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Form **990**

Return of Organization Exempt From Income Tax

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

2009

OMB No 1545-0047

Open to Publi

Department of the Treasur

The organization may have to use a copy of this return to satisfy state reporting requirements

	-		.'		3 7		mapecuon					
<u>A</u>	For t	he 2009 ca	alendar	year, or tax year beginning , 2009, and ending			, 20					
В	Check if	applicable	Please use IRS	C Name of organization Truck Drivers, Warehousemen & Helpers		D Employe	r identification number					
	Addres	s change	label or	Doing Business As Local Union No. 340		01	0095740					
		change	print or	Number and street (or P 0 box if mail is not delivered to street address) Room/suite	Į.	E Telephon	e number					
	Initial re		type. See	144 Thadeus Street	- 1	(207)	767-2106					
	Termina		Specific Instruc-	City or town, state or country, and ZIP + 4		,						
			tions.	South Portland, Maine 04106	l,	G Gross rece	unto 6 2 224 046					
		ed return	F Narr	e and address of process of process								
ш.	Applicati	ion pending		H(a)			or affiliates? Yes Vo					
_	T				Are all	l affiliates ind	cluded? LYes No					
		cempt status	√ 5	01(c) (5) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527	If "No.	," attach a li	st (see instructions)					
_		site: ►			Group ex	emption numb	er ► 0320					
		f organization:	Corpo	ration ☐ Trust ☐ Association ☑ Other ► Local Union L Year of formation		M State of le	egal domicile ME					
Pa	art I	Summ	ary									
	1	Briefly de	escribe	the organization's mission or most significant activities: To organize	work	ers and to	secure					
	'	improve	d hour	s, wages, working conditions and other economic advantages through	uah n	egotiatio	ns.					
õ	1	organizing and collective bargaining.										
ď		. T. ATLITT	ng nun									
Activities & Governance		05 1 4	г	7 6 16			• • • • • • • • • • • • • • • • • • • •					
ၾ	1			If the organization discontinued its operations or disposed of more than 25% of its ne	et asset		_					
∞5				g members of the governing body (Part VI, line 1a)		3						
ties	4	Number of	of indep	pendent voting members of the governing body (Part VI, line 1b)		4	0					
₹	5	Total nun	nber of	employees (Part V, line 2a)		5	46					
Ac	6	Total nun	nber of	volunteers (estimate if necessary)		6	0					
	1			ated business revenue from Part VIII, column (C), line 12		7a	0					
				siness taxable income from Form 990-T, line 34		7b	0					
				Pri	rior Yea	ır	Current Year					
	8	Contribut	ione an	d grants (Part VIII, line 1h)	2.3	13,742	2,314,821					
Ë					0	2,014,021						
Revenue		Program			4,130	<u>U</u>						
æ				ne (Part VIII, column (A), lines 3, 4, and 7d)			5,925					
	11 12	Total raya	enue (F	Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		900	300					
_	12	rotal reve	nue-ac	dd lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,3	18,772	2,321,046					
				ar amounts paid (Part IX, column (A), lines 1-3)	0		0					
10	14	Benefits p	oaid to	or for members (Part IX, column (A), line 4)		0	0					
Expenses	15	Salaries, c	ther co	mpensation, employee benefits (Part IX, column (A), lines 5-10)	1,3	13,256	1,294,817					
Den				Iraising fees (Part IX, column (A), line 11e)		0	0					
ŭ				expenses (Part IX, column (D), line 25) ▶	30-1-00	, (20) - 18, (Total) - 3	the state of the s					
			_	(Part IX, column (A), lines 11a-11d, 11f-24f)		53,289	1,075,993					
				Add lines 13–17 (must equal Part IX, column (A), line 25).	2.3	66,545	2,370,810					
				enses. Subtract line 18 from line 12		17,773)	(49,764)					
s or				RECEIVED Beginning			End of Year					
anc	200	Tatal ass.	-A- (D			34,638						
Net Assets Fund Baland	20			t X, line 16)			556,509					
돌	21	lotal liabl	IIIties (F	rart X, line 26)		39,109	110,744					
				Total total and mid and morphilis to it 20.10.	4	95,529	445,765					
Fe	rt II		ature E									
		and belief	natties of	perjuny I declare that I have examined this return, including accompanying schedules and correct, and complete Declaration of people (the tipa officer) is based on all inform	l stateme	ents, and to	the best of my knowledge					
				To see and see and see an all months								
Sig	ın			Tack	1	5/5	1/2010					
He	re	Signa	ture of 6		Date	_ / .	-					
			An	rescarson tres								
		Туре	or print r	ame and title		-	-					
		D		Date Check if	- 1	Preparer's ide	ntifying number					
		Preparer's signature		self-		(see instructio						
Paid		7	W	1-28-200 employed	▶ □							
Prep	arer's	kum/2 2	14									
	Only	if self-emp	ne (or you ployed),	Accounting office of Informaci 1. Ross	N	▶ 30	0293272					
		address, a	and ZIP +		none no	▶ (781 :	942-5800					
May	y the	IRS discu	ss this	return with the preparer shown above? (see instructions)	<u></u>	<u> </u>	✓ Yes 🗌 No					

Par	Statement of Program Service Accomplishments
1	Bnefly describe the organization's mission: Allows the organization to negotiate contracts, arbitrate cases and conduct all other necessary activities to ensure proper working conditions and economic advantages for its members.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$including grants of \$) (Revenue \$)
4h	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
70	(Code) (Expenses #
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	,
	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶

Pai	rt IV Checklist of Required Schedules			
			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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		✓
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	/	4 2007 2007
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	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.			
•	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.			
•	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.		, . , .	
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		√
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16		1
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	17		1
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		1
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		1
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		✓

Form	990 (2009)		Р	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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		✓
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 25.	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
С	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	į	1
	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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	_N/	A
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	N/	A
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		1
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):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
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
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		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	N/	A
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 11 and 19? Note. All Form 990 filers are required to complete Schedule O.		1	

Par	Statements Regarding Other IRS Filings and Tax Compliance			
		λ ⁴	Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		,	400
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		-	
				أنتنا
	gaming (gambling) winnings to prize winners?	1c	N/	A
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a 46	,	٠٠ [
	Statements, filed for the calendar year ending with or within the year covered by this return [22] 46 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	لستند
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	7		
	instructions)			و مناسب
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	<u> </u>	/
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	N/	Α
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓
	If "Yes," enter the name of the foreign country: ▶ N/A			-0/
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			A Paris
		5a		√
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c	N/	Α
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		√
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	N	A
7	Organizations that may receive deductible contributions under section 170(c).	12.7	<u>.</u>	, 10 m
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		. (* j.
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	N/	A
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7c		1
	required to file Form 8282?		5-, 3i - bi	v2 /
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e 7f		./
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	N/	Δ
-	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .			7.
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	N	A
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	46.5	3.	A CONTRACTOR
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		30 A	
	organization, have excess business holdings at any time during the year?	8	N/	A
9	Sponsoring organizations maintaining donor advised funds.			ا عقد
а	Did the organization make any taxable distributions under section 4966?	9a	_N/	A
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	N/	A
	Section 501(c)(7) organizations. Enter:		3.5° 1	F
	Initiation fees and capital contributions included on Part VIII, line 12		為	1 m
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities N/A	13.2		
11	Section 501(c)(12) organizations. Enter: Grees income from members or shareholders.			2 3.4
-	Gloss income from members of situationders	1 2		1 -
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		* 1. 1.	,
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	N/	A
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b N/A	Y#		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management	-		
			Yes	No
1a	Enter the number of voting members of the governing body	, 4 , 5 1, 4 , 5	10 21	
þ	Enter the number of voting members that are independent	,	*,	34
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2 2		11 of
_	any other officer, director, trustee, or key employee?			' -
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		1
4	supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		7
4	Did the organization hake any significant changes to its organizational documents since the prior Form 990 was filed? Did the organization become aware during the year of a material diversion of the organization's assets?	5		7
5 6	Does the organization have members or stockholders?	6	1	-
7a				
, u	of the governing body?	7a	✓	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	1	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		, e	
_	the year by the following:	4	3- W. W.	
а	The governing body?	_8a	✓	
ь	Each committee with authority to act on behalf of the governing body?	_8b	✓	
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	<u>9a</u>		✓
	etion B. Policies (This Section B requests information about policies not required by the Interest Code)	ernai		
Hev	enue Code.)			
		400	Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b	N/	A
	affiliates, and branches to ensure their operations are consistent with those of the organization?	100	217	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	11		1
44 A	form?	J. 35		
12a	and the contract of the contra	12a	1.	1
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
_	rise to conflicts?	12b	N/	(A
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
_	describe in Schedule O how this is done	12c	N/	A
13	Does the organization have a written whistleblower policy?	13		√
14	Does the organization have a written document retention and destruction policy?	14	্ৰেদ	√
15	Did the process for determining compensation of the following persons include a review and approval by	4.0	漢	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	13862	35.6	30733
a	The organization's CEO, Executive Director, or top management official	15a		V
b	Other officers or key employees of the organization	15b		1,55
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	27.10	1 3 4 5 1 4 4 5 6	25
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	16a		1
	with a taxable entity during the year?	100	1,2	-
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	. 3	1.00 mg 2 mg	ه کیرد
	the organization's exempt status with respect to such arrangements?	16b	N,	Â
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(or	c)(3)s	onlv)	
	available for public inspection. Indicate how you make these available. Check all that apply.	,,-,-		
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds o	f the	
	organization: ► Carl Guignard, 144 Thaddeus Street, South Portland, ME 04106 (207) 767-2106			

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

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. Use Schedule J-2 if additional space is needed.

- 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. 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.

(A)	(B)			(C)			(D)	(E)	(F)
Name and Title	Average hours per		_		_	that ap		Reportable compensation	Reportable compensation	Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
James Carson President and Business Agent				/	1	1		105,063	None	33,852
Denis Sisti Vice President				/				2,465	None	0
Carl Guignard Secretary/Treasurer & Business Agent				→	1			99,899	None	33,852
Kenneth Eaton Recording Secretary & Business Agent				· ✓	•			99,367	None	33,852
Jim Boynton Trustee				1				2,784	None	0
Alan Churchill Trustee and Business Agent				1				95,533	None	33,852
Steve Malia Trustee				1				2,204	None	O

Pa	1 VII Section A. Officers, Directors, Tru	istees, Key	Emp	loy			d Hig	hes			(continued)		
	(A)	(B)	_			C)			(D)	(E)	(F)		
	Name and trile	Average hours per week	P or director	nstitutional trustee	Officer	a Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations		
		-											
1b	Total	<u> </u>					<u> </u>	>	407,315	None	135,408		
2 —	Total number of individuals (including but reportable compensation from the organization list any former office	ation ►							<u>,</u>		Yes No		
3	employee on line 1a? If "Yes," complete S For any individual listed on line 1a, is the	ichedule J	for su	ıch	ınd	ıvid	ual				3 🗸		
4	the organization and related organizations individual.	greater tha	an \$1	50,0	000	? <i>If</i>	"Yes,"	" CO	mplete Schedu	ile J for such	4		
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," com	com olete	pen <i>Sch</i>	sati nedu	on ule	from J for s	any such	unrelated org	anization for	5 🗸		
Se	ction B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization.	ompensate	ed inc	lepe	ende	ent	contra	acto	rs that receive	d more than \$1	00,000 of		
	(A) Name and business add	dress							(B) Description of s	services	(C) Compensation		
_						-							
	Total number of independent contractors (includina b	ut no	t lın	nite	d to	those	 e list	ed above) who	received			
_	more than \$100,000 in compensation from								.,				

Par	VII	Statement of Rev	venue						
	4 P					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इ इ	1a	Federated campaigns		1a			1.3	1. 14 m	2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
grants		Membership dues		1b	2,314,821		á ,		
ğ,g	r .	Fundraising events .		1c				, " , <u>, , , , , , , , , , , , , , , , ,</u>	, , , , , ,
ar g		Related organizations		1d			- i.		
S, E					dd	1	,	٠.,	
r Si		All other contributions, gifts, g				غُ			
音		and similar amounts not include		1f				, "	
Contributions, gifts, grants and other similar amounts	g					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		30.00	
ರ್ಜಿ		Total. Add lines 1a-1f				2,314,821	San	3. 3. 3.	
					Business Code	الله والشاه م	au 1 2 10 mg		
Program Service Revenue	2a								
æ	ь								
<u>5</u>	c								
Šeī	d								
Ē	e								
ogra	f	All other program service	e revenue	,					
Ę	g	Total. Add lines 2a-2f			•		1 1 E 2 E 2 E 2 E 2 E	Section of the sectio	· 100 1 - 415
	3 4 5	Investment income (includer similar amounts) Income from investment of Royalties			▶	5,925			
			(i) Real		(ii) Personal	ر ما در الأوراد الأورد الأوراد الأورد الأوراد الأوراد الأوراد الأورد الأوراد الأوراد الأوراد الأوراد الأوراد الأوراد	1 7 ME 1 1 1 1 1 1 1 1 1	a table a fee	
	6a	Gross Rents		300					
	b	Less: rental expenses		0				1	7
	c	Rental income or (loss)		300		danie d		The sale of the sale of the	1 m m m m m m m m m m m m m m m m m m m
	d	Net rental income or (lo	ss)		🕨	300			
	7a	Gross amount from sales of	(i) Securitie	es	(II) Other	14.1			
		assets other than inventory				The state of the s		1	ر از
	ь	Less. cost or other basis							
		and sales expenses .				Pro F			
	С	Gain or (loss)				2		4	11.15
	d	Net gain or (loss)			<u> </u>	0			
<u>a</u>	8a	Gross income from	fundraisir	าต					
evenue		events (not including \$		· 		1 30 e o o o	- \$	the second	2.2
ě		of contributions reported	on line 1	c).		Carrett a		69 4 4	
Œ		See Part IV, line 18		· a		asia in the			
Other		Less: direct expenses		. b			1. 18	Jan 10 (-) - 5 &	
ö	С	Net income or (loss) fro	m fundrais	sing e	vents 🕨	0			
	9a	Gross income from gam	ing activitie	25			11.5		
		See Part IV, line 19		. a		3			and the same of th
		Less: direct expenses,				7.13	3 - 4.		
	С	Net income or (loss) fro	m gamıng	activ	ities 🕨	0			ļ
	10a	Gross sales of inve	ntorv. le:	SS		- 3 A			1.
	l	returns and allowances					· . · .	1	
		Less: cost of goods so		. b	L				1 - 1 - 1
	С	Net income or (loss) fron		nvent		0			
		Miscellaneous Reve	enue		Business Code	7 3 3 3 6 6 7		*	
	11a	***************************************				ļ			
	b	***************************************							
	С					1			
	d	All other revenue						ļ	
	e	Total. Add lines 11a-11			>	0		2 1	1
	12	Total revenue. See ins			_	2,321,046			

Part IX Statement of Functional Expenses

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

	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	407,315			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	434,857			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	159,454			
9	Other employee benefits	221,271			
10	Payroll taxes	71,920			
11	Fees for services (non-employees):				
а	Management				
b	Legal	36,166			
	Accounting	5,260			
d	Lobbying	20,000			
е	Professional fundraising services. See Part IV, line 17		多、沙克里里		
f	Investment management fees				
g	Other	17,683			
12	Advertising and promotion	2,644	 		·····
13	Office expenses	117,757			
14	Information technology				
15	Royalties				
16	Occupancy	32,828			
17	Travel	49,310			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	13,289			
20	Interest	4,734			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	59,626			
23	Insurance	8,600			
24	Other expenses. Itemize expenses not covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)	507.460			
а	Per Capita tax Steward & member dues refunded	567,162			
b		73,514			-
С	Automobile expenses	25,111			
d	Contributions	33,784	· · · · · · · · · · · · · · · · · · ·	 	
е		0.505		 	
	All other expenses	8,525			
25 26	Total functional expenses. Add lines 1 through 24f Joint costs. Check here ▶ ☐ if following	2,370,810			
_•	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	idiorability solicitation	1			

	rt X	Balance Sheet	· · <u>-</u>		Tage 11
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	320,577	2	290,414
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key		200	Company of the Control of the Contro
		employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .		6	
Assets	7	Notes and loans receivable, net		7	
SS	8	Inventories for sale or use		8	
٩	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or 10a 775,846 other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b 511,171	312,641	10c	264,675
	11	Investments—publicly traded securities		11	
	12	Investments—other secunties. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
- 1	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,420	15	1,420
_	16	Total assets. Add lines 1 through 15 (must equal line 34)	634,638	16	556,509
	17	Accounts payable and accrued expenses	11,966	17	17,812
ı	18	Grants payable		18	
	19	Deferred revenue		19	<u>,</u>
	20	Tax-exempt bond liabilities	. <u></u>	20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
ļ	24	Unsecured notes and loans payable to unrelated third parties	127,143		92,932
1	25	Other liabilities. Complete Part X of Schedule D	 -	25	
_	26	Total liabilities. Add lines 17 through 25	139,109	26	110,744
ces		Organizations that follow SFAS 117, check here ▶			
ā	27	Unrestricted net assets	495,529	27	445,765
Ba	28	Temporanly restricted net assets		28	
힏	29	Permanently restricted net assets		29	
Net Assets or Fund Balan		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
Ş	30	Capital stock or trust principal, or current funds	. =	30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
AS	32	Retained earnings, endowment, accumulated income, or other funds		32	
É	33	Total net assets or fund balances	495,529	33	445,765
_	34	Total liabilities and net assets/fund balances	634,638	34_	556,509
					Form 990 (2009

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🗀 Accrual 🗀 Other	,	<u>Ş</u>	. 8
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	100	- Tra ,	25 × 4 4
	Schedule O.			7,
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .	2a		✓
b	Were the organization's financial statements audited by an independent accountant?	2b	✓	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		1
	If the organization changed either its oversight process or selection process during the tax year, explain in	5	, ,	
	Schedule O.	اً إِنَّ اللَّهِ اللَّ		, 3 , 1
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	6	- 4	
	issued on a consolidated basis, separate basis, or both	2 .	· }_	`
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	كست	F ,	2
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a	_	✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			١.
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	N/	A

Form **990** (2009)

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

омв No 1545-0047 2009

Open to Public Inspection

Employer identification number Name of the organization 0095740 Truck Drivers, Warehousemen and Helpers Local Union No. 340 01 : Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 2 Aggregate grants from (during year) 3 Aggregate value at end of year . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Yes No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements 2b b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) . . . 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a wrtten policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1

Pac	10	2
rac		-

Par	t III Organizations Maintain	ing Collections	of Art, His	storica	l Treasures, o	or Othe	er Similar A	ssets (c	ontin	ued)
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply).									
а	Public exhibition		d		oan or exchan					
b	Scholarly research		е		Other					
С	☐ Preservation for future genera									
4	Provide a description of the organizer AIV.	ation's collection	s and expl	ain hov	v they further th	ne orga	nization's exe	empt pur	pose	ın
5	During the year, did the organization assets to be sold to raise funds rathe	solicit or receive d	onations of ained as pa	art, his	torical treasures e organization's	, or oth collecte	er sımilar on? .		es 🗌	No
Pai	Escrow and Custodial A IV, line 9, or reported an					swered	"Yes" to Fo	rm 990,	Part	
	Is the organization an agent, truste included on Form 990, Part X?					s or otl	ner assets no	t 🗌 y	es 🗀] No
b	If "Yes," explain the arrangement in	Part XIV and cor	nplete the	followi	ng table:					
						4.	<u>A</u>	mount		
C	Beginning balance					1c				
d	Additions during the year					1d		-		
	Distributions during the year					1e 1f				
	Ending balance			 no 010					es [No
b	If "Yes," explain the arrangement in	Part XIV.				· · ·				
Pal	t V Endowment Funds. Co	· · · · · · · · · · · · · · · · · · ·	T		(c) Two years ba					book
	_	(a) Current year	(b) Prior	year	(c) Two years ba		Three years back			
1a	Beginning of year balance		 							
b	Contributions									1:
	Net investment earnings, gains, and losses			···-						
	Grants or scholarships							-		نحسدة
е	Other expenditures for facilities and programs									,
f g	Administrative expenses End of year balance									
2	Provide the estimated percentage of	of the year end ba	alance held	as:						
а	Board designated or quasi-endown	nent ▶	%							
b	Permanent endowment ▶	%								
С	Term endowment ▶ %	6								
3 a	3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No									
	(i) unrelated organizations							3a(i)		<u> </u>
	(ii) related organizations							3a(ii)		
	If "Yes" to 3a(ii), are the related org							3b		<u> </u>
	Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.									
Par						-				
	Description of investment	(a) Cost or o			est or other is (other)	depre	umulated ciation	(d) Boo	k value	.
1a	Land				19,000				19	,000_
b	Buildings				368,021		253,950		114	.071
С	Leasehold improvements						49.4.555			
d	Equipment			<u> </u>	195,092		184,626			.466
e Teta	Other		100 D-4 V	!··	193,733		72,595			.138
rota	. Add lines ta titrough te (Column (a)	must equal Form S	190, Paπ X,	column	(D), IIIIE 1U(C))	· · · ·	▶		264	.675

Part VII Investments—Other Securitie	s. See Form 990, Part	X, line 12.
(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 denvatives		
Closely-held equity interests		
Other		
,		
		ļ
	-	
	-	
•••••	-	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Relate	ed. See Form 990, Part	
(a) Description of investment type	(b) Book value	(c) Method of valuation:
		Cost or end-of-year market value
	<u> </u>	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)		
Part IX Other Assets. See Form 990, Pa	art X, line 15.	
	(a) Description	(b) Book value
Security Deposit		1,420
	~~ <u></u>	
Total. (Column (b) must equal Form 990, Part X, col.	(B) line 15.)	▶ 1,420
Part X Other Liabilities. See Form 990		7,1
1. (a) Description of liability	(b) Amount	
Federal income taxes		
T than t		
	 	
	<u> </u>	
	 	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	<u> </u>	

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

Page	4

Pai	T XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	taten	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1_	2,321,046
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,370,810
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3_	(49,764)
4	Net unrealized gains (losses) on investments	4_	0
5	Donated services and use of facilities	5_	0
6	Investment expenses	6_	0
7	Pnor penod adjustments	7_	0
8	Other (Describe in Part XIV.)	8	0
9	Total adjustments (net). Add lines 4 through 8	9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	(49,764)
		e pe	2,321,046
1	Total revenue, gains, and other support per audited financial statements	250	2,321,040
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains on investments		
a	The directized gains on investments		
b	Donated services and use of facilities		
C	recoverior of prior your grants	-	
d		26	2
e	Add lines 2a through 2d	3	
3	Subtract line 2e from line 1		2,321,040
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	-	
b	Add lines 4a and 4b	40	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expen		
1	Total expenses and losses per audited financial statements	1	2,370,810
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	3	
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV.)		
e	Add lines 2a through 2d	26	0
3	Subtract line 2e from line 1	3	2,370,810
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	6.7	
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV.)		
C	Add lines 4a and 4b	40	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,370,810
Par	t XIV Supplemental Information	_	<u> </u>
and	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d a part to provide any additional information.		
	······································		

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

2009
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990.

Name of the organization Employer identification number Truck Drivers, Warehousemen and Helpers Local Union No. 340 0095740 01 Part VI, Section C, Line 19: The Executive Board of Teamsters Local Union No. 340 meets on a monthly basis to review the financial activity of the Local Union and to discuss matters relative to the general membership. The Secretary-Treasurer reports to the general membership of the Local Union on a regular basis the financial status of the Local as required by the Local Union's By-Laws and the Teamsters's International Constitution. The Local Union makes available to its general membership, upon request for review, any governing document or policy as required by its By-Laws, the U.S. Department of labor and the Internal Revenue Service.

Form 8868

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box. If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on part of the complete Part II unless you have already been granted an automatic 3-month extension on a previous property. 	ige 2 o	
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)		d Form 8888
A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this Part I only	box an	d complete
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 time to file income tax returns.	to requ	est an extension o
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automation one of the returns noted below (6 months for a corporation required to file Form 990-T). However, yelectronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990 returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and sig 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Citerians.	ou car -BL, 60 ned pag	inot file Form 8868 169, or 8870, group ge 2 (Part II) of Form
print Teams for Local Union No. 340		entification number
File by the due date for filing your P.D. 30x 23-90	•	
return See instructions City town or post office, state, and ZIP code. For a foreign address, see instructions South 1051/and ME 04/16		
Check type of return to be filed (file a separate application for each return): Form 990 Form 990-BL Form 990-BL Form 990-EZ Form 990-FC Form 990-PF Form 1041-A		Form 4720 Form 5227 Form 6069 Form 8870
• The books are in the care of ► Mr. Carl Guinard Telephone No. ► (207) 767 - 2166 FAX No. ► () • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)		
for the whole group, check this box	. > [and attach
1 I request an automatic 3-month (6 months for a corporation required to file Form 9 until August 16, 2010, to file the exempt organization return for the organization's return for: Color of the organization's return for: Color of the organization	d abov	e. The extension is 103 9
► ☐ tax year beginning, 20, and ending		, 20
2 If this tax year is for less than 12 months, check reason: Initial return Final return Ci	ange ir	accounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See Instructions.	3a	\$ N/A
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.		s N/A
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	s N/A
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-E0 for payment instructions.	and F	orm 8879-EO