Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Open to Public Inspection

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form990 for instructions and the latest information. , 20 19 2018, and ending 03/31 For the 2018 calendar year, or tax year beginning 04/01 D Employer identification number Check if applicable: C Name of organization NATURAL RESOURCES COUNCIL OF MAINE INC 01-0270690 Doing business as Address change Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Name change 207-622-3101 3 WADE STREET Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/lerminated 8,540,897 G Gross receipts \$ AUGUSTA, ME, 04330 Amended return H(a) Is this a group return for subordinates? 🗌 Yes 🗹 No F Name and address of principal officer: Lisa Pohlmann Application pending H(b) Are all subordinates included? 🔲 Yes 🔲 No 3 Wade Street, Augusta, ME 04330 If "No," attach a list, (see Instructions)) < (insert no.) ☐ 4947(a)(1) or ☐ 527 **2** 501(6)(3) 501(c) (Tax-exempt status: H(c) Group exemption number ▶ WWW.nrcm.org Website: ▶ Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ 1959 M State of legal domicile: L Year of fermation: Part I Summary Briefly describe the organization's mission or most significant activities: The Natural Resources Council of Maine (NRCM) is a homegrown organization founded in 1959 by Maine people and local organizations working to protect Maine's Aliagash Activities & Governance (Continued on Schedule O, Statement 1) Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets. 22 Number of voting members of the governing body (Part VI, line 1a) Number of Independent voting members of the governing body (Part VI, line 1b) 4 22 5 37 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 6 40 Total number of volunteers (estimate if necessary) 7a 0 Total unrelated business revenue from Part VIII, column (C), line 12 7b 0 Net unrelated business taxable income from Form 990-T, line 38 Current Year 5,881,596 3,567,434 Contributions and grants (Part VIII, line 1h) . . . Revenue Ö Program service revenue (Part VIII, line 2g) 401,251 252,036 Investment Income (Part VIII, column (A), lines 3, 4, and 7d) 10 32,174 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 28,730 11 6,315,021 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,848,200 12 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 13 O Benefits paid to or for members (Part IX, column (A), line 4) 0 14 1,994,570 2,231,323 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 Expenses 90,000 185,005 Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundralsing expenses (Part IX, column (D), line 25) 785,947 793,000 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 3,209,328 2,870,517 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 3,105,693 977,683 19 Revenue less expenses, Subtract line 18 from line 12 . Beginning of Current Year End of Year 古名 9,033,676 12,075,077 Total assets (Part X, line 16) 20 308,361 280,905 21 Total liabilities (Part X, line 26) . Net assets or fund balances. Subtract line 21 from line 20 8,752,771 11,766,716 22 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here LISA POHLMANN, Chief Executive Officer Type or print name and title Date Preparer's signature Print/Type preparer's name Check I If Paid P00219457 Mc Guan Preparer Fimi's EIN > 0[-0523282 · Berry Dunn Mc Neil + Park Use Only Phone no. (207 04164-1100

Firm's address > POBOX 100, Portland, ME

Page 2
🗆
generations. lic about the
Yes ☑ No
]Yes ☑ No
s measured by tions to others,
0) nizing re at the advancing a umber of ate and re's new business lar energy, I for the state idors, and
0) ng limits for a impact Maine artment of
0) dates and website. The website,

Form 990) (2018) rage Z
Part I	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Founded in 1959 by Maine citizens, the Natural Resources Council of Maine (NRCM) is the state's leading non-profit environmental organization. Our mission is to protect, restore and conserve Maine's environment, now and for future generations.
	We use science, outreach, and advocacy to educate and engage our members, supporters, policy makers and the public about the
	(Continued on Schedule O, Statement 2)
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	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?
	If "Yes," describe these changes on Schedule O.
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 501,904 including grants of \$ 0) (Revenue \$ 0)
70	Climate & Clean Energy: NRCM seeks to secure a clean energy future where Maine reduces climate pollution by maximizing
	energy efficiency, homegrown renewable energy, and electric transportation. Civic engagement and public outreach are at the
	center of our strategies to boost clean energy and protect Maine's clean air and economy. A top priority this year was advancing a
	comprehensive solar policy for Maine that would reinstate net metering for residential customers, lift the cap on the number of
	participants in a community solar project, and eliminate gross metering, an unfair tax on the energy solar users generate and
	consume themselves. Although these policies were blocked in 2018 by the veto of former Governor Paul LePage, Maine's new
	Governor Janet Mills has made clean energy a centerpiece of her first term. This spring NRCM led the grassroots and business
	support that helped enact these policy improvements. Now more people than ever will be able to take advantage of solar energy,
	including low income communities, and the state will host more homegrown clean energy jobs. NRCM also advocated for the state
	to spend \$3.5 million in Volkswagen (VW) settlement funds on electric vehicle (EV) charging stations along travel corridors, and surveyed 1,300 registered EV owners in Maine, replicating a survey we did in late 2014. The state adopted some of our
	(Continued on Schedule O, Statement 3)
4b	(Code:) (Expenses \$ 388,418 including grants of \$ 0) (Revenue \$ 0)
	State House/Emerging Issues: NRCM is Maine's top environmental watchdog. Performing within the allowable lobbying limits for a
	501(c)3. NRCM monitors issues related to each of our programs as well as emerging environmental issues that could impact
	Maine's air, forests, waters, wildlife and community health. Additionally, we represent environmental interests at the Maine
	Legislature, and before state agencies responsible for managing our state's natural resources. These include the Department of
	Environmental Protection, the Land Use Planning Commission, and the Public Utilities Commission.
4c	(Code:) (Expenses \$ 385,290 including grants of \$ 0) (Revenue \$ 0)
	Communications: NRCM communicates with our members, supporters, policy makers, and the public using email updates and
	calls to action, community meetings and events, single issue reports, direct mail, radio, videos, social media, and our website. The
	wide range of tools we regularly use advances our mission and helps to meet the goals of our issue areas. The NRCW website,
	www.nrcm.org, is an especially critical tool to reach people with facts about our work. During the period April 1, 2018 - March 31,
	2019 a total of 135,005 people visited our website. Our printed newsletter, Maine Environment is also extremely popular, and
	features updates on current environmental issues, upcoming special events, and a column by NRCM Chief Executive Officer Lisa
	Pohlmann. Social media is an ever-expanding tool to engage our members and the public. NRCM's Facebook page is our most popular social media tool to share information and engage the public. In last year alone, NRCM's Facebook has grown from just
	over 11,000 followers to an active community of more than 15,300 people. Linked-In, instagram and Twitter have also seen
	significant growth in recent years. As a result of these tools and our efforts to continually improve our communications, we have
	developed a loyal network of supporters and activists in Maine and around the country.
	ACTORDAGE A TO MI HOLIVALINO I CARPACITO AND THE STATE OF
4d	Other program services (Describe in Schedule O.) See Schedule O, Statement 4
	(Expenses \$ 1,023,826 including grants of \$ 0) (Revenue \$ 0)
4e	Total program service expenses ▶ 2,299,438

Part IV	Checklist		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	٧	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	7	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		·
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		~	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4	•	
6	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	5		✓
7	"Yes," complete Schedule D, Part I	6		'
8	the environment, historic land areas, or historic structures? <i>If</i> "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"	7		~
	complete Schedule D, Part III	8		•
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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 Schedule D, Part IV	9_		V
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	V	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	,	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	,	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X	11f		_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	,	
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		<u>v</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			<u> </u>
-	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		,
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	,	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	,	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	-	
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	\dashv	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		-	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	200	<u> </u>

Part I	Checklist of Required Schedules (continued)		V	NI-
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		<u> </u>
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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<u> </u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		~
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		V
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	00-		_
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		~
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	V	~
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	2.5	Ť	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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	1	v
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		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	v	_
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	V	+
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		~
3 6	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		V
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		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	1	
Part	Statements Regarding Other IRS Filings and Tax Compliance		_	, 17
	Check if Schedule O contains a response or note to any line in this Part V	<u>· · · · </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 2	5	100	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	<u> 1c</u>		_ 0 (2018
		Fo	rm ฮฮ	(2017) ب

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)	****				5-
					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				3.99	
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	37			
b	If at least one is reported on line 2a, did the organization file all required federal employment	tax re	turns? .	2b	~	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see inst	ructio	ns)	SERVICE SERVICE		No.
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year			За		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Se	chedu	leO	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	ner aut	hority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial	ncial a	ccount)?	4a		V
b	If "Yes," enter the name of the foreign country: ▶			100 m		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax			5a		•
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter		saction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,0		nd did the			
	organization solicit any contributions that were not tax deductible as charitable contributions			6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such	contr	ibutions or			
_	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					SALA Y
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and	partly	for goods	ies (S	2364	NA.
	and services provided to the payor?			7a		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property	or wh	ich it was			
	required to file Form 8282?			7c		'
	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal k	enefit	contract?	7e	<u> </u>	V
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit the organization received a contribution of auditorial intellectual and intel	etit cor	ntract? .	7f		~
	If the organization received a contribution of qualified intellectual property, did the organization file Form			7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization f			7h	11.282(3)	5
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund m sponsoring organization have excess business holdings at any time during the year?	ıaıntaıı	ned by the			2000
	Sponsoring organizations maintaining donor advised funds.			8	9770000	741310a k
	Did the sponsoring organization make any taxable distributions under section 4966?			امریشید م		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related personal properties of the sponsoring organization make a distribution to a donor, donor advisor, or related personal properties of the sponsoring organization make any taxable distributions under section 4500?			9a 9b		-
	Section 501(c)(7) organizations. Enter:	50113		3D	12.77.57E	Sept.
	Initiation fees and capital contributions included on Part VIII, line 12	10a			31195	K ST V
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b	· <u>-</u>	J. San		
	Section 501(c)(12) organizations. Enter:	100				
	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources			3,6		
	against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu		m 1041?	12a	د د د د د د د د د د د د د د د د د د د	allani.
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		V. A	P. 37	TO EL
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1			9 (42 kg)	を設め、
а	Is the organization licensed to issue qualified health plans in more than one state?		[13a		
	Note. See the instructions for additional information the organization must report on Schedul	e O.			N.F.	W.W.
	Enter the amount of reserves the organization is required to maintain by the states in which					ja vácti Editás
•	the organization is licensed to issue qualified health plans	13b			25.75%) 25.75%)	
	Enter the amount of reserves on hand	13c			8.5%	
	Did the organization receive any payments for indoor tanning services during the tax year? .			14a		1
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in S			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in	remu	neration or			
	excess parachute payment(s) during the year?			15	<u> </u>	~
	If "Yes," see instructions and file Form 4720, Schedule N.				35	475
16	Is the organization an educational institution subject to the section 4968 excise tax on net inve	stmer	nt income?	16		~
	If "Yes," complete Form 4720, Schedule O.			70000	8888	streptor.

Part '	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee ins	tructi	ons.
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		<u></u>
Section	on A. Governing Body and Management		Yes	No
	Enter the number of voting members of the governing body at the end of the tax year 1a 22		169	110
1a	Enter the number of voting members of the governing body at the end of the tax year			
	if the governing body delegated broad authority to an executive committee or similar		4.	
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 22			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		~
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	-	<i>V</i>
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5 6	<u></u>	
6	Did the organization have members or stockholders?	-		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	7a	/	
_	one or more members of the governing body?			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
0	the year by the following:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 2	
а	The governing body?	8a	~	
b	Each committee with authority to act on behalf of the governing body?	8b	~	ļ
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		V
<u>Secti</u>	on B. Policies (This Section B requests information about policies not required by the Internal Rever	iue C	Yes	No
		10a	163	1
10a	Did the organization have local chapters, branches, or affiliates?	100	<u> </u>	Ť
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	~	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	~	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	ļ
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		<u> </u>
13	Did the organization have a written whistleblower policy?	13	1	+
14	Did the organization have a written document retention and destruction policy?	14	~	-
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		10 M	
_	The organization's CEO, Executive Director, or top management official	15a	1	11.0.00
a	Other officers or key employees of the organization	15b		†
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
iva	with a taxable entity during the year?	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	+ 1 · ·		
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed CT, MA, ME, NH, PA	T (C.	otion	501/6
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990	· 1 (26	uuon	50 I (C
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website			
	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of ir	iterest	polic	cv. and
19	financial statements available to the public during the tax year.		···	,, -,,,,
20	State the name, address, and telephone number of the person who possesses the organization's books and r	ecord	s►	
	KATHRYN Hyttel, (207)622-3101			0 (0040

Form	990	(201)	8)
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

	Check if Schedule O contains a response or note to any line in this Part VII	
	on och delication of contains a response or note to any line in this Part VII	
	Office District Control of Contro	1 1
٦.	Officers Directors Trustees Koy Employees and High 1.0	 _

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- 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) of 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.

Check this box if neither the organization nor any related organization compensated any current officer director or trustees.

Check this box it heither the organization no	or any relate	d org	aniz	zatio	on c	compe	ensa	ated any currer	nt officer, directo	r, or trustee.
				(C)					<u> </u>
(A)	(B)	Position (do not check more than one				(D)	(E) .	(F)		
Name and Title	Average	box.	unles	neck ss be	mor	e tnan n is botl	one h an	Reportable	Reportable	Estimated
	hours per week (list any	office	er an	dac	direct	tor/trus	tee)	compensation	compensation from	
	hours for	우声	ज्ञ	유	₹ G	유분	7-	from the	related organizations	other
	related	dire	É	Officer	en	plog	Former	organization	(W-2/1099-MISC)	compensation from the
	organizations below dotted	학교	Į Š	ľ	Key employee	96		(W-2/1099-MISC)		organization
	line)	Sp.	3		yee	를			ĺ	and related organizations
		Individual trustee or director	Institutional trustee	}		Highest compensated employee		}		Organizations
			Φ.			ted				
BONNIE WOOD			ĺ		-					
DIRECTOR	1.00					ļ				
WILLIAM MESERVE	0.00	~			<u> </u>			0	0	0
TREASURER	1.00									
RUSSELL PIERCE	0.00			~		<u> </u>	<u></u>	0	0	0
	1.00									
DIRECTOR	0.00	~						0		0
ELIZABETH RETTENMAIER	1.00						ĺ			
DIRECTOR	0.00	~		[0	0	0
TONY OWENS	1.00	,			-					
DIRECTOR	0.00	~				_	_	0	o	. 0
PETER MILLARD	1.00							-	-	<u>_</u>
DIRECTOR	0.00	~						0	0	0
SALLY OLDHAM	1.00							-		<u> </u>
DIRECTOR	0.00	~		ŀ	_	İ		0	0	0
NORTON LAMB	1.00		Ï				T			
DIRECTOR	0.00	~		1		,		o	0	0
CHARLES CULBERTSON	1.00	Ţ							`	0
DIRECTOR	0.00	~	-	1	ĺ	}		0	o	0
SARAH SHORT	1.00									0
DIRECTOR	0.00	~			ļ		ĺ	0	o	0
TOM CARR	1.00		\neg		一		_	- 		0
DIRECTOR	0.00	~					- '}	o	0	•
MARCIA HARRINGTON	1.00		7	一	T					0
DIRECTOR	0.00	1					-	, 0		
DAVID KALLIN	1.00		7	十	+				0	0
DIRECTOR	0.00	1						o		
ANNE S WINCHESTER	1.00	$\neg +$	1	\dashv	$-\dagger$	 +	_			0
DIRECTOR	0.00	1						o	ا	
			_	—						0

Form 990 (2018) Part VII Section A. Officers, Direct	tors, Trustees, Key	Employ	ees	, an	d H	ighest	C	ompensated E	mployees (cont	inued)_			
Section A. Officers, pines		Ţ,		(C)								
(A)	(B)	/do o		Posit		than or	ne l	(D)	(E)	Ì	(F)		
Name and title	Average					is both		Reportable	Reportable	,	Estimated amount o		
realite and and	hours per		r and	l a di	recto	or/truste		compensation from	compensation from related	1	other		
	week (list a	입의	Ins	오	<u>중</u>	age	Former	the	organizations		compensati		
	related	무충	🖹	Officer	Key employee	ploy	THE	organization	(W-2/1099-MISC)		from the organization		
	organizatio	nsl중토	🛱		힣	8 g	٦.	(W-2/1099-MISC)	,		and relate	d	
	below dotte line	ᄚ	a t		уес	∯				'	organizatio	ns	
	iiio)	Individual trustee or director	nstitutional trustee			Highest compensated employee			ı				
	_		ф			e e							—
DENNIS KING	1.00				,			0		٥			0
DIRECTOR	0.00		├	_	-	 		<u> </u>		+-			
MARIA GALLACE				1				0		٥			0
VICE PRESIDENT	0.00		├-	-	 -	 	_	 	-	+-		-	
KAREN HEROLD	1.00			1	Ì			0		0			0
SECRETARY	0.00		├-	1	├ -	<u> </u>	_	 		`			_
PATRICIA HAGER				1				٥		0			0
PRESIDENT	0.00	<u> </u>	<u> </u>	\ <u>'</u>	├	-	 	1		1			_
KATHRYN OLMSTEAD	1.00									0			0
DIRECTOR	0.00		┼	┼-	┼-	 -	-	+		1		-	_
EMILY BECK	1.00									0			0
DIRECTOR	0.00	—	+	┼─	+-	┼─	 	 					
EDWARD SIMMONS		·							,	0			0
DIRECTOR	0.00	-+	+	╁	+	+	+-	 			_		
STEPHANIE SMITH		1	1					1	1	0		_	0
DIRECTOR	0.00		+	┼─	+-		H		+				
LISA POHLMANN				1,				105,76	,	0		31,	927
Chief Executive Officer	0.00		+-	+	+	+	╀	103,70					
KATHRYN HYTTEL	40.00	·		1				75,87	5	0		21,	037
DIRECTOR OF FINANCE			+-	┿	+	+-	+-	70,01	<u> </u>	\top			
1b Sub-total		'_		٠.	__		▶	181,63	7	0		52	964
c Total from continuation sho	eets to Part VII, Sec	ction A						·			_		
الأحلة لمستحلله بالنايين سيت			_				<u> </u>	181,63	7	0		52	964
	including but not lim	ited to	thos	se li	stec	abov	/e)	who received i	more than \$100),000 c	of .		
2 Total number of individuals (reportable compensation fro	m the organization	>			_			1					
											<u>}`</u>	'es	No
3 Did the organization list an	v former officer, d	lirector.	or	trus	stee	, key	en	nployee, or his	ghest compen-	sated		1.00	<u>.</u>
ampleuse on line 1e2 If "Ves	: " complete Scheau	ile J for	Suc	31 111	aivi	uuai					3		
	مصوريت بالتاب والتاب	f vanar	table	~ ~~	mn	ancat	i∩n	and other cor	npensation ito	m une			À
4 For any individual listed on long organization and related or	mne ra, is the sum c	r than	\$15	0.00	00?	If "Y	es,	" complete S	chedule J for	such			
					-						_		
	de manairea or accel	ia comi	nans	eatic	าท fi	rom ai	ny i	unrelated orga	nization or indi	vidual			8.4
5 Did any person listed on line for services rendered to the	organization? If "Ye	s." con	plei	te S	che	dule .	, I fo	r such person		<u> </u>	5	1	~
a B I I I and and Contract	ore												
		neated	inde	erer	nde	nt con	 itra	ctors that rece	ived more thar	1 \$100	,000 of		
 Complete this table for your compensation from the organization 	nization Report co	mnensi	ation	n for	r the	caler	nda	ar year ending	with or within tl	ne orga	anizatior	n's ta	ìХ
	anization. Hoport oo												
year								(B)		(C)	41 mm	
Name a	and business address							Description			Compensa		
THE COMPASS GROUP INC, 2961 A), SUITE	808	3, O	AKT	ON, V	Α:	CONSULTANT	FOR CAMPAIC			21	0,00
THE COM ASS STORE MOTERATION							_ }						
							4						
							_{						
	I	ماریطام د	bu ii	- no			†O	those listed	above) who				-
2 Total number of independence received more than \$100,00	ent contractors (In	oluality from the	ord ord	ani	zati	on ►	.0	1_				3	
received more than \$100,00	o or compensation			<u>ر</u>							Form	990) (20

Part VIII	Statement o	f Ro	Vanua
rait viii	Statement U	ı ne	venue

6.52. 352	a <u>, 3</u> 79-35	Check if Schedule C	oontains a	response or note		s Part VIII..	<u></u>	: . 🔲
	enera periodo.				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	s	1a 8,343	NY PORT OF			
<u>S</u> ra	b	Membership dues .	[1b 1,745,429				
Am Am	C	Fundraising events .		1c 0				
ᇐ	d	Related organizations	s [1d 0		\$ 10 9 to 3 to	100000000000000000000000000000000000000	
ž į	е	Government grants (cor		1e 0				
er Si	f	All other contributions, g	ifts, grants,				3.50003.000	6.0 C TO C TO
돌 퐞		and similar amounts not inc	1	1f 4,127,824		Estate state (expense)	10 4 10 10 10 10 10 10 10 10 10 10 10 10 10	
ig of	g	Noncash contributions includ						
	<u>h</u>	Total. Add lines 1a-1	f	<u></u> ▶	5,881,596	State Assessment	2.416 B 1 1 1 1 1 1	Ray at 5 sign (\$950)
Program Service Revenue			-	Business Code		Y GENERAL SERVICE		\$ 17 20 21 21 3 P
eve	2a	a						
ě.	b				<u> </u>			
Ä	C				··		,	<u> </u>
Š	ď							
ᇤ	e 2	All other programs						
õ	f g	All other program serv				na kalifira kananan kanana kananan kanan	Figure Washington William William	E. A. China and Archaelta transition of the arthurs of
	3	Total. Add lines 2a-2 Investment income	including di	vidanda intercet	0			
		and other similar amo	unts)	vidends, interest,		_		
	4	Income from investment			350,539	. 0	0	350,539
	5	_	· · · ·		0	0	0	0
			(i) Real	(ii) Personal	0	<u>0</u>	0	0
	6a	Gross rents		· · · · · · · · · · · · · · · · · · ·	and a	Section 1995		
	b	Less: rental expenses						\$ 9. m # 50 full (1)
	С	Rental income or (loss)	 -	0 0				an all and address in the second
ļ	d	Net rental income or (loss)	· · · · · >	10.0 A 1.1 A 1.1 A 2.4 TH 1.2 (2.2 A 1.4 B 1		1984 FA 148 SW 240 SA 160 CLESS	
	7а	Gross amount from sales of	(i) Securities					
		assets other than inventory	2,269,6	146 0				
	b	Less: cost or other basis					Mag sawas ka Maga	
		and sales expenses	2,218,9	0		richer de la companya		
	С	Gain or (loss)	50,7	12 0				
	þ	Net gain or (loss) .		. <u></u> .	50,712	0	0	50,712
Other Revenue	8a	Gross income from ful events (not including \$	0					
Œ		of contributions reporte	•					
ا <u>چ</u>				a 31,889		and the second	5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ნ ∣		Less: direct expenses		b 6,942		Application of the second contract of the sec		
		Net income or (loss) fr Gross income from gain			24,947		0	24,947
}	Id		ming activities			Gerst State of Land State of S		
	b	Less: direct expenses		a b				
		Net income or (loss) fr						gira a sing industrial sugar year.
		Gross sales of inv				\$ COMPAND COM		\$559.430 4 \$6.75 (\$6.55)
		returns and allowance		a	THE PARTY OF THE PARTY			
	b	Less: cost of goods sold b			2000年11			
		Net income or (loss) from			<u> Angri un de l'anterior de la comptante de la gentante de la gent</u>	CER 100 00000000 100000000000000000000000	101 A. B. 400 B. A <u>178</u> Aprelia (1886)	State and State
		Miscellaneous Re		Business Code			图 医电影 医医	
Ţ	11a	Other Income		900099	7,227	0	0	7,227
	b					-		. , , , , ,
	C							
	d	All other revenue .			0	0	0	0
		Total. Add lines 11a-1			7,227			
	12	Total revenue. See in	structions	<u></u> ▶	6,315,021	0	0	433,425

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response	(8)	JB)	(C)	(D)
3b, 9b,	include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
	Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
	<u> </u>	0	- 0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees		96,382	131,335	6,884
		234,601	70,302	101/000	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and			o	0
	persons described in section 4958(c)(3)(B)	0	1,301,131	70,525	164,377
7	Other salaries and wages	1,536,033	1,301,131	70,323	10-7,017
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	85,491	75,068	2,731	7,692
_	Other employee benefits	243,762	200,301	12,027	31,434
9	Payroll taxes	131,436	105,200	13,257	12,979
10 11	Fees for services (non-employees):	10.7100			
	Management	81,024	72,105	7,680	1,239
a b	Legal	0	0	0	
C	Accounting	26,738	21,375	3,559	1,804
d	Lobbying	0	0	0	
e	Professional fundraising services. See Part IV, line 17	185,005			185,005
f	Investment management fees	35,508	0	35,508	
9	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	. 0	0	0	(
12	Advertising and promotion	43,398	43,123		275
13	Office expenses	6,552	4,504	1,660	388
14	Information technology	77,994	41,734		14,299
15	Royalties	0	0		(
16	Occupancy	56,912	45,437		3,91
17	Travel	41,482	34,430	1,894	5,158
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0		
19	Conferences, conventions, and meetings .	87,326	63,354		9,12:
20	Interest	0	0		
21	Payments to affiliates	0	0		
22	Depreciation, depletion, and amortization .	51,314	40,968		
23	Insurance	16,635	13,281	2,211	1,14
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	• •	17,324	14,131	1,551	1,64
a	Telephone	72,706		 	
b	Postage	109,427	57,612		
C	Printing	18,633		-	
d	Dues, fees, and subscriptions	50,027			T'
e 05	All other expenses Total functional expenses. Add lines 1 through 24e	3,209,328		 	
<u>25</u> 26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	3,207,320	2,27,7700		
	fundraising solicitation. Check here Following SOP 98-2 (ASC 958-720) if	44,946	13,733	3	31,2
	Idilowing 30F 96-2 (A3C 930-120)	44,740	10//00	<u> </u>	Form 990 (

Part X Balance Sheet

	Check if Schedule O contains a response or note to any line in this Pa	rt X		. V
		(A) Beginning of year		(B) End of year
	1 Cash—non-interest-bearing	103,517	1	100
	2 Savings and temporary cash investments	1,592,608	2	1,534,99
	3 Pledges and grants receivable, net	364,157	3	985,689
ł	4 Accounts receivable, net	14,834	4	9,09
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	
ets	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	
Assets	7 Notes and loans receivable, net	0	7	0
⋖	8 Inventories for sale or use	5,334	8	10,278
	Prepaid expenses and deferred charges	39,199	9	60,041
1	Oa Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1,298,931			80,041
	b Less: accumulated depreciation 10b 865,667	474,768	10c	433,264
1	1 Investments—publicly traded securities	6,213,482	11	8,155,796
1	2 Investments—other securities. See Part IV, line 11	225,777	12	885,823
1	Investments—program-related. See Part IV, line 11	220,777	13	665,623
1	4 Intangible assets		14	<u> </u>
1.	Other assets. See Part IV, line 11		15	
1	Total assets. Add lines 1 through 15 (must equal line 34)	9,033,676	16	12,075,077
1	Accounts payable and accrued expenses	280,905	17	308,361
18	B Grants payable	0	18	200,301
1:	Deferred revenue	0	19	0
20	Tax-exempt bond liabilities	0	20	0
2	in a second transmity. Somplete that It of Something D.	0	21	0
	trustees, key employees, highest compensated employees, and			3-49.48
S 2		0	22	0
24	Unsecured notes and loans payable to unrelated third parties	0	23	0
25		0	24	
Ī	of Schedule D	o	25	0
26		280,905	26	308,361
<u> </u>	Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.		Persista Lauren	300,301
27	***************************************	7,250,702	27	7,985,510
28		1,317,069	28	2,596,206
2 29 5	Territorial restricted flot addets	185,000	29	1,185,000
27 28 29 29 30 31 32 32 33	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			1999 X 4
30	The state of the spanning of carrotte lands	and the second s	30	- A marini - 19 Mari Marikata na makata da Marika Marika 1
2 31	Paid-in or capital surplus, or land, building, or equipment fund		31	-
32			32	
33 33		8,752,771	33	11,766,716
34			34	,,

Part :	XI Reconciliation of Net Assets					V
	Check if Schedule O contains a response or note to any line in this Part XI	<u>-</u> 1 T		<u> </u>	6,315	_=
1	Total revenue (must equal Part VIII, column (A), line 12)	2			3,209	
2	Total expenses (must equal Part IX, column (A), line 25)	3			3,105	
3	Revenue less expenses. Subtract line 2 from line 1	4				,771
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	5				,138
5	Net unrealized gains (losses) on investments	6				0
6	Donated services and use of facilities	7				0
7	Investment expenses	8				
8	Prior period adjustments	9			14	1,390
9	Other changes in net assets or fund balances (explain in Schedule O)					.,
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1	1,766	6,716
Part	VIII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u></u>	- 	: i	_ᆜ
			_	_	Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_	144	Arri	
•	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	in [
	Schedule ()		1.0	_		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		· [2	2a	1,1	· ·
Lu	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled	or		, A fin	
	reviewed on a separate basis, consolidated basis, or both:] ,			
	Separate hasis Consolidated basis Both consolidated and separate basis		15.7		. 45.	%.
b	Were the organization's financial statements audited by an independent accountant?		· -	2b	<u> </u>	
b	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on	ıa ¦∈			
	separate basis, consolidated basis, or both:					
	Separate basis			4	للقمالة	
_	Market is the fire or an object the organization have a committee that assumes responsibility for o	versiç	ght			
С	of the audit, review, or compilation of its financial statements and selection of an independent accounts	A11144	``	2c_	~	-
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	in Ì			
	Schedule O		1			
Λ	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in			
	All Cinals Audit Ast and OMR Circular A-1337		• ⊢	<u>3a</u>	ļ	V
L -	to the communication undergo the required audit or audits? If the organization did not und	ergo i	the			
α	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such	audits	i	3b		
	Todanos sastes, expense y			For	n 99 (0 (2018

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

þ

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number NATURAL RESOURCES COUNCIL OF MAINE INC 01-0270690 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8

An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)

11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.

☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, c its supported organization(s) (see instructions). You must complete Part IV. Sections A. D. and E.

ď Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D, and Part V.

Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization.

g Provide the following information	on about the sup	oorted organization(s)			
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes No		
(A)					. —
(B)					
(C)					
(D)					
E)					
Total	TENDELLY ST.		7443 1744		

Part II

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section	on A. Public Support	-					
Calend	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2,028,794	2,304,946	2,729,271	3,567,434	5,881,596	1 <u>6,512,041</u>
2	Tax revenues levied for the						
	organization's benefit and either paid						_
	to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	0	0	. 0	0	0	0
4	Total. Add lines 1 through 3	2,028,794	2,304,946	2,729,271	3,567,434	5,881,596	16,512,041
5	The portion of total contributions by				有力 经参照		•
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						1 227 024
_	shown on line 11, column (f)						1,337,034 15,175,007
6	Public support. Subtract line 5 from line 4	and the second		<u> </u>	Jackson Comment		19,179,007
	on B. Total Support	(~) 0014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	dar year (or fiscal year beginning in) Amounts from line 4	(a) 2014	2,304,946	2,729,271	3,567,434	5,881,596	16,512,041
7		2,028,794	2,304,946	2,127,211	3/301/434	3,001,020	10,012,011
8	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from						
	similar sources	111,364	85,265	108,663	213,342	350,539	869,173
9	Net income from unrelated business	111,304	05,203	100,000	210/012	3337321	,
IJ	activities, whether or not the business						
	is regularly carried on	0	۰ ا	٥ ا	l 0	0	0
10	Other income. Do not include gain or	<u></u>					
10	loss from the sale of capital assets						
	(Explain in Part VI.)	38,715	39,916	39,240	35,062	39,117	192,050
11	Total support. Add lines 7 through 10			a to be a substitute			17,573,264
12	Gross receipts from related activities, etc.	. (see instructi	ons)			12	3,325
13	First five years. If the Form 990 is for t	he organizatio	n's first, secon	d, third, fourth	n, or fifth tax y	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he					<u>.</u> .	
Secti	on C. Computation of Public Suppo	rt Percentag	e				
14	Public support percentage for 2018 (line					14	86.35 %
15	Public support percentage from 2017 Sc	hedule A, Part	II, line 14 .			15	90.82 %
16a	331/3% support test-2018. If the organ	nization did not	check the bo	x on line 13, a	nd line 14 is 3	31/3% or more,	check this
	box and stop here. The organization qua	alifies as a pub	licly supported	lorganization			-
b	331/3% support test-2017. If the organ	ization did not	check a box of	on line 13 or 16	3a, and line 15	is 331/3% or m	ore, check
	this box and stop here. The organization						
17a	10%-facts-and-circumstances test-2	2018. If the org	an i zation did r	not check a bo	x on line 13, 1	l6a, or 16b, an	d line 14 is
	10% or more, and if the organization m	eets the "facts	s-and-circumst	ances" test, c	heck this box	and stop here	. Explain in
	Part VI how the organization meets the	"facts-and-circ	cumstances" to	est. The organ	ization qualifie	s as a publicly	supported
	organization						
b	10%-facts-and-circumstances test-2	2017. If the org	janization did i	not check a bo	ox on line 13,	16a, 16b, or 17	'a, and line
	15 is 10% or more, and if the organiz	ation meets th	ne "facts-and-	circumstances	test, check	this box and	sτop nere.
	Explain in Part VI how the organization	meets the "fac	ts-and-circum	istances" test.	ine organizat	tion qualifies as	s a publicly
	supported organization					, , , , , , , , , , , , , , , , , , ,	▶ 🛚
18	Private foundation. If the organization of						
	instructions	<u> </u>	<u> </u>			<u> </u>	· · <u> </u>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.) If the organization fails to qualify under the tests listed below, please complete Part II.)

Coot	ion A Dublic Cumpert	direct trio, ic	otto notou bot	on, piodoc o	omploto i dit	,	 .
	ion A. Public Support	(=) 004.4	(h) 2015	(-) 0040	(-N-0047	1.1.0040	/n T · ·
	idar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise			-			
-	sold or services performed, or facilities						
	furnished in any activity that is related to the						
•	organization's tax-exempt purpose			_			
3	Gross receipts from activities that are 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						
5	The value of services or facilities					1 1	
	furnished by a governmental unit to the]	
	organization without charge						<u></u>
6	Total. Add lines 1 through 5		<u> </u>				
7a							
	received from disqualified persons .		1				
b	Amounts included on lines 2 and 3					Ţ	
-	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from			分类的方法 在		14 2 3 3 A A	
	line 6.)						
	on B. Total Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						<u>-</u>
10a							
	payments received on securities loans, rents,						
	royalties, and income from similar sources.						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						_
	activities not included in line 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		1				
	(Explain in Part VI.)		1				
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	ne organizatio	n's first, secon	d, third fourth	, or fifth tax v	ear as a section	n 501(c)(3)
	organization, check this box and stop he	•	-				
Secti	on C. Computation of Public Support						
15	Public support percentage for 2018 (line			13, column (fl)		15	%
16	Public support percentage from 2017 Sci						<u>/</u> 0
	on D. Computation of Investment In	come Perce	ntage			1 1	70
17	Investment income percentage for 2018 (ov line 13. colu	ımn (fl)	17	%
18	Investment income percentage from 201					40	%
19a	331/3% support tests—2018. If the organ						
	17 is not more than 33½%, check this box						
b	33 ¹ / ₃ % support tests—2017. If the organization					_	
Ŋ	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di						_
20	THIS DESCRIPTION OF THE PROPERTY AND THE	си польянеск А	1818 DITTE 14	. 1220. UE 1200 I	ынеск инs оох	and see institle	amaras 🗩 📗

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Pa	art V.)	
Secti	ion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	dala Mare	
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	ert. Liliaru	
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5 a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С 6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c 6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	1, 824	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
h	Did the organization have any excess husiness holdings in the tax year? (Use Schedule C. Form 4720, to		[: :	

determine whether the organization had excess business holdings.)

10b

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	elforeis		
	below, the governing body of a supported organization?	11a	ļ .	<u> </u>
	A family member of a person described in (a) above?	11b		<u> </u>
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secu	on B. Type I Supporting Organizations		14	
4	Did the divertors tructors or manufacture of one or more account of our productions have the necessity	3 19ASS	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		9.57	36.4
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		25 A.M.	
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	100.4	Z 534	1935-14 1
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	21213152	FRZZEKILI
2	Did the organization operate for the benefit of any supported organization other than the supported	Thorney,	94/00	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	Satis		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2175		
	supervised, or controlled the supporting organization.	2	The Parishana	Longsage
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		75.55 2,55	8/25/4
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed		主要	
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
		16045 (845)	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		37.75	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		70 60	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	TELE	10.121	asa-4
2		1	3.5378	-3000
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	210000	åssad.
3	By reason of the relationship described in (2), did the organization's supported organizations have a	18/5/93		
•	significant voice in the organization's investment policies and in directing the use of the organization's	70.43		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		mania.
Secti	on E. Type III Functionally Integrated Supporting Organizations	·		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			•
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		538	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		#15.4% 22.58%	
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
4.	·	2a	70mgx34	german, r
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.			liib.l
2	·	2b	\$1.00.2	왕당 1
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	10000		
а	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		25.1
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja	700	in Line II
Ŋ	of its supported organizations? If "Ves" describe in Part VI the role played by the organization in this rogard	2h		a. 35 h. 1

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org			
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	trus izati	st on Nov. 20, 1970 (explair ons must complete Section	ns A through E.
Section A—Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a	. <u>.</u>	
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	· · · · · · · · · · · · · · · · · · ·	
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	<u> </u>	
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	<u></u>	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount	•		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		,
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		:
7 Check here if the current year is the organization's first as a non-functional instructions).	ly in	tegrated Type III supporting	g organization (see

Pari	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	izations (continued)			
Sect	Section D—Distributions					
1	Amounts paid to supported organizations to accomplish					
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted			
3	Administrative expenses paid to accomplish exempt purp	poses of supported orga	nizations	· · · · · · · · · · · · · · · · · · ·		
4	Amounts paid to acquire exempt-use assets	<u> </u>				
5	Qualified set-aside amounts (prior IRS approval required)			 -		
6	Other distributions (describe in Part VI). See instructions.			. <u> </u>		
7	Total annual distributions. Add lines 1 through 6.					
8	Distributions to attentive supported organizations to whice (provide details in Part VI). See instructions.	h the organization is res	sponsive			
9	Distributable amount for 2018 from Section C, line 6	· · · · · · · · · · · · · · · · · · ·	 :			
10	Line 8 amount divided by line 9 amount	·-				
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018		
1	Distributable amount for 2018 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2018					
а	From 2013			A second constraint		
b	From 2014					
С	From 2015					
d	From 2016					
e ⁻	From 2017	ANTERNATION AND AND AND AND AND AND AND AND AND AN		E-MATERIAL PROPERTY OF STREET AND ADMINISTRATION OF STREET		
f	Total of lines 3a through e			The state of the s		
g	Applied to underdistributions of prior years		+			
h	Applied to 2018 distributable amount	Thomas Control				
<u>i</u>	Carryover from 2013 not applied (see instructions)					
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			Age of the original section.		
4	Distributions for 2018 from Section D, line 7: \$		The second secon			
a	Applied to underdistributions of prior years					
b	Applied to 2018 distributable amount					
С	Remainder. Subtract lines 4a and 4b from 4.					
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.		and the second s			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.	A CONTRACTOR OF THE CONTRACTOR		2.50		
8	Breakdown of line 7:			alian de Angelana an		
а	Excess from 2014					
b	Excess from 2015					
С	Excess from 2016					
d	Excess from 2017			zasze		
е	Excess from 2018					

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Schedule A	Part II, Line 10 - 2014 Misc. income \$14,915 event income \$23,800 total \$38,715 2015 Misc. Income \$14,001 event income
\$25,915 tota	al \$37,601, 2016 Misc. Income \$15,641 event income \$23,600 total \$39,241 2017 Misc. Income \$5,290 event income \$29,772
total \$35,06	2, 2018 Misc. Income \$7,228 event income 31,889
	
	,

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 ➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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," on 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.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• Se	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Name	of organization			Employer iden	tification number
	RAL RESOURCES COUNCIL	*			01-0270690
Part		e organization is exempt unde	-	•	······
1	definition of "political can		•		•
2	Political campaign activit	y expenditures (see instructions) .		\$	
3	Volunteer hours for politic	cal campaign activities (see instruc	tions)		
Part	-B Complete if the	e organization is exempt unde	er section 501(d	c)(3).	. =
1 2 3 4a b Part	Enter the amount of any of the organization incurred Was a correction made? If "Yes," describe in Part I-C Complete if the	excise tax incurred by the organization excise tax incurred by organization ed a section 4955 tax, did it file For	managers under m 4720 for this ye 	section 4955 ▶ \$ ear?	Yes No
•					
2	Enter the amount of the 527 exempt function acti	filing organization's funds contrib	uted to other org	anizations for section	
3 4	line 17b	expenditures. Add lines 1 and 2		▶ \$	Yes No
5	Enter the names, address organization made payme the amount of political co	ses and employer identification nur ents. For each organization listed, on entributions received that were pro- fund or a political action committee	mber (EIN) of all se enter the amount mptly and directly	ection 527 political organi paid from the filing organi delivered to a separate p	zations to which the filing zation's funds. Also enter olitical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's 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
(1)					
(2)					
(3)					
(4)					
(5)	•				
(6)					

Pa	rt II-A	Complete if the organization section 501(h)).	is exempt under section 501(c)(3) and filed	l Form 5768 (ele	ection under
A	Check ▶		s to an affiliated group (and list in Part IV each affil hare of excess lobbying expenditures).	iated group memb	er's name,
В	Check ▶	if the filing organization checked	ed box A and "limited control" provisions apply.		
	•		ring Expenditures ans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1	a Total l	obbying expenditures to influence p	oublic opinion (grass roots lobbying)	4,000	
			a legislative body (direct lobbying)	13,809	
	c Total I	obbying expenditures (add lines 1a	and 1b)	17,80 <u>9</u>	
	d Other	exempt purpose expenditures		3,191,519	
	e Total e	exempt purpose expenditures (add	lines 1c and 1d)	3,209,328	
	f Lobby	ing nontaxable amount. Enter th	ne amount from the following table in both	l	
	colum	-		310,466	
	If the a	mount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not ove	r \$500,000	20% of the amount on line 1e.		
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$,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 \$1	7,000,000	\$1,000,000.	la promy ettere i	
	g Grass	oots nontaxable amount (enter 259	of line 1f)	77,617	
	h Subtra	ct line 1g from line 1a. If zero or les	ss, enter -0	0	
		ct line 1f from line 1c. If zero or les		0	
			on either line 1h or line 1i, did the organization	file Form 4720	
	report	ng section 4911 tax for this year?	<u> </u>		Yes No
		4-Yea	ar 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 separate instructions for lines 2a through 2f.)

	Lobby	ing Expenditures	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a	Lobbying nontaxable amount	270,790	283,552	293,526	310,466	1,158,334
b	Lobbying ceiling amount (150% of line 2a, column (e))					1,737,501
С	Total lobbying expenditures	102,326	139,551	54,783	17,809	314,469
d	Grassroots nontaxable amount	67,698	70,888	73,382	77,617	289,585
e	Grassroots ceiling amount (150% of line 2d, column (e))					434,378
f	Grassroots lobbying expenditures	53,179	51,995	15,676	4,000	124,8 <u>50</u>

Schedule C (Form 990 or 990-EZ) 2018

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forn	n 5768
For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(i	a)	(b)
	iption of the lobbying activity.	Yes	No	Amount
1	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:			
а	Volunteers?	Liber Service Season	- am an tituda	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
С	Media advertisements?			e Samuel de Barrio de Calendario de Calendar
d	Mailings to members, legislators, or the public?			
е	Publications, or published or broadcast statements?			
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 similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i	and justification		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912		素液	
С	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 Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).)(5), (or se	ction
				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 Part	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			
ai c	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," C answered "Yes."			
1	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	s of		
а	Current year		2a	
b	Carryover from last year		2b	
C	Total		2c	
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			-
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb			
	and political expenditure next year?		4	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	
Part	IV Supplemental Information			
2 (see	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information.			aun.
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name o	f the organization		Employer identification number
	RAL RESOURCES COUNCIL OF MAINE INC		01-0270690
Par	The state of the s	ised Funds or Other Similar Fur	nds or Accounts.
	Complete if the organization answered '		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets I	neld in donor advised
	funds are the organization's property, subject to th	ne organization's exclusive legal contr	rol? Yes 🗌 No
6	Did the organization inform all grantees, donors, a only for charitable purposes and not for the bene-	fit of the donor or donor advisor, or	for any other purpose
	conferring impermissible private benefit?		· · · · · · · · · · · · · · · · · · ·
Par			
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held by the	organization (check all that apply).	
	Preservation of land for public use (e.g., recrea		
	☐ Protection of natural habitat	☐ Preservation of	of a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribut	Held at the End of the Tax Year
	easement on the last day of the tax year.		<u> </u>
а	TOTAL HALLISON OF CONTROL TERROR CONTROL		
b	Total acreage restricted by conservation easement	ts	<u>2b</u>
С	Number of conservation easements on a certified I	historic structure included in (a)	2c
d	Number of conservation easements included in historic structure listed in the National Register		· - 2d
3	Number of conservation easements modified, tran tax year ▶		rminated by the organization during the
4	Number of states where property subject to conse	ervation easement is located	
5	Does the organization have a written policy re violations, and enforcement of the conservation ea	asements it holds?	🗌 Yes 🗒 No
6	Staff and volunteer hours devoted to monitoring, inspe	ecting, handling of violations, and enforci	ng conservation easements during the year
7	Amount of expenses incurred in monitoring, inspectin		
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports	conservation easements in its revenu	ie and expense statement, and
	balance sheet, and include, if applicable, the text	of the footnote to the organization's f	inancial statements that describes the
	organization's accounting for conservation easem		
Par	t III Organizations Maintaining Collection	ns of Art, Historical Treasures, c	or Other Similar Assets.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 8	3.
1a	If the organization elected, as permitted under SF	FAS 116 (ASC 958), not to report in i	ts revenue statement and balance shee
	works of art, historical treasures, or other simila public service, provide, in Part XIII, the text of the	footnote to its financial statements th	at describes these items.
b	If the organization elected, as permitted under sworks of art, historical treasures, or other similal public service, provide the following amounts related	r assets held for public exhibition, e	s revenue statement and balance shee education, or research in furtherance o
			▶ \$
	(i) Revenue included on Form 990, Part VIII, line 1(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of an following amounts required to be reported under states.	t, historical treasures, or other simil	ar assets for financial gain, provide the
a	Revenue included on Form 990, Part VIII, line 1		▶ \$

3 Using the organization's acquilithicn, accession, and other records, check any of the following that are a significant use of its collector thems (check at that apply): a	Par	t III Organizations Maintaining	Collections of	Art, Historical	Treasures	, or Ot	her Similar A	ssets	(cont	inued)
a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1 Is the organization an agent, furstee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1 Is the organization an agent, furstee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 2 Both the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No D	3	Using the organization's acquisition,	accession, and ot	her records, chec	ck any of th	e follov	ving that are a	signifi	cant u	se of its
b Scholarly research e Other		collection items (check all that apply):	•							
c	а	Public exhibition		d 🗌 Loan	or exchang	ge prog	rams			
C Preservation for future generations Porting the presentation's collections and explain how they further the organization's exempt purpose in Part XII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ▼es No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No If "Yes," explain the arrangement in Part XIII and complete the following table: Amount C Beginning balance 1.5	b		4 - 4	e 🗌 Othe	r					
XIII. During the year, did the organization solicit or receive donetions of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	C									
During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV	4		tion's collections a	and explain how t	hey further:	the org	anization's exe	empt p	urpose	e in Part
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?										
Part V Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 2 Bit the organization the arrangement in Part XIII and complete the following table: C Beginning balance C Beginning of the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. C Beginning of year balance C Beginning of year bal	5							ilar		
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, oustodian or other intermediary for contributions or other assets not included on Form 990, Part X?		- · · · · · · · · · · · · · · · · · · ·		ined as part of th	e organizati	on's co	llection? .		Yes	☐ No
18 st he organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Par		~	_						
1a Is the organization an agent, trustee, oustodian or other intermediary for contributions or other assets not included on Form 990, Part X?			n answered "Yes'	' on Form 990, I	Part IV, line	e 9, or	reported an a	moun	t on F	orm
included on Form 990, Part X? Yes No If "Yes," explain the arrangement in Part XIII and complete the following table:										
Beginning balance Amount 1c	1a							_		_
C Beginning balance C C C C C C C C C								· L	Yes	∐ No
C Beginning balance 1c 1d	b	If "Yes," explain the arrangement in P	art XIII and comple	ete the following t	able:		1	Λ		
Additions during the year 1 to	_	De alemina de aleman	Λ.			-		Amour	it	
Ending balance										
Ending balance Time Tim						<u> </u>				
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?		_ · · · · · · · · · · · · · · · · · · ·				_	-			
Part V	_	Did the organization include an amoun	nt on Form 000 Pr						Vec	
Part V										□ NO
Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1			art Alli. Officer fiere	s II tile explanatio	IIIIas Deeli	provide	on Part Alli	· · ·	<u> </u>	
1a Beginning of year balance 5,926,673 5,196,260 4,805,665 5,031,142 4,813,197 b			answered "Ves"	on Form 990 I	Part IV line	10				
Beginning of year balance		Complete ii ine organization					(d) Three years ba	ck (e)	Four ve	ars back
1,880,250 222,532 82,012 133,028 197,986	1a	Beginning of year balance			 					
C Net investment earnings, gains, and losses	_									
Cosses 228,789 507,881 495,583 -149,135 208,059	C		.,000,200			02/0/2	100,0			177,700
d Grants or scholarships . O O O O O O O O O O O O O O O O O O			228,789	507.881	4	95.583	-149.1	35		208.059
Other expenditures for facilities and programs	d	Grants or scholarships					, .			
f Administrative expenses	е	•								
f Administrative expenses		programs	230,474	0	1	87,000	209,3	70		188.100
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 84.5 % b Permanent endowment ▶ 15 % c Temporarily restricted endowment ▶ 0.5 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations .	f	Administrative expenses								
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 84.5 % b Permanent endowment ▶ 15 % c Temporarily restricted endowment ▶ 0.5 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations . 3a(i) ✓ (ii) related organizations . 3a(ii) ✓ b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? . 3b □ 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation 1a Land . 0 192,510 (other) (other) (other) b Buildings . 0 911,873 705,788 206,085 c Leasehold improvements . 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	g	End of year balance	7,805,238	5,926,673	5,1	96,260	4,805,6	65	5,	031,142
b Permanent endowment ▶ 15 % c Temporarily restricted endowment ▶ 0.5 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations . 3a(i) ✓ (ii) related organizations . 3a(ii) ✓ b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? . 3b	2	Provide the estimated percentage of t	he current year en	d balance (line 1g	, column (a)) held a		•		
c Temporarily restricted endowment ▶ 0.5 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations . 3a(i) ✓ (ii) related organizations . 3a(ii) ✓ b If "Yes" on line 3a(ii), are the related organization's listed as required on Schedule R? . 3b □ Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value (investment) (other) (other) (2) Accumulated depreciation (d) Book value (2) Cost or other basis (2) Accumulated depreciation (3) Accumulated depreciation (4) Book value (3) Accumulated depreciation (4) Book value (4) Book value (4) Accumulated depreciation (4) Book value (4) Accumulated depreciation (5) Accumulated depreciation (6) Accumulated (6)	а	Board designated or quasi-endowment	nt ▶84.5	<u>.</u> %						
The percentages on lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	b									
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	C			•						
organization by: Yes No (i) unrelated organizations 3a(i) / (ii) related organizations 3a(ii) / b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 0 192,510 192,510 b Buildings 0 911,873 705,788 206,085 c Leasehold improvements 0 0 0 0 d Equipment 0 194,548 159,879 34,669 e Other 0 0 0 0	_				.*					
(i) unrelated organizations (ii) related organizations 3a(i) V 3a(ii) V 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 0 192,510 192,510 192,510 b Buildings 0 911,873 705,788 206,085 c Leasehold improvements 0 0 0 0 d Equipment 0 194,548 159,879 34,669 e Other 0 0 0 0 0	За		e possession of th	e organization the	at are held	and ad	ministered for	the	_	
(ii) related organizations								_		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (nivestment) (other) (d) Book value (nivestment) (other) (other) (d) Book value (other) (other										
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (other) (d) Book value (other) (ot	1.									<u> </u>
Part VI	-	, • · · · · · · · · · · · · · · · · · ·	_			· · ·		. <u>L</u>	3b	<u> </u>
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation				n s endowment t	unas.					
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 0 192,510 192,510 b Buildings 0 911,873 705,788 206,085 c Leasehold improvements 0 0 0 0 d Equipment 0 194,548 159,879 34,669 e Other 0 0 0 0	Fall			on Form 000 I	Dort IV line	. 11.	Paa Earm 00/	Dow	V lim	- 10
(investment) (other) depreciation 1a Land 0 192,510 192,510 b Buildings 0 911,873 705,788 206,085 c Leasehold improvements 0 0 0 0 d Equipment 0 194,548 159,879 34,669 e Other 0 0 0 0							····			
1a Land 0 192,510 192,510 b Buildings 0 911,873 705,788 206,085 c Leasehold improvements 0 0 0 0 d Equipment 0 194,548 159,879 34,669 e Other 0 0 0 0		Description of property						(a)	BOOK V	alue
b Buildings 0 911,873 705,788 206,085 c Leasehold improvements 0 0 0 0 d Equipment 0 194,548 159,879 34,669 e Other 0 0 0 0	12	Land	<u> </u>			75 10 75 12 12	·			102 542
c Leasehold improvements . 0 0 0 0 d Equipment . . . 0 194,548 159,879 34,669 e Other . . 0 0 0 0			•	- +						
d Equipment 0 194,548 159,879 34,669 e Other 0 0 0 0		-						-		
e Other			·							
			<u> </u>				T I			34,007 ^
and the state of t)c.)		_		433 26A

	Complete if the organization answered "Yes" on Form 990, Part IV		
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
) Financial	derivatives	. 0	
) Closely-h	neld equity interests	0	4.54
) Other Git	fts of Future Interests	885,823	End-of-Year Market Value
(A)			
(B)			
(C)			
(D)			<u> </u>
(E)			· · ·
(F)			
(G)			
(H)	Liver from 15 are 000 Oct V and 10 live 10 l	885,823	
tal. (Column (i Part VIII	b) must equal Form 990, Part X, col. (B) line 12.) ► Investments—Program Related.	000,023	
art VIII	Complete if the organization answered "Yes" on Form 990, Part I	V line 11c. See Fo	orm 990. Part X. line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:
	(a) Description of investment		Cost or end-of-year market valu
1)			, ,
2)			<u> </u>
3)			
4)			
5)		· •=	
6)			<u> </u>
7)		<u> </u>	
8)			-
(9)	b) must agual Form 000. Part V. cal. /B) line 13.)		**
(9) otal. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		
(9) otal. (Column (Other Assets.	V. line 11d. See F	orm 990. Part X, line 15.
(9) otal. (Column (V, line 11d. See F	orm 990, Part X, line 15.
9) otal. (Column (Part IX	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990, Part X, line 15.
9) otal. (Column (Part IX	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990, Part X, line 15.
9) otal. (Column (Part IX (1) (2)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990, Part X, line 15.
9) otal. (Column (Part IX (1) (2) (3)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990, Part X, line 15.
9) otal. (Column (Part IX (1) (2) (3)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990, Part X, line 15.
9) ptal. (Column (Part IX (1) (2) (3) (4)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990, Part X, line 15 (b) Book value
9) otal. (Column (Part IX (1) (2) (3) (4) (5)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990, Part X, line 15 (b) Book value
9) ptal. (Column (i Part IX 1) (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990, Part X, line 15. (b) Book value
(9) otal. (Column () Part IX (1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description		orm 990, Part X, line 15. (b) Book value
(9) otal. (Column (Part IX (1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.)		orm 990, Part X, line 15. (b) Book value
(9) Otal. (Column () Part IX (1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.		(b) Book value
(9) Otal. (Column () Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.)		(b) Book value
(9) Otal. (Column () Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I line 25.		(b) Book value
9) otal. (Column () Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Colu	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I line 25. (a) Description of liability		(b) Book value
9) otal. (Column (in Part IX 1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (in Part X) (1) Federal in Part X	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I line 25.		(b) Book value
9) tal. (Column (Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Colu Part X	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I line 25. (a) Description of liability		(b) Book value
9) tal. (Column () Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Colu Part X 1) Federal in 2) 3)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I line 25. (a) Description of liability		(b) Book value
9) tal. (Column (Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Colu Part X 1) Federal in 2) (3) 4)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I line 25. (a) Description of liability		(b) Book value
9) tal. (Column (Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Colu Part X 1) Federal in 2) 3) 4) 5)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I line 25. (a) Description of liability		(b) Book value
9) tal. (Column (in Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Column (in Part X	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I line 25. (a) Description of liability		(b) Book value
9) tal. (Column (in Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Column (in Part X 1) Federal in (2) (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I line 25. (a) Description of liability		(b) Book value
9) tai. (Column (in Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Column (in Part X 1) Federal in 2) 3) 4) 5) 6) (7) 8)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I line 25. (a) Description of liability		(b) Book value
9) otal. (Column () Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Colu Part X (1) Federal in (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered "Yes" on Form 990, Part I (a) Description mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I line 25. (a) Description of liability		(b) Book value

	Complete if the organization answered "Yes" on Form 990, I		ine 19a		
1	Total revenue, gains, and other support per audited financial statements			1	4 27F 702
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			783 W	6,275,783
	Net unrealized gains (losses) on investments	امما	407.400		
a	Donated services and use of facilities	2a 2b	-106,138		
b			81,076		
C	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIII.)	2d	21,332	200	
e	Add lines 2a through 2d			2e	-3,730
3	Subtract line 2e from line 1			3	6,279,513
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			9-94	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	35,508		
b	Other (Describe in Part XIII.)	4b	0	2	
_C	Add lines 4a and 4b			4c	35,508
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	-		5	6,315,021
Part	· · · · · · · · · · · · · · · · · · ·			r Return	
	Complete if the organization answered "Yes" on Form 990, I		ine 12a.		
1 -	Total expenses and losses per audited financial statements			1 0.00000	3,261,838
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1.1			
a	Donated services and use of facilities	2a	81,076	3 44	
b	Prior year adjustments	2b	0		
C	Other losses	2c	0		
d	Other (Describe in Part XIII.)	2d	6,942		
е	Add lines 2a through 2d			2e	88,018
3	Subtract line 2e from line 1			3	3,173,820
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	35,508	ek the	
b	Other (Describe in Part XIII.)	4b	0		
C	Add lines 4a and 4b			4c	35,508
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.) .	<i></i>	5	3,209,328
	XIII Supplemental Information.				
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and				
; Parl	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provid	e any additional in	formation.	
	lule D, Part V, Line 4 - The purpose of the Board Directed and Permanent Endo		·	Y	Y
addres	ss emerging issues, and make capital improvements to our facilities. The purp	ose of the	Citizen Engageme	nt and Tom	orrow's
eade	r's fund is to strengthen our outreach capacity, and to engage the public in the	protection	on of Maine's enviro	nment.	
Sched	ule D, Part XI, Line 2d - Direct fundraising expense \$6,941, increase in gifts of	future into	erest \$26,557 decre	ise in valu	e of charitable
	nuity \$12,166				
Sched	ule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	ices			
Sched	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	ices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			·
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			
	lule D, Part XII, Line 2d - Direct Fundraising expenses for event space and serv	rices			

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

➤ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization	·				Employer identifica	tion number
NATURAL RESOURCES COUNCIL OF MA						270690
Form 990-EZ filers are no	ot required to	complete t	this part.			ne 17.
1 Indicate whether the organization	raised funds					
a Mail solicitations		e 🔽		on of non-governme		
b Internet and email solicitation	S	f		on of government g	rants	
c Phone solicitations		g	Special f	fundraising events		
d 🗹 In-person solicitations						
2a Did the organization have a writte or key employees listed in Form 9	990, Part VII) o	r entity in co	nnection v	with professional fur	draising services?	✓ Yes ☐ No
b If "Yes," list the 10 highest paid is compensated at least \$5,000 by			iraisers) pu	irsuant to agreemer	its under which the	Tundraiser is to be
(i) Name and address of individual or entity (fundraiser)	(ii) Activity		draiser have control of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No		-	-
1 See Schedule G, Part IV, Statement 1				_		
2						
3						
4		1.,				
5	- 					
6						
7			_			
8					**	
9						
10						
Total			•	0	180,000	-180,000
3 List all states in which the organ registration or licensing. CT, MA, ME, NH, PA	nization is regi	stered or lic	ensed to s	solicit contributions	or has been notifie	d it is exempt from
					.43»	
			w- -			
						

9 Other direct expenses . 6,372 570 10 Direct expense summary. Add lines 4 through 9 in column (d)			(Form 990 or 990-EZ) 2018				Page 2
Dip and Dash Auction 0 (event type) (even	Pa	rt II	than \$15,000 of fundraisin	ng event contributions			
2 Less: Contributions				Dip and Dash	Auction	0	(d) Total events (add col. (a) through col. (c))
2 Less: Contributions	evenue	1	Gross receipts	25,089	6,800		31,889
Iline 2)	œ			0	0		0
Source S				25,089	6,800		31,889
6 Rent/facility costs		4	Cash prizes	0	0		0
9 Other direct expenses . 6,372 570 10 Direct expense summary. Add lines 4 through 9 in column (d)		5	Noncash prizes	0	0		0
9 Other direct expenses . 6,372 570 10 Direct expense summary. Add lines 4 through 9 in column (d)	enses	6	Rent/facility costs	0	. 0		0
9 Other direct expenses . 6,372 570 10 Direct expense summary. Add lines 4 through 9 in column (d)	t Expe	7	Food and beverages	0	. 0		0
Direct expense summary. Add lines 4 through 9 in column (d) Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 11 \$15,000 on Form 990-EZ, line 6a. (a) Bingo Gross revenue Cash prizes Noncash prizes Rent/facility costs The column (d) Yes Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d)	Direc	8	Entertainment	0	0	-	0
Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 1 \$15,000 on Form 990-EZ, line 6a. (a) Bingo (b) Pull tabs/instant bingo/progressive bingo (c) Other gaming		9	Other direct expenses	6,372	570		6,942
\$15,000 on Form 990-EZ, line 6a. (a) Bingo (b) Pull tabs/instant bingo/progressive bingo (c) Other gaming 1 Gross revenue	Pal	11	Net income summary. Subtra	ct line 10 from line 3, c	olumn (d)		6,942 24,947 or reported more than
2 Cash prizes	<u>.</u>		\$15,000 on Form 990-EZ	ː, line 6a.			(d) Total gaming (add
2 Cash prizes	evenue			(a) Bingo		(c) Other gaming	col. (a) through col. (c))
5 Other direct expenses .	r -	1	Gross revenue				
5 Other direct expenses .	uses	2	Cash prizes				
5 Other direct expenses .	Expe	3	Noncash prizes				
6 Volunteer labor	Direct	4	Rent/facility costs				
6 Volunteer labor		5	Other direct expenses	□ Ves %	□ Ves %	☐ Yes %	
8 Net gaming income summary. Subtract line 7 from line 1, column (d)		6	Volunteer labor				
		7	Direct expense summary. Ad-	d lines 2 through 5 in c	olumn (d)		
O Entantha state(a) in which the suggestion and the suggestion of		8	Net gaming income summary	/. Subtract line 7 from li	ne 1, column (d)		
 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain: 		a Is	the organization licensed to co	onduct gaming activities	ming activities:s in each of these states	s?	

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? .

Yes
No If "Yes," explain:

Schedu	ule G (Form 990 or 990-EZ) 2018			Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other formed to administer charitable gaming?		☐ Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		%
b	An outside facility			%_
14	Enter the name and address of the person who prepares the organization's gaming/special events book records:	s and		
	Name ►			
	Address ►			
15a	revenue?		☐ Yes	□ No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$	ne		
С	If "Yes," enter name and address of the third party:			
	Name ▶			
	Address >			
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation ► \$			
	Description of services provided ▶			
	□ Director/officer □ Employee □ Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proce	eds to	□Ves	□мо
	retain the state gaming license?		□ res	
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations spent in the organization's own exempt activities during the tax year > \$	OHS OF		
Part		umns Idditio	(iii) and nal infor	(v); and mation.
Sche	dule G, Part II, Line 1 - Fundraising event			
				,

Schedule G, Part IV, Statement 1

NATURAL RESOURCES COUNCIL OF MAINE INC

Form: Schedule G (2018)

Page: 1

Fundraiser Activity Information

EIN: 01-0270690 Part I, Line 2b

Name and Address	Activity	C1	Gross	C2	C3
			Receipts		
Compass Group Inc	The Compass group was retained to help	No	0	180,000	-180,000
124 Quay Street	organize and direct an endowment campaign				
Alexandria, VA 22314	in support of the Natural Resourced Council				
	of Maine's mission. The Compass group				
	agrees to provide consulting services for a 12				
	month period or as needed.				
Total:			0	180,000	-180,000

C1 = Fundraiser control of funds?

C2 = Amount paid to (or retained by) fundraiser

C3 = Amount paid to (or retained by) organization

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

NATURAL RESOURCES COUNCIL OF MAINE IN

Employer identification number 01-0270690

	TAL RESOURCES COUNCIL OF WAI	AT HAC						
Part	Types of Property		, <u>,</u>	1				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash conti			
1	Art-Works of art							
2	Art—Historical treasures							
3	Art-Fractional interests		- Ars					
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property		,	,				
9	Securities—Publicly traded	~	25	211,936	FAIR MARKE	T		
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC,							
	or trust interests	~	11	633,489	FAIR MARKE	τ		
12	Securities-Miscellaneous							
13	Qualified conservation							
	contribution—Historic							
	structures							
14	Qualified conservation contribution—Other					_		
15	Real estate - Residential							
16	Real estate-Commercial	<u> </u>						
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy			<u> </u>	_			
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()				ļ			
26	Other ► ()							
27	Other ► ()		<u></u>					
28	Other ► (
29	Number of Forms 8283 received	l by the or	ganization during the tax	year for contributions for				
	which the organization completed	Form 828	3, Part IV, Donee Acknowle	edgement	29	0	1	
							Yes	No
30a	During the year, did the organiza	tion receive	e by contribution any prop	erty reported in Part I, line	s 1 through		1. Te	
	28, that it must hold for at least t	hree years	from the date of the initial	contribution, and which is	n't required			1 4
	to be used for exempt purposes	for the enti	re holding period?			30a		
b	If "Yes," describe the arrangement	nt in Part II.						
31	Does the organization have a	gift acce	ptance policy that requi	res the review of any n	onstandard	J		
	contributions?					31	~	<u> </u>
32a	Does the organization hire or us	e third par	ties or related organization	ns to solicit, process, or s	ell noncash			
	contributions?					32a		~
b	If "Yes," describe in Part II.						1	
33	If the organization didn't report ar describe in Part II.	amount in	column (c) for a type of pro	operty for which column (a)	is checked,			

Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
	·
	777777777777777777777777777777777777777

	434848444444444444444444444444444444444
	,
	,

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 01-0270690 NATURAL RESOURCES COUNCIL OF MAINE INC Form 990, Part VI, Section A, Line 6 - Any person interested in the purposes and objectives of NRCM is eligible to become a member upon Form 990, Part VI, Section A, Line 7a - The nominating committee prepares a slate of candidates which is presented to the board of directors by the chair of the nominating committee, or by the chair's designee. This group of candidates is discussed and voted upon by the board of directors. Form 990, Part VI, Section B, Line 11b - The 990 is prepared internally and then reviewed by an outside accounting firm. The completed 990 is sent to all board members for review and comments prior to the final copy submission to the IRS. Form 990, Part VI, Section B, Line 12c - Board members and staff are required to disclose any conflict of interest that arises by virtue of their board service or employment. The organization will monitor the compliance with an annual disclosure statement that is distributed to these individuals. For any conflict of interest, the person involved in the conflict shall take action in consultation with chief executive officer or president of the board to avoid participation in the matter to effectively avoid the conflict. The president and/or chief executive officer will monitor ongoing transactions or other matters affecting the organization for the conflicts of interest and disclose those conflicts immediately to the executive committee or board as appropriate. Form 990, Part VI, Section B, Line 15 - The organization undertakes a process of compiling a comparison of salaries and benefits to ensure that the compensation is reasonable, given the market in which the organization operates. These comparisons are used to gauge ranges and salaries for staff. The executive director's salary is reviewed and approved by the executive committee of the board of directors. All other staff salary adjustments are recommended by the management team and approved by the finance committee as part of the budgeting process. Form 990, Part VI, Section C, Line 19 - The audited financial statements, form 990, annual report, and the gift acceptance policy is available on our web site, and upon request. The conflict of interest policy is reviewed and signed by all the board members and staff annually. Form 990, Part X, Line 10a - Section 1.263(a)-3(n) Election: The Natural Resources Council of Maine Inc. 3 Wade Street Augusta, ME 04330 EIN -01-0270690 The Natural Resources Council of Maine Inc. is electing to capitalize repair and maintenance costs under regulation Section 1.263(a)-3(n) Form 990, Part XI, Line 9 - change in value of gift annuities -12,166, increase in future interests \$26,557

Schedule O, Statement 1

NATURAL RESOURCES COUNCIL OF MAINE INC

Form: Form 990 (2018)

EIN: 01-0270690

Page: 1

Activity Or Mission Description

Part I, Line 1

Description

River from a proposed dam. Today, NRCM is the state's leading non-profit environmental group. Our mission is to protect, restore, and conserve Maine's environment, now and for future generations. We use science, outreach, and advocacy to educate and engage our members, supporters, policy makers, businesses, and the public about the most pressing environmental issues facing Maine. Our overarching goal is to inspire people to become better stewards of Maine's natural resources and communities. We focus on five issue areas: 1) Forests & Wildlife; 2) Healthy Waters; 3) Climate and Clean Energy; 4) Sustainable Maine; and, 5) Federal Policy.

Schedule O, Statement 2

NATURAL RESOURCES COUNCIL OF MAINE INC

Form: Form 990 (2018) EIN: 01-0270690

Page: 2

Mission Description

Part III, Line 1

Description

most pressing environmental issues facing Maine. Our overarching goal is to inspire people to become better stewards of Maine's natural resources. NRCM focuses on four program areas: 1. Climate and Clean Energy; 2. Healthy Waters; 3. Forests and Wildlife; and, 4. Sustainable Maine.

Schedule O, Statement 3

NATURAL RESOURCES COUNCIL OF MAINE INC

Form: Form 990 (2018)

EIN: 01-0270690 Part III, Line 4a

Page: 2

Program Sange Accomplishments Description

First Program Service Accomplishments Description

Description

recommendations on use of the VW funds and has begun installing high-speed EV charging stations. The survey provided valuable insight into key views and behaviors-such as when and where owners charge their cars-to help shape EV policies and programs. NRCM developed a climate vision for Maine based on community meetings, an opinion poll, our analysis of Maine's carbon goals, and economic and messaging analysis. The document, Energy Pathway for Maine, offers guiding principles for climate action and clean energy, considering Maine's housing, infrastructure, public health and workforce challenges. It was released with endorsements from twenty organizations and is a unified vision from multiple groups. It lives on its own website: www.energypathwaymaine.com where more than 40 businesses and organizations have signed on in support. We also led a successful effort to ensure Maine adopted a new carbon pollution cap for power plant emissions under the Regional Greenhouse Gas Initiative (RGGI). The cap will cut carbon emissions and generate more funds for energy efficiency.

Expense

1,023,826

Grants

0

Schedule O, Statement 4

Description

Form: Form 990 (2018)

EIN: 01-0270690

Page: 2

Activity

Code

Other Program Services Accomplishments

Part III, Line 4d

Revenue

0

Forests & Wildlife: Maine is home to the largest intact temperate forest in the world, supporting unparalleled habitat for many rare plants and animals. Maine forests also offer unique recreation options and provide jobs in the forest products and tourism industries. NRCM supports responsible land development and sustainable forest practices that protect sensitive ecosystems and wildlife, We also seek increased public ownership of Maine lands so future generations will know the Maine we love today. NRCM watchdogged the Land Use Planning Commission (LUPC), the state agency with authority over development permitting and zoning for 10.4 million acres of Maine's unorganized townships. LUPC sought to modify their rule requiring that new development be located within one mile of existing, compatible development to instead allow development up to ten miles from a public road and reinstate large tot subdivisions that fragment habitat and which the state banned in 2001. NRCM generated the intense public opposition that forced LUPC to modify their proposal to seven miles from "rural hubs". We found this change would still threaten 1.3 million acres, incentivize strip development, fragment habitat, and drive up costs for towns to service sprawiling development. We organized public comments, used media attention to expose the dangers of this plan, and mobilized hundreds of people to public hearings. Despite overwhelming opposition and 95% of public comments in favor of the one-mile rule, LUPC decided to allow development out to seven miles with some subdivisions allowed three miles from a public road. Because of this campaign, more people than ever support conservation of Maine's special places. NRCM will continue to encourage land conservation and work toward better land use planning rules for Maine. NRCM also intervened in a LUPC proceeding considering rezoning 51,000 acres around the Fish River Chain of Lakes for residential, commercial, and recreational development. We advocated for less development on two of the five
require an Environmental Impact Statement (EIS) before approving a new license. An EIS will provide an analysis of the collective impacts of all the dams on the health of the river and on fish passage. We believe the EIS will demonstrate that removal of at least some of the dams is necessary to prevent extinction of Atlantic salmon in the Kennebec and restore healthy populations of shad and alewife. NRCM also won changes to a Department of Environmental Protection (DEP) bill to allow the use of soils contaminated with toxic PCBs and heavy metals in road asphalt and other construction materials. Because of our scientific
analysis and testimony, the law now requires that any proposed re-use of "asphalt

encapsulated soils" for construction fill must go through a full DEP licensing review to ensure the material is safe for the proposed use. The only exception is soil contaminated solely with oil, which Maine is already using safely in road asphalt. Sustainable Maine: NRCM helped Maine develop statewide programs to recycle consumer products that pose a risk to public health and the environment, including programs for beverage containers (the "bottle bill"), computers and TVs ("e-waste"), and unwanted paint. Now we focus on providing citizen groups, schools, and municipal leaders the tools and support they need to reduce waste, increase recycling and composting, and discourage littering. NRCM published our School Food Recovery Handbook: A How-to Guide to Reduce Wasted Food in Maine's K-12 Schools to educate students, teachers and administrators about the environmental and health benefits of reducing food waste. The Handbook includes 13 sections with tips on how to set up waste separation stations in the lunchroom; how to use a "share table" so food is eaten or donated instead of thrown away; and how to make the program student-run so it becomes part of school culture. We also worked with Maine schools to reduce food waste. Thus far we have completed 14 projects in eight schools serving 3,277 students. Projects have included starting food waste separation and composting programs and switching from disposable plastic cutlery and trays to reusable silverware and trays. Since 2014 NRCM has worked with citizens' groups to champion local ordinances to ban polystyrene foam food containers and ban or place a fee on single-use plastic bags, leading to bag policies in 25 Maine towns and foam bans in 15 towns. Due to the success of these local policies, Maine recently became the first state in the U.S. to ban foam food containers and the third to ban single-use plastic bags. The foam ban goes into effect January 1, 2021, while the bag ban will launch on April 22, 2020, NRCM will educate the public about these policies and follow their implementation. Washington Watch/Federal Policy: NRCM cultivates and mobilizes public and business support to urge Maine's Congressional leaders to stand up for the health and well-being of Maine people and oppose federal environmental rollbacks. NRCM produces reports on issues such as the budget of the Environmental Protection Agency (EPA), generates group sign-on letters, produces compelling print ads, and organizes both high volume and high-quality communications to Maine's Delegation. This year we organized support for the EPA budget, the Clean Water Rule, and the Clean Power Plan. Federal policy oversight is a burgeoning part of our work and we are finding more and more people want to speak up on issues at the federal level that impact Maine. NRCM also launched the Maine Brewshed Alliance to identify, educate, and engage businesses and patrons of Maine's craft beer industry. With their help, we are urging Maine's Congressional leaders to safeguard the vital federal water protections that ensure Maine's waters are clean for the growing brewing industry.

Total: 1,023,826 0 0

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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2018

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

(g) Section 512(b)(13) controlled entity? (f)
Direct controlling
entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Yes 01-0270690 (f)
Direct controlling
entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) (d) Total income Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) Exempt Code section (c)
Legal domicile (state or foreign country) (c)
Legal domicile (state
or foreign country) **(b)** Primary activity (b) Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization NATURAL RESOURCES COUNCIL OF MAINE INC Name of the organization Part I Part II 9 Ξ ₹ Ø ල 4 <u>0</u> Ξ Ñ ල

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Schedule R (Form 990) 2018

Cat, No. 50135Y

Part III Identification of Helated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.	Related Organiz le or more related	ations Taxabl organizations	e as a Partr treated as	n ership. C	as a Partnership. Complete if the organiza eated as a partnership during the tax year	e organiza s tax year.	ion answe	red "Ye	uo "s	Form 990,	Part IV,	line 3	4,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity		(e) Predominant Si income (related, unrelated, excluded from tax under sections 512—514)	(f) Share of total income	(g) Share of end-of- year assets	(h) of- Disproportionate allocations?		(f) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or Ceneral or managing 1 partner?		(K) Percentage ownership
and the second second								Yes	2 N		Yes	<u>و</u>	
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(9)		_										 	
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	Related Organizations of the control	ations Taxabl	e as a Corp izations trea	oration or ted as a c	Trust. Comporporation or	plete if the trust durir	organizati	on ansv year.	vered '	"Yes" on F	orm 990), Part	
(a) Name, address, and EIN of related organization	d organization	(b) Primary activity	y Leg (state or	(c) Legal domicite (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	entity Shr	(f) Share of total income	S end-of	(g) Share of end-of-year assets	(h) Percentage ownership	Section	(i) Section 512(b)(13) controlled entity?
												Yes	₈
(1) KATRINA CHAMBERLIN TRUST 105 Front Street, Bath, ME 04530		Banking	ME		N/A	T				658,417	100%	ļ	
(2)									-				
(6)													
(4)									-				
(5)			-						_	-		_	
(9)										Politica			
(7)													
										ျှိ လ	Schedule R (Form 990) 2018	(Form (990) 2018

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

M. 1. C				Yes	N _o
Note: Complete line in any entry is fished in track in, in, or was sometions. 1. During the tay year, did the proparation engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	or more related organi	izations listed in Parts	s II–IV?	1	
Receipt of (in interest (iii) annuities (iii) rovalties, or (iv) rent from a controlled entity				1a	7
				1 _b	7
	•	•		7	
c Gill, grant, or capital contribution from related organization(s)				2 7	
d Loans or loan guarantees to or for related organization(s)				<u> </u>	۱
e Loans or loan guarantees by related organization(s)				1e	>
f Dividends from related organization(s)				+	, ,
			•	1a	7
Sale of assets to related of gallication(s)			•	-	>
n Furchase of assets from related organization(s)				i ÷	· \
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j Lease of facilities, equipment, or other assets to related organization(s)				=	۱
k Lease of facilities, equipment, or other assets from related organization(s)				*	7
I Performance of services or membership or fundraising solicitations for related organization(s)				=	>
m Performance of services or membership or fundraising solicitations by related organization(s)				1m	7
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d Keimbursement paid by related organization(s) for expenses			•	5	,
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2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	omplete this line, inclu	uding covered relation	ships and transacti	on threshol	ds,
(a)	(g)	(<u>0</u>	(p)		
Name of related organization	Transaction type (a — s)	Amount involved	Method of determining amount involved	ig amount invo	lved
KATRINA CHAMBERLIN TRUST	3	633,489	633,489 FAIR MARKET VALUE	UE	
		-			
(2)					
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(5)					
(9)			Schedule	Schedule R (Form 990) 2018	3) 2018

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) (b) (c) (d) (e) (f)	(2)	(0)	(b)	(e)	£	(6)	3	-	8	8
Name, address, and Ein of emily	Primary activity	country)	Predominant income (related, inrelated, excluded	Are all parmers section 501(c)(3)	Share of total income	Share of end-of-year assets	Disproportionate allocations?	ate Code V—UBI amount in box 20 of Schedule K-1	General or managing partner?	Percentage ownership
		·	from tax under sections 512—514)	organizations?			-			
			,	Yes No			Yes No		Yes No	
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chedule R (F	Form 990) 2018	Page 5
Part VII	Supplemental Information. Provide additional information for responses to questions on Schedule R. See instructions.	
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