeds.	130,683.			130,683.
	b c	Gross Rents	(i) Real	(ii) Personal				
	7 a	Net rental income or (lo Gross amount from sales of assets other than inventory Less: cost or other basis	(i) Securities	(ii) Other				
	С	and sales expenses	-919,499.		-919,499.			-919,499.
OTHER REVENUE	b	Gross income from fund (not including. \$	d on line 1c) b					
	b	Gross income from gam See Part IV, line 19 Less: direct expenses. Net income or (loss) fro	a b					
	b	Gross sales of inventor and allowances Less: cost of goods sole Net income or (loss) from	i	2,006.	-1,996.	-1,996.		
		Miscellaneous Reven	INCOME	Business Code	18,679.	1,350.		18,679.
	е	All other revenue	d		18,679.			
	12	Total Revenue. Add line 10c, and 11e	es 1h, 2g, 3, 4, 5	5, 6d, 7d, 8c, 9c,	1,284,974.	-1,996.	0.	-770,137.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	An other organizations must con-	(A)	(B)	(C)	(D)
Do 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	103,113.	61,950.	20,509.	20,654.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	1,140,392.	694,735.	215,127.	230,530.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions).	99,418.	59,725.	19,776.	19,917.
9	Other employee benefits	171,507.	103,034.	34,115.	34,358.
10	Payroll taxes	90,730.	54,506.	18,048.	18,176.
	Fees for services (non-employees)			· ·	
	Management				
	Legal				
	Accounting	1			
	<b>1</b> Lobbying				
•	Prof fundraising svcs. See Part IV, In 17				,
1	Investment management fees			35,672.	
ę	g Other		105,707.	46,100.	65,206.
12	Advertising and promotion		20,141.		
13	Office expenses	48,041.	7,336.	32,629.	8,076.
14	Information technology				
15	Royalties			40 440	****
16	Occupancy		01 745	40,419.	1 702
17 18	Travel	23,834.	21,745.	306.	1,783.
19	Conferences, conventions, and meetings	31,336.	26,137.	2,609.	2,590.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	62,040.		62,040.	
23	Insurance	3,860.		3,860.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.).				
	a PRINTING AND PUBLICATIONS	113,407.	78,150.	969.	34,288.
	b POSTAGE AND SHIPPING	70,744.	30,546.	4,515.	35,683.
	EQUIPMENT MAINTENANCE	64,770.	22,358.	33,579.	8,833.
	d TĒLEPHONE	19,410.	13,639.	2,555.	3,216.
	e MISC AND OTHER EXPENSES	11,887.	1,340.	1,670.	8,877.
	f All other expenses	22,509.	249,137.	-321,132.	94,504.
25	Total functional expenses. Add lines 1 through 24f	2,390,243.	1,550,186.	253,366.	586,691.
26	Joint Costs. Check here ► X if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	71,523.	16,183.		55,340.
BA/					Form 990 (2008)

BAA

Form **990** (2008)

			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash — non-interest-bearing.	75,999.	1	166,139.
	2	Savings and temporary cash investments.	505,565.	2	324,858.
	3	Pledges and grants receivable, net	121,901.	3	148,470.
	4	Accounts receivable, net	4,099.	4	15,920.
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L	, , , , , , , , , , , , , , , , , , , ,	5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))			
		and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L.	A STATE OF THE STA	6	
A S	. 7	Notes and loans receivable, net		7	
ASSETS	8	Inventories for sale or use	9,892.	8	7,901.
T S	9	Prepaid expenses and deferred charges	10,238.	9	13,075.
	10 a	Land, buildings, and equipment: cost basis 10a 1,222,336.			
	t,	Less: accumulated depreciation. Complete Part VI of			
		Schedule D	725,313.	10 c	695,364.
	11	Investments — publicly-traded securities	4,927,465.	11	3,166,428.
	12	Investments – other securities. See Part IV, line 11	6,537.	12	123,931.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	127,547.	15	93,179.
	16	Total assets. Add lines 1 through 15 (must equal line 34).	6,514,556.	16	4,755,265.
	17	Accounts payable and accrued expenses	168,859.	17	135,566.
	18	Grants payable		18	
	19	Deferred revenue	73,561.	19	19,232.
L	20	Tax-exempt bond liabilities		20	
A B	21	Escrow account liability. Complete Part IV of Schedule D		21	
 	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
į		of Schedule L		22	
<b>E</b> 5	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable		24	
	25	Other liabilities. Complete Part X of Schedule D.	9,649.	25	154 700
	26	Total liabilities. Add lines 17 through 25.	252,069.	26	154,798.
Ĕ		Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29 and lines 33 and 34.			
_	27	Unrestricted net assets	5,824,909.	27	4,300,438.
ANNET	28	Temporarily restricted net assets.	252,578.	28	115,029.
Š	29	Permanently restricted net assets.	185,000.	29	185,000.
Q R	23	Organizations that do not follow SFAS 117, check here ► and complete	100,000.		100,000.
		lines 30 through 34.			
FUND	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
Ļ	32	Retained earnings, endowment, accumulated income, or other funds		32	
<b>B女し女之いEN</b>	33	Total net assets or fund balances.	6,262,487.	33	4,600,467.
Š	34	Total liabilities and net assets/fund balances	6,514,556.	34	4,755,265.
P	rt X			·	· · · · · · · · · · · · · · · · · · ·
					Yes No
1	Ac	counting method used to prepare the Form 990: $\ oxedsymbol{oxed}$ Cash $\ oxedsymbol{oxtX}$ Accrual $\ oxedsymbol{oxed}$	Other		
2	a We	ere the organization's financial statements compiled or reviewed by an independent	accountant?		
	b We	ere the organization's financial statements audited by an independent accountant?			2b X
	c If	Yes' to 2a or 2b, does the organization have a committee that assumes responsibility	ty for oversight of the a	udit,	2c V
		view, or compilation of its financial statements and selection of an independent accordance a result of a federal award, was the organization required to undergo an audit or at			
:		a result of a federal award, was the organization required to undergo an audit or at did Act and OMB Circular A-133?			
	b If	Yes,' did the organization undergo the required audit or audits?			
ВА	A				Form <b>990</b> (2008

# SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

Open to Public Inspection

Employer identification number

OMB No. 1545-0047

2008

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

NAT	URAL RESOURCES	COUNCIL OF MA	INE					01-02	270690	)		
Par	I Reason for Pu	blic Charity Statu	<b>s</b> (All organizations	must c	omple	te this	part.)	(see i	nstruct	ions)		
The c	rganization is not a pri	vate foundation becau	se it is: (Please check o	nly <b>one</b>	organiza	ation.)						
1	A church, conventi	on of churches or asso	ociation of churches desc	cribed in	section	170(b)	(1)(A)(i)					
2	A school described	d in section 170(b)(1)(A	A <b>)(ii).</b> (Attach Schedule I	Ξ.)								
3	A hospital or coop	erative hospital service	organization described	in section	on 170(l	5)(1)(A)(	iii <b>).</b> (At	tach Sch	nedule H	.)		
4	A medical research	h organization operate	d in conjunction with a h	ospital c	escribe	d in sec	tion 17	0(b)(1)(A	<b>A)(iii)</b> . En	ter the hos	pital's	
	name, city, and sta	ate:										
5	An organization op 170(b)(1)(A)(iv).	perated for the benefit Complete Part II.)	of a college or university	owned	or opera	ated by	a govern	nmental	unit des	cribed in s	ection	
6 7	An organization th		governmental unit descril substantial part of its su art II )					t or from	the gen	eral public	describ	ed
8			1 <b>70(b)(1)(A)(vi).</b> (Comple	te Part I	1.)							
9			more than 33-1/3 % of its			tributions	memb	archin fa	es and r	ross recein	te	
3	from activities relate	ed to its exempt function	is – subject to certain exce ss taxable income (less	eptions, a	and (2) n	o more	than 33-	1/3 % of	its suppo	ort from gros	SS	er
10		_	exclusively to test for pu		•		٠,,	. , .		,		
11	more publicly supr	ported organizations d	exclusively for the benef escribed in section 509(a ation and complete lines	a)(1) or:	section!	509(a)(2	ctions o 2). See	f, or car section	ry out th <b>509(a)(3</b>	e purposes ). Check th	of one ne box t	or hat
	a ☐ Type I	<b>b</b> Type II	c Type II	I — Fund	tionally	integra	led		d _	Type III-	Other	
е	By checking this b than foundation m 509(a)(2).	ox, I certify that the or anagers and other that	ganization is not controll n one or more publicly si	led direc upportec	tly or ind Lorganiz	directly zations o	by one lescribe	or more ed in sec	disqualit tion 509	fied persor (a)(1) or se	ns other ection	
f	If the organization		ermination from the IRS					e III supp	orting o	rganization	l, 	
g	Since August 17, 2	2006, has the organiza	tion accepted any gift o	r contrib	ution fro	m any	of the fo	llowing	persons'	?		
_	•										Yes	No
	(i) a person who below, the go	o directly or indirectly overning body of the si	controls, either alone or upported organization?.	together	with pe	rsons de	escribec	l in (ii) a	ınd (iii)	11 g (i)		
	(ii) a family mer	nber of a person desc	ribed in (i) above?							11 g (ii)		
	(iii) a 35% contro	olled entity of a person	described in (i) or (ii) al	bove?						11 g (iii)		
h	Provide the following	ng information about t	he organizations the org	anizatio	n suppor	rts.						
	(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat (i) lister gove	is the ion in col. in your inning ment?	the organ	ou notify ization in (i) of upport?	(vi) I organizati (i) organiz U.S	s the ion in col. zed in the S.?	(vii) Amoun	t of Suppo	ərt
				Yes	No	Yes	No	Yes	No			
	***************************************											
						fis only						
Total												

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	(Complete only if you check	ed the box on line	5, 7, or 8 of Part	(1.)							
Sec	tion A. Public Support					,					
begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total				
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	2,325,967.	2,383,128.	2,905,198.	2,328,858.	2,057,107.	12,000,258.				
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.				
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						0.				
4	Total. Add lines 1-3	2,325,967.	2,383,128.	2,905,198.	2,328,858.	2,057,107.	12,000,258.				
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						385,794.				
6	Public support. Subtract line 5 from line 4						11,614,464.				
Sec	tion B. Total Support				Ţ						
Cale begi	ndar year (or fiscal year nning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total				
7	Amounts from line 4	2,325,967.	2,383,128.	2,905,198.	2,328,858.	2,057,107.	12,000,258.				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	85,335.	118,759.	207,205.	350,821.	130,683.	892,803.				
9	Net income form unrelated business activities, whether or not the business is regularly carried on						0.				
10	Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV.). SEE. PART. IV	5,088.	9,107.	1,707.	19,744.	18,679.	54,325.				
	Total support. Add lines 7 through 10						12,947,386.				
12	Gross receipts from related activ	vities, etc. (see in:	structions)				34,606.				
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth,	or fifth tax year as	s a section 501(c)	(3)				
Sec	tion C. Computation of Pu	blic Support P	'ercentage								
14 15	Public support percentage for 20 Public support percentage for 20						89.7 <b>%</b> 90.6 %				
16 a	<b>33-1/3 support test – 2008.</b> If th and <b>stop here.</b> The organization	e organization dic qualifies as a pul	l not check the bo blicly supported o	ox on line 13, and rganization	d the line 14 is 33	-1/3 % or more, c	heck this box				
ŀ	b 33-1/3 support test — 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.										
17 a	17a 10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization										
	<ul> <li>b 10%-facts-and-circumstances test — 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization</li></ul>										
				1 1 1							

	32.5						
Parl	III Support Schedule fo			in Section 509	(a)(2)		
	(Complete only if you ched	cked the box on li	ne 9 of Part I.)				
<u>Sect</u>	ion A. Public Support				1		· · · · · · · · · · · · · · · · · · ·
	dar year (or fiscal yr beginning in)►	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	<b>(e)</b> 2008	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.').						
	Gross receipts from						
2	admissions, merchandise sold						
	or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt						
	purpose						
	not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5						
7 a	Amounts included on lines 1, 2, 3 received from disqualified						
	persons						
	the total of lines 9, 10c, 11, and 12 for the year or \$5,000.						
_	Add lines 7a and 7b						
8	Public support (Subtract line						
	7c from line 6.)						
	tion B. Total Support					T	
Caler	ndar year (or fiscal yr beginning in) 🟲	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
_	Add lines 10a and 10b				· · · · · · · · · · · · · · · · · · ·		
_	Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).						
	Total support. (add Ins 9, 10c, 11, and 12.)			CD (0) 15 (5) (4)			***************************************
	First five years. If the Form 990 organization, check this box and	I stop here		ond, third, fourth,	or fifth tax year a	s a section 501(c)(3	) <b>&gt;</b>
Sec	tion C. Computation of Pu						
15	Public support percentage for 20					P	%
	Public support percentage from						%
Sec	tion D. Computation of Inv	.,					
17	Investment income percentage t						<u>%</u>
18	Investment income percentage f					\	%%
10 ~	22.1/2 cupport tacts - 2008 If the	organization did not	t check the box on	line 14 and line 14	5 is more than 33-17	3% and line 17 is not	

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. . . . . .

more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ...... b 33-1/3 support tests — 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . . ▶

Schedule A	(Form	990 or	990-E	Z) 2008	NATURA	L RES	OURCES	COUNCI	L OF	MAINE	01-0270690	Page <b>4</b>
Part IV	<b>Supp</b> Part	olemei II, line	n <b>tal l</b> i e 17a	n <b>forma</b> or 17b	<b>tion.</b> Com ; or Part I	plete th II, line	nis part 12. Pro	to provid vide any	le the other	explanati additiona	on required by Part II, I information. (see inst	line 10; tructions)
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2008

## SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

### NATURAL RESOURCES COUNCIL OF MAINE

01-0270690

PART II. LINE	10 - OTHE	ER INCOME
---------------	-----------	-----------

NATURE AND SOURCE	2008	2007	2006	2005	2004	
MISCELLANEOUS INCOME	18,679.	19,744.	1,707.	9,107.	5,088.	
TOTAL	\$ 18,679.	\$ 19,744.	\$ 1,707.	\$ 9,107.	\$ 5,088.	

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

► Attach to Form 990, 990-EZ and 990-PF ► See separate instructions. OMB No. 1545-0047

2008

Name of the organization		Employer identification number
NATURAL RESOURCES COUNCIL OF	MAINE	01-0270690
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust <b>not</b> treate 527 political organization	ed as a private foundation
Form 990-PF	501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as 501(c)(3) taxable private foundation	s a private foundation
Check if your organization is covered by the <b>General</b> boxes for both the General Rule and a Special	Rule or a Special Rule. (Note: Only a section 501(c)(7), (8), (8), (1) Rule. See instructions.)	or (10) organization can check
General Rule —  For organizations filing Form 990, 990-EZ, contributor. (Complete Parts I and II.)	or 990-PF that received, during the year, \$5,000 or m	nore (in money or property) from any one
Special Rules —		
X For a section 501(c)(3) organization filing 509(a)(1)/170(b)(1)(A)(vi) and received from an amount on Form 990, Part VIII, line 1h or 3	Form 990, or Form 990-EZ, that met the 33-1/3% supply one contributor, during the year, a contribution of the grea 2% of the amount on Form 990-EZ, line 1. Complete F	oort test of the regulations under sections ater of (1) \$5,000 or (2) 2% of the Parts I and II.
aggregate contributions or beguests of mo	zation filing Form 990, or Form 990-EZ, that received re than \$1,000 for use exclusively for religious, charita hildren or animals. Complete Parts I, II, and III.	from any one contributor, during the year, able, scientific, literary, or educational
some contributions for use <i>exclusively</i> for \$1,000, (If this box is checked, enter here	zation filing Form 990, or Form 990-EZ, that received religious, charitable, etc, purposes, but these contributhe total contributions that were received during the yearts unless the <b>General Rule</b> applies to this organiza	itions did not aggregate to more than ear for an exclusively religious, charitable.
religious, charitable, etc, contributions of \$	5,000 or more during the year.)	
990-PF) but they must answer 'No' on Part IV	y the General Rule and/or the Special Rules do not file , line 2 of their Form 990, or check the box in the head neet the filing requirements of Schedule B (Form 990,	ding of their Form 990-EZ, or on line 2 of

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

#### **SCHEDULE C** (Form 990 or 990-EZ)

**Political Campaign and Lobbying Activities** 

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► To be completed by organizations described below.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: complete Part I-A only.

#### If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

		,' to Form 990, Part IV, line 5 (Proxy Tax), to rganizations: Complete Part III.	hen		
	of organization			Employer identifica	tion number
NAT	TURAL RESOURCES COU	NCIL OF MAINE		01-0270690	0
Pai	t I-A To be completed	<b>by all organizations exempt under</b> ns for Schedule C for details.	section 501(c) a	nd section 527 org	anizations.
1	Provide a description of the	organization's direct and indirect political c	ampaign activities in	Part IV.	
2	Political expenditures			► \$ _.	
3	Volunteer hours				
Pai	See the instruction	<b>by all organizations exempt under</b> ns for Schedule C for details.			
1	Enter the amount of any exc	ise tax incurred by the organization under:	section 4955	▶\$	
2	Enter the amount of any exc	sise tax incurred by organization managers	under section 4955	▶\$	
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes X No
4:	a Was a correction made?				Yes No
	b If 'Yes,' describe in Part IV.				
Pa	rt I-C To be completed See the instruction	<b>by all organizations exempt under</b> ns for Schedule C for details.	section 501(c), e	except section 501	(c)(3).
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	n activities 🟲 \$	
2	Enter the amount of the filin function activities	g organization's funds contributed to other	organizations for sect	tion 527 exempt ► \$	
3	Total of direct and indirect e Form 1120-POL, line 17b	xempt function expenditures. Add lines 1 a	nd 2 and enter here a	and on ▶\$	
4		e Form 1120-POL for this year?			
5	made. Enter the amount pai	and employer identification number (EIN) dand indicate if the amount was paid from directly delivered to a separate political orginal space is needed, provide information in	the filing organizatio anization, such as a s	n's funds or were politic	al contributions
	(a) Name	<b>(b)</b> Address	(c) EIN	(d) Amount paid from filing organization's own internal funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
***************************************					
***************************************	A 100				

Part II-A To be completed by organunder section 501(h)). Se	nizations exempt under section 501(c)(3) to the instructions for Schedule C for details	that filed Form 5768 S.	(election
A Check ► if the filing organization b	elongs to an affiliated group.		
B Check ► if the filing organization of	hecked box A and 'limited control' provisions apply.		
Limits on Lobb (The term 'expenditures' m	ying Expenditures — leans amounts paid or incurred.)	<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals
1 a Total lobbying expenditures to influence	public opinion (grass roots lobbying)	2,127.	
	a legislative body (direct lobbying)	27,933.	
c Total lobbying expenditures (add lines 1	a and 1b)	30,060.	0.
<b>d</b> Other exempt purpose expenditures		2,360,183.	•
e Total exempt purpose expenditures (add	lines 1c and 1d)	2,390,243.	0.
f Lobbying nontaxable amount. Enter the both columns.	amount from the following table in	269,512.	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25	% of line 1f)	67,378.	0.
h Subtract line 1g from line 1a. Enter -0- i	f line g is more than line a	0.	0.
i Subtract line 1f from line 1c, Enter -0- if	line f is more than fine c	0.	0.
j If there is an amount other than zero on section 4911 tax for this year?	either line 1h or line 1i, did the organization file For	m 4720 reporting	Yes X No
40	4-Year Averaging Period Under Section 501(h)		

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	<b>(d)</b> 2008	(e) Total					
2a Lobbying non-taxable amount	254,389.	273,586.	289,624.	269,512.	1,087,111.					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					1,630,667.					
c Total lobbying expenditures	65,677.	41,676.	79,888.	30,060.	217,301.					
d Grassroots non-taxable amount	63,597.	68,397.	72,406.	67,378.	271,778.					
e Grassroots ceiling amount (150% of line 2d, column (e))					407,667.					
f Grassroots lobbying expenditures	4,714.	874.	2,877.	2,127.	10,592.					

BAA

Schedule C (Form 990 or 990-EZ) 2008

Part II-B To be completed b	y organizations exem	npt under section	n 501(c)(3) that	t have NOT	filed Form 576	<u>8</u>
(election under se	ction 501(h)). See the	instructions for S	Schedule C for	details.		

	(2	3)	(b)		
	Yes	No	Amount		
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
<b>a</b> Volunteers?					
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?					
i Other activities? If 'Yes,' describe in Part IV			***************************************		
i Total lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		, A. A. C.			
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912			9000 m 12002 h 1500 m 1 6 5 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7		
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(6). See the instructions for Schedule C for details.	n 50	1(c)(	5), or section		
			Yes No		
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Part III-B To be completed by all organizations exempt under section 501(c)(4), sectio 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part II answered 'Yes.' See Schedule C Instructions for details.	I-A, (	ques	b), or section tion 3 is		
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year		2a			
<b>b</b> Carryover from last year		2b			
c Total		2с			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic expenditure next year?	cal .	4			
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		5			
Part IV Supplemental Information					
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Also, complete this part for any additional information.	d Part	II-B,	line 1i.		
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Also, complete this part for any additional information.					

Schedule C (Form 990 or 990-EZ) 2008 NATURAL RESOURCES COUNCIL OF MAINE	01-0270690	Page 4
Part IV Supplemental Information (continued)		
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***************************************		

#### SCHEDULE D (Form 990)

#### **Supplemental Financial Statements**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Name of the organization Employer Identification number NATURAL RESOURCES COUNCIL OF MAINE 01-0270690 Part Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 2 Aggregate contributions to (during year)..... Aggregate grants from (during year)...... 4 Aggregate value at end of year ..... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit??.... Part II Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year a Total number of conservation easements...... 2a b Total acreage restricted by conservation easements..... 2 hc Number of conservation easements on a certified historic structure included in (a) ...... 2c 2d d Number of conservation easements included in (c) acquired after 8/17/06..... 3 Number of conservation easements modified, transferred, refeased, extinguished, or terminated by the organization during the taxable 4 Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?..... In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1.....

b Assets included in Form 990, Part X.....

Part III Organizations Maintai	ning Collec	tions	or Art, Histo	rical	reasures, or	Other Similar As	sets (C	опшпи	ea)
3 Using the organization's accession that apply):	n and other re	cords,	check any of the	e follow	ing that are a sig	mificant use of its col	lection it	ems (ch	neck all
a Public exhibition			d Loan o	or excha	ange programs				
<b>b</b> Scholarly research			e 🗌 Other				****		
c Preservation for future genera	ations								
4 Provide a description of the organ Part XIV.	nization's colle	ctions a	and explain how	they fo	urther the organiz	zation's exempt purpo	se in		
5 During the year, did the organizar assets to be sold to raise funds re	tion solicit or re ather than to b	eceive o	donations of art, tained as part o	, histor f the or	cal treasures, or ganization's colle	other similar ection?	Yes		No
Part IV Trust, Escrow and Cu IV, line 9, or reported	stodial Arra an amount	angem on Fo	n <b>ents</b> Comple rm 990, Part	ete if o	organization a e 21.	nswered 'Yes' to	Form 9	190, Pa	art 
1a Is the organization an agent, trus included on Form 990, Part X?						r assets not	Yes		No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV an	nd comp	olete the following	ng table	e:		Amoun	+	
c Beginning balance						. 1c	Allioun	1	
<b>d</b> Additions during the year							·		
e Distributions during the year									
f Ending balance						}			
2a Did the organization include an a						·	Yes		No
<b>b</b> If 'Yes,' explain the arrangement		11 550, 1	an A, me Zii.		* * * * * * * * * * * * * * * * * * * *		Lies	L	740
Part V Endowment Funds Con		naniza	tion answere	ad 'Va	s' to Form 991	) Part IV line 10			
Lindowitte it i unus Coi	(a) Current v	***************************************	(b) Prior year		(c) Two years back			Four years	e hark
1a Beginning of year balance	185,		(b) Filor year		(C) Two years back	(d) Three years Dack	(6)	TODI YEAR	a Dack
<b>b</b> Contributions	100,	000.			61/64Wes /169F02/35F7/65	17.45 (E. 16.5 (E. 16			
· · · · · · · · · · · · · · · · · · ·									SIL SIL SIL
c Investment earnings or losses				-+			+		
d Grants or scholarships				-+					6 40 0h
e Other expenditures for facilities and programs									
f Administrative expenses				-+					
g End of year balance									
2 Provide the estimated percentage	-		nce held as:						
<b>a</b> Board designated or quasi-endow			8						
<b>b</b> Permanent endowment ►									
c Term endowment ►									
3a Are there endowment funds not i organization by:	n the possessi	ion of th	ne organization	that are	e held and admin	istered for the		Yes	No
(i) unrelated organizations						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3a(i)		Х
(ii) related organizations							. 3a(ii)		Х
<b>b</b> If 'Yes' to 3a(ii), are the related of									Х
4 Describe in Part XIV the intended	_								
Part VI Investments-Land, B	<del></del>					line 10.			
Description of investment		(a) Cost	or other basis	(b) (	Cost or other sis (other)	(c) Depreciation	(d)	Book Va	alue
<b>1a</b> Land	. ,				107,510.			107.	,510.
<b>b</b> Buildings	ţ				834,106.	346,989.			,117.
c Leasehold improvements		***************************************							
d Equipment					280,720.	179,983.		100.	,737.
e Other	F				,				
Total. Add lines 1a-1e (Column (d) she		m 990.	Part X, column	(B). Iir	e 10(c).)		-	695.	,364.
BAA	,						dule <b>D</b> (f	***************************************	

Federal Income Taxes

Form 990, Part X, col. (B) line 25)

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

01-0270690

Page 4

Schedule D (Form 990) 2008 NATURAL RESOURCES COUNCIL OF MAINE

Schedule <b>D</b> (Form 990) 2008	Page <b>5</b>
Part XIV Supplemental Information (continued)	
<del></del>	
	·

2008 SCHEDULE D, PART XIV - SUPPLEMENTAL INFORMAT	ONPAGE 6
NATURAL RESOURCES COUNCIL OF MAINE	01-0270690
SCHEDULE D, PART XI, LINE 8 OTHER CHANGES IN NET ASSETS OR FUND BALANCES  CHANGE IN VALUE OF FUTURE INTERESTS	-34,367. -34,367.
SCHEDULE D, PART XII, LINE 2D OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990  COST OF GOODS SOLD	2,006. 2,006.
SCHEDULE D, PART XII, LINE 4B OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S  CHANGE IN VALUE FUTURE INTERESTS.  TOTAL \$ \$	34,367. 34,367.
SCHEDULE D, PART XIII, LINE 2D OTHER EXPENSES AND LOSSES PER AUDITED F/S  COST OF GOODS SOLD	2,006. 2,006.

#### SCHEDULE M (Form 990)

**Non-Cash Contributions** 

► To be completed by organizations that answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NATURAL RESOURCES COUNCIL OF MAINE

Employer identification number

01-0270690

Par	t I Types of Property					
		(a)	(b)	(c)	(d)	
		Check if applicable	Number of Contributions	Revenues reported on Form 990,	Method of determining revenues	
				Part VIII, line 1g		
1	Art—Works of art					
2	Art-Historical treasures					
3	Art—Fractional interests					
4	Books and publications.					
5	Clothing and household goods	F				
6	Cars and other vehicles			,,,,	A.4.	
7	Boats and planes.					
8	Intellectual property					
9	Securities—Publicly traded		11	145,458.	***************************************	
10	Securities—Closely held stock					
11	Securities-Partnership, LLC, or trust interests					
12	Securities-Miscellaneous					
13	Qualified conservation contribution (historic structures)					
14	Qualified conservation contribution (other)					
15	Real estate—Residential					
16	Real estate—Commercial.					
17	Real estate-Other					
18	Collectibles					
19	Food inventory					
20	Drugs and medical supplies					
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts					
25	Other • ()				***************************************	
26	Other ► ()					
27	Other ► ()					
_28	Other ► ( )					
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Done	on during th	e tax year for contributi	ons for which the		
	organization completed Form 8283, Part IV, Done	e Acknowle	dgement		29	
					Yes No	
30 a	During the year, did the organization receive by co	242 4 9 21				
	hold for at least three years from the date of the I			•		
	purposes for the entire holding period?				30 a   X	
	<b>b</b> If 'Yes,' describe the arrangement in Part II.					
	31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X					
<b>3</b> 2 <i>a</i>	32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?					
þ	<b>b</b> If 'Yes,' describe in Part II.					
33	3 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.					

Schedule	M (Form 990) 2008	NATURAL	RESOURCES	COUNCIL OF	MAINE	01-0270690	Page 2
Part II	Supplemental I and 33. Also co	<b>nformation.</b> mplete this	. Complete the part for any	nis part to prov additional info	ide the information rmation.	required by Part I, lines 30	b, 32b,
					<b></b>		
					<del></del>		
							·
		beauty ways hoped while which distributions			<del> </del>		
	- 1004 AND 1004 STOP THE STATE AND ADDRESS						
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			عف فیست پلیپ فیسپ بهها علیه علیه				
			the banks toler bound word were well and				·
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#### SCHEDULE O (Form 990)

## Supplemental Information to Form 990

OMB No. 1545-0047

Employer identification number

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

NATURAL RESOURCES COUNCIL OF MAINE	01-0270690
FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS	
THE 990 IS REVIEWED BY THE TREASURER, DEPUTY DIRECTOR A	AND DIRECTOR OF FINANCE
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PL	JBLICLY AVAILABLE
FINANCIAL STATEMENT IS AVAILABLE ON OUR WEBSITE	
	~