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#### Form **990-PF**

Department of the Treasury Internal Revenue Service

#### **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2009

OMB No 1545-0052

For	caler	ndar year 2009, or tax year beginning		, and ending		<del></del>
G C	heck	all that apply: Initial return	Initial return of a f	ormer public charity	Final return	n
		Amended return	Address chan	ige L	Name change	
Use	the	IRS Name of foundation			A Employer identification	n number
	abel	ASSOCIATED GENERAL CO	NTRACTORS OF	MAINE		
	erwi		<del> </del>		01-0445998	3
	print		elivered to street address)	Room/sui	b Telephone number	
	r typ: Sne	10 POX DOX 3313			207-622-47	41
	ructi	City or town, state, and ZIP code	1.0		C if exemption application is p	
		AUGUSTA, ME U4332-55			D 1. Foreign organization	
H C	٦.	stype of organization: X Section 501(c)(3) ex			Foreign organizations me check here and attach co	omputation L
<u> </u>	_	<del></del>	Other taxable private found		E If private foundation sta	
		arket value of all assets at end of year J Account	•	X Accrual	under section 507(b)(1	,, ,,
		Part II, col. (c), line 16) $421$ , $474$ . (Part I, colu	ther (specify)	hacia l	F   If the foundation is in a	
D	rt I		Τ	T T	under section 507(b)(1	· · · · · · · · · · · · · · · · · · ·
Pa	irt i	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
_	-		3,000.		-	(cash basis only)
	1	Contributions, gifts, grants, etc., received  Check X if the foundation is not required to attach Sch. B	3,000.			
	2	Interest on savings and temporary				
	1	cash investments Dividends and interest from securities	-		<del>-</del>	
	1	Gross rents				<del>                                     </del>
		Net rental income or (loss)				<del></del>
		Net gain or (loss) from sale of assets not on line 10				-
υe	Ь	Gross sales nace for all				
Revenue	7	Capital gain net income (from Part IV, line 2)			0.	-
æ	8	Net short-term capital gain	<u>-</u> .			
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	Ь	Less Cost of goods sold				
	C	Gross profit or (loss)				
	11	Other income				
[	12	Total, Add lines 1/through 11	3,000.		0. 0.	<u></u>
[] [	13_	Compensation of officers, directors trustees, etc	0.		0. 0.	0.
ļ	14	Other employee salaries and wages				
S	别	Pentant Penta				
penses		Legariees				
çbe	6	Older Groves Swohal fees		<u> </u>		
EX		Interest				
[ <b>U</b> Administrative	17	Taxes				
stra		Depreciation and depletion				
Ë	19 20	Occupancy				
a &	21	Travel, conferences, and meetings				
CUIN and Ac	22	Printing and publications		<u>.                                    </u>		<del> </del>
		Other expenses STMT 1	3,450.		0. 0.	3,450
ூ ⊕ ating	24	,				0,200
~		expenses. Add lines 13 through 23	3,450.		0. 0.	3,450
ي ق	25	Contributions, gifts, grants paid	14,500.			14,500
-		Total expenses and disbursements.				
<u>.</u>		Add lines 24 and 25	17,950.		0.	17,950
2	27	Subtract line 26 from line 12:				_
<b>2</b>	a	Excess of revenue over expenses and disbursements	-14,950.			
	b	Net investment income (if negative, enter -0-)			0.	
رر 	_ c	Adjusted net income (if negative, enter -0-)			0.	

Form 990-PF (2009)

EDUCATION FOUNDATION

01-0445998

Г	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
느	ai t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	[		
	2	Savings and temporary cash investments			
	3	Accounts receivable ► 640.	·		
	ł	Less: allowance for doubtful accounts ▶	640.	640.	640.
	4	Pledges receivable ▶			
	1	Less; allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		_	
	`	disqualified persons			
	7	Other notes and loans receivable			
	'	Less; allowance for doubtful accounts			
"	۰	Inventories for sale or use			
ěţ	1	Prepaid expenses and deferred charges			
Assets	1				<del></del>
-		Investments - U.S. and state government obligations			
	1	Investments - corporate stock		<u> </u>	
	١	Investments - corporate bonds		<del></del> .	
	וון	Investments - land, buildings, and equipment: basis			
		Less accumulated depreciation			
	ı	Investments - mortgage loans		100 001	(
	l · -	Investments - other STMT 2	357,592.	420,834.	420,834.
	14	Land, buildings, and equipment: basis			
	ļ	Less accumulated depreciation			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers)	358,232.	421,474.	421,474.
	17	Accounts payable and accrued expenses	2,287.	2,287.	
	18	Grants payable	Î		
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
⋍	22	Other liabilities (describe )			
		, , , , , , , , , , , , , , , , , , , ,		· · · · · · · · · · · · · · · · · · ·	
	23	Total liabilities (add lines 17 through 22)	2,287.	2,287.	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.	i		
es	24	Unrestricted			
Net Assets or Fund Balances	۱	Temporarily restricted			
3ak	25	Permanently restricted	355,945.	419,187.	
펄	20	Foundations that do not follow SFAS 117, check here	333,743.	415,107.	
Ē		· ·	1		
<u></u>	0.7	and complete lines 27 through 31.			
sts	ı	Capital stock, trust principal, or current funds			
SS	ı	Paid-in or capital surplus, or land, bldg., and equipment fund	<del></del>		
Ę,	29	Retained earnings, accumulated income, endowment, or other funds		410 100	
ž	30	Total net assets or fund balances	355,945.	419,187.	
			250 020	404 484	
	31	Total liabilities and net assets/fund balances	358,232.	421,474.	
P	art	III Analysis of Changes in Net Assets or Fund Ba	lances		
Ξ				<b>,</b>	
1		net assets or fund balances at beginning of year - Part II, column (a), line 3			
		t agree with end-of-year figure reported on prior year's return)		1	355,945.
		amount from Part I, line 27a	2	-14,950.	
3	Othe	r increases not included in line 2 (itemize)   UNREALIZED G	AIN ON INVEST	MENTS 3	78,192.
4	Add	lines 1, 2, and 3		4	419,187.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, coli	umn (b), line 30	. 6	419,187.
022					Form <b>990-PF</b> (2009)

Form 990-PF (2009)

EDUCATION FOUNDATION

01-0445998

2-Story Drick w	cribe the k arehouse;	ind(s) of property sold (e.g. or common stock, 200 shs	, real estate, . MLC Co.)		1 1	How acquir - Purchase - Donation		c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a									
b NC	ΝĒ								
<u>c</u>									
					<u> </u>				
<u>e</u>					Щ				<del></del>
(e) Gross sales price	(1)	Oepreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (loss) (e) plus (f) minus (	
<u>a</u> b	<del> </del>			<del>_</del>		<u>,                                      </u>			_
C									
d							_		
e						_			
Complete only for assets show	ng gain in	column (h) and owned by t	he foundatior	on 12/31/69			(1) (	Gains (Col. (h) gain	minus
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			col. (	k), but not less than Losses (from col. (I	1 -0-) <b>or</b> 1))
a									
b									
С		-							
d	<u> </u>								
е	<u> </u>							<del></del>	· ·
2 Capital gain net income or (net c	•	( " ( " ) " " " " " " " " " " " " " " "	ın Part I, line	7 7	}	2			
3 Net short-term capital gain or (lo if gain, also enter in Part I, line 8 if (loss), enter -0- in Part I, line 8	, column (		d (6):		}	3			
Part V Qualification U		Section 4940(e) for	Reduced	Tax on Net	Inv	estmer	nt Inco	me	
If section 4940(d)(2) applies, leave to Was the foundation hable for the sec If "Yes," the foundation does not qua 1 Enter the appropriate amount in	ction 4942 alify under	tax on the distributable am section 4940(e). Do not co	mplete this pa	ırt.					X Yes No
(a) Base period years Calendar year (or tax year beginn	ing in)	(b)							·
2008		Adjusted qualifying dist	ributions	Net value of no	(c) ncha		assets	Distrib (col. (b) divi	(d) ution ratio ded by col. (c))
2000		Adjusted qualitying dist	ributions	Net value of no			assets	Dıstrıb (col. (b) dıvı	útión ratio
2007		Adjusted qualifying dist	ributions	Net value of no			assets	Distrib (col. (b) divi	útión ratio
2007 2006		Adjusted qualifying dist	ributions	Net value of no			assets	Distrib (col. (b) divi	útión ratio
2007 2006 2005		Adjusted qualifying dist	ributions	Net value of no			assets	Distrib (col. (b) divi	útión ratio
2007 2006		Adjusted qualifying dist	ributions	Net value of no			assets	Distrib (col. (b) divi	útión ratio
2007 2006 2005 2004		Adjusted qualifying dist	ributions	Net value of no			assets	(col. (b) divi	útión ratio
2007 2006 2005 2004 2 Total of line 1, column (d)	5-year ha				ncha	ritable-use	assets	Distrib (col. (b) divi	útión ratio
2007 2006 2005 2004  2 Total of line 1, column (d) 3 Average distribution ratio for the		ise period - divide the total o			ncha	ritable-use	assets	(col. (b) divi	útión ratio
2007 2006 2005 2004 2 Total of line 1, column (d)		ise period - divide the total o			ncha	ritable-use	assets	(col. (b) divi	útión ratio
2007 2006 2005 2004  2 Total of line 1, column (d) 3 Average distribution ratio for the	ence if les	ise period - divide the total o s than 5 years	on line 2 by 5,		ncha	ritable-use	assets	(col. (b) divi	útión ratio
2007 2006 2005 2004  2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in existe	ence if les	ise period - divide the total o s than 5 years	on line 2 by 5,		ncha	ritable-use	assets	2 3	útión ratio
2007 2006 2005 2004  2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in existe	ence if les: ble-use as	ise period - divide the total of s than 5 years ssets for 2009 from Part X, I	on line 2 by 5,		ncha	ritable-use	assets	2 3 4	útión ratio
2007 2006 2005 2004  2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in existed 4 Enter the net value of noncharita 5 Multiply line 4 by line 3	ence if les: ble-use as	ise period - divide the total of s than 5 years ssets for 2009 from Part X, I	on line 2 by 5,		ncha	ritable-use	assets	2 3 4 5	útión ratio
2007 2006 2005 2004  2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in existe 4 Enter the net value of noncharita 5 Multiply line 4 by line 3 6 Enter 1% of net investment inco	ence if less ble-use as me (1% o	ise period - divide the total os s than 5 years ssets for 2009 from Part X, I	on line 2 by 5,		ncha	ritable-use	assets	2 3 4 5 6	útión ratio

ASSOCIATED GENERAL CONTRACTORS OF MAINE Form 990-PF (2009) EDUCATION FOUNDATION 01-0445998 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions 1a Exempt operating foundations described in section 4940(d)(2), check here \( \bigcap \) and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here | and enter 1% 0. 1 of Part I. line 27h c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: a 2009 estimated tax payments and 2008 overpayment credited to 2009 b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 60 d Backup withholding erroneously withheld 6d 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2010 estimated tax Refunded > Part VII-A | Statements Regarding Activities No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Yes any political campaign? 1a Х X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? X 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. > \$ 0 • (2) On foundation managers. ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? X 2 If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes X X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law X remain in the governing instrument? 6 7 X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions) MEb If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 8b X 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule fisting their names and addresses

Х

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

orm 990-PF (2009) EDUCATION FOUNDATION 01-04	45998		Page !
Part VII-A   Statements Regarding Activities (continued)	43770		
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			I
section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		x
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	<del>                                   </del>		<u> </u>
August 17, 2008?	12		x
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
Website address WWW.AGCMAINE.ORG	L <u>I</u>		
14 The books are in care of ► JOHN O'DEA  Telephone no. ► 207-	622-4	741	
	04332	_	
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b></b>	
and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a During the year did the foundation (either directly or indirectly):			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	,		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person?	,		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	,		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	,		
(5) Transfer any income or assets to a disqualified person (or make any of either available			
for the benefit or use of a disqualified person)?	,		
(6) Agree to pay money or property to a government official? (Exception. Check "No"			
If the foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days.)	, j j	ĺ	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1 1	- 1	
section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? N/A	1b		
Organizations relying on a current notice regarding disaster assistance check here	] [		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1 1		
before the first day of the tax year beginning in 2009?	1c		_X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
defined in section 4942(j)(3) or 4942(j)(5)):	- 1		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	1 1		
before 2009?	)		
If "Yes," list the years ▶ 2008 ,,,		- 1	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1 1		
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
statement - see instructions.)	26	Х	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
<b>-</b>			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
during the year?	,		
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
Form 4720, to determine if the foundation had excess business holdings in 2009) N/A	<u></u>		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	1 1		ļ

ASSOCIATED GENERAL CONTR orm 990-PF (2009) ' EDUCATION FOUNDATION	ACTORS OF MAI	NE	01-04459	998	Page 6
Part VII-B   Statements Regarding Activities for Which I	form 4720 May Be I	Required (contro		-	raye
5a During the year did the foundation pay or incur any amount to:	om may bo i	Togan oa (comm	1		$\overline{}$
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	AQ45/a\\2		es X No		
	` ''		ES LALINO	-	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, offectly or main		es X No	1	
any voter registration drive?	•				
(3) Provide a grant to an individual for travel, study, or other similar purposes		X Y	es L No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	ļ	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				į
the prevention of cruelty to children or animals?		Y <sub>1</sub>	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		L	5b	X
Organizations relying on a current notice regarding disaster assistance check h	ere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ined			
expenditure responsibility for the grant?	N	I/A 🔲 Y	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?	, , ,		es X No	- 1	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6ь	x
If "Yes" to 6b, file Form 8870			-	<del></del>	+
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		s X No		İ
b If yes, did the foundation receive any proceeds or have any net income attribute			N/A	7b	-
Part VIII Information About Officers, Directors, Trust		nogoro Highl		70	<del></del>
Paid Employees, and Contractors		yers, migni	<b>,</b>		
List all officers, directors, trustees, foundation managers and their					
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	accou	xpense int, other wances
			Compensation		
				ŀ	
SEE STATEMENT 3		l o.	0.	ŀ	0.
		-		-	<del></del>
		ļ		]	
				<del> </del>	
		ļ <del></del>			
		<u> </u>		<u> </u>	
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(4)	T	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) E	xpense int, other
	devoted to position	(C) Componsulon	and deferred compensation		wances
NONE					
		_		1	
				<del>                                     </del>	
<del></del>		]			
			<u> </u>	<del>                                     </del>	

Total number of other employees paid over \$50,000

Form 990-PF (2009) EDUCATION FOUNDATION		)445998 Page 7
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, en	ter "NONE."	<del></del>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<del> </del>	
	<del> </del>	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stanumber of organizations and other beneficiaries served, conferences convened, research papers p.		Expenses
1 N/A	Toduced, etc.	·
1 44/44		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	<u> </u>	<del>-</del>
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1N/A		
2		
All other program-related investments. See instructions.		
<u> </u>	<del></del>	
Total. Add lines 1 through 3	<b>D</b>	0.

## ASSOCIATED GENERAL CONTRACTORS OF MAINE EDUCATION FOUNDATION

01-0445998

Part X Minimum Investment Return (All domestic foundations must complete this pair	rt. Foreign foundations, se	e instructions )
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
a Average monthly fair market value of securities	1a	374,869.
<b>b</b> Average of monthly cash balances	16	
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	374,869.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	374,869.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,623.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	369,246.
6 Minimum investment return. Enter 5% of line 5	6	18,462.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foreign organizations check here and do not complete this part.)	g foundations and certain	
1 Minimum investment return from Part X, line 6	1	18,462.
2a Tax on investment income for 2009 from Part VI, line 5		<del></del>
b Income tax for 2009. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	18,462.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	18,462.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	18,462.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>17,950.</u>
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	17,950.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	17,950.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether 4940(e) reduction of tax in those years.	the foundation qualifies for the	e section

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1	Distributable amount for 2009 from Part XI, line 7	<del>-</del>			18,462.
2	Undistributed income, if any, as of the end of 2009		- · · · · · · · · · · · · · · · · · · ·		
a	Enter amount for 2008 only			21,634.	
	Total for prior years:		0.		
2	Excess distributions carryover, if any, to 2009:		0.		
	From 2004				
	From 2005				
	From 2006				
	From 2007				
	From 2008				
	Total of lines 3a through e	0.			
	Qualifying distributions for 2009 from	0.			
	Part XII, line 4: ►\$ 17,950.			1	
	Applied to 2008, but not more than line 2a			17,950.	
	Applied to undistributed income of prior			17,550.	
	''		0.		
	years (Election required - see instructions)		0.		<del></del>
	Treated as distributions out of corpus	0.			
	(Election required - see instructions)	U •			<u></u>
	Applied to 2009 distributable amount	0.			0.
	Remaining amount distributed out of corpus	0.			0.
	Excess distributions carryover applied to 2009 (if an amount appears in column (d), the same amount must be shown in column (a))	0.			<u> </u>
6	Enter the net total of each column as indicated below;				
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b	Prior years' undistributed income Subtract		-		
	line 4b from line 2b		0.		
	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d	Subtract line 6c from line 6b. Taxable				
	amount - see instructions		0.		
е	Undistributed income for 2008. Subtract line				
	4a from line 2a. Taxable amount - see instr.			3,684.	
f	Undistributed income for 2009. Subtract				
	lines 4d and 5 from line 1. This amount must				
	be distributed in 2010				18,462.
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3)	0.			
8	Excess distributions carryover from 2004				
	not applied on line 5 or line 7	0.			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	0.			
0	Analysis of line 9:			<del>.</del>	
a	Excess from 2005				
þ	Excess from 2006				
C	Excess from 2007				
d	Excess from 2008		:		1
е	Excess from 2009				<u> </u>

orm 990-PF (2009)	EDUCATION	FOUNI

01-0445998

Part XIV Private Operating Fo	oundations (see ins	structions and Part VII	A, question 9)	N/A			
1 a If the foundation has received a ruling or	determination letter that	it is a private operating					
foundation, and the ruling is effective for 2009, enter the date of the ruling							
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)							
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years				
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total		
investment return from Part X for							
each year listed							
b 85% of line 2a							
c Qualifying distributions from Part XII,				<u> </u>			
line 4 for each year listed	-						
d Amounts included in line 2c not							
used directly for active conduct of							
exempt activities			-				
e Qualifying distributions made directly							
for active conduct of exempt activities.							
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					<del></del>		
alternative test relied upon:							
a "Assets" alternative test - enter:							
(1) Value of all assets							
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)							
b "Endowment" alternative test - enter							
2/3 of minimum investment return shown in Part X, line 6 for each year listed							
c "Support" alternative test - enter:							
(1) Total support other than gross							
investment income (interest, dividends, rents, payments on							
securities loans (section							
512(a)(5)), or royalties)							
(2) Support from general public and 5 or more exempt							
organizations as provided in							
section 4942(j)(3)(B)(III)							
(3) Largest amount of support from							
an exempt organization							
(4) Gross investment income  Part XV   Supplementary Info	rmation (Comple	to this part only	if the foundation	had \$5,000 or me	ro in accote		
Part XV Supplementary Info			ir the louridation	nad \$5,000 or me	ire iii assets		
	<del>-</del>	11311 40110113.)					
<ol> <li>Information Regarding Foundation</li> <li>List any managers of the foundation who</li> </ol>	-	than 20/ of the total contr	hutions recoved by the	foundation before the elec	a of any tay		
year (but only if they have contributed m			inations received by the	ioditation before the clos	e of any lax		
NONE	. , ,	, ,, ,,					
b List any managers of the foundation who	own 10% or more of the	e stock of a corporation (	or an equally large portio	on of the ownership of a pa	rtnership or		
other entity) of which the foundation has			or an equally large period	m or the evinerally or a pa	. thoromp or		
NONE							
2 Information Regarding Contributi	on. Grant. Gift. Loan.	Scholarship, etc., Pr	ograms:	· ·	<del> </del>		
Check here ▶ ☐ if the foundation o				ot accept unsolicited requi	ests for funds. If		
the foundation makes gifts, grants, etc. (							
a The name, address, and telephone numb	per of the person to whor	n applications should be	addressed:				
JOHN O'DEA, ASSOCIAT				207-622-4741			
181 WHITTEN ROAD, P.	O. BOX N, A	UGUSTA, ME	04332				
b The form in which applications should b							
STANDARD FORM PROVID	FD SPOS MKI	TTEN GUALS	POMMAKI				
c Any submission deadlines: NONE							
d Any restrictions or limitations on awards APPLICANT MUST BE IN					IICTPV		
WITH COMI MOST DE IM	THE CHICANA	A CANBER I	M THE CONST	.NOCITON IND	ODIKI.		

ASSOCIATED GENERAL CONTRACTORS OF MAINE

Form 990-PF (2009)

Supplementary Information (continued)

EDUCATION FOUNDATION

Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation status of Purpose of grant or contribution Amount Name and address (home or business) recipient a Paid during the year SEE STATEMENT 4 14,500. Total ▶ 3a **b** Approved for future payment NONE 0. Total

01-0445998

Part XVI-A	Analysis of Income-Producing Activities

	Unrelate	ed business income	Eveli	 ided by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	·	code	741104111	Tunction income
a			-		
<u> </u>			<del>                                     </del>		
<u> </u>	<del></del>				
d					
e			-		
†			-		
g Fees and contracts from government agencies			<u> </u>		
2 Membership dues and assessments			<u> </u>		
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:			<u> </u>		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal		•			
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events	į				
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
С					
d	-				
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<u></u>			13	0.
(See worksheet in line 13 instructions to verify calculations.)				_	·
	- Ab - A			A Dumana	
Part XVI-B Relationship of Activities t	the Acc	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which inco			contril	outed importantly to the accor	nplishment of
THE INCOME GENERATED IS			OCE.	OF CDANMING	CCUOL ADCUTDO
TO STUDENTS STUDYING FO	OD MUE	OCCUDANTONO	USE	UTN MUE CONCE	DITUTATION
INDUSTRY.	JK IHE	OCCUPATIONS	MII	HIM THE CONST	RUCTION
HNDOSTRI.					<del>_</del>
		<del></del>	-		
					<del></del>
		<del></del>		<del></del>	
				<del></del>	
		<del> </del>			
					·
		<u> </u>			

01-0445998 Page 13

P	art X	VII Information Re	egarding Transfer	s To an	d Transaction	s an	d Relations		haritable		ye is
		Exempt Organ				-				•	
1	Did t	he organization directly or indi	rectly engage in any of the	following w	ith any other organia	zation	described in section	on 501(c) of		Yes	No
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?											
ä	a Transfers from the reporting foundation to a noncharitable exempt organization of:										
	(1)	Cash							1a(1)		X
	(2)	Other assets							1a(2)		Х
t	Othe	transactions:									
	(1)	Sales of assets to a noncharita	ble exempt organization						1b(1)		X
	(2)	Purchases of assets from a no	ncharitable exempt organiz	zation					1b(2)	L	X
	(3)	Rental of facilities, equipment,	or other assets						1b(3)		X
	(4)	Reimbursement arrangements							1b(4)		Х
	(5)	oans or loan guarantees							1b(5)		X
		Performance of services or me	•						1b(6)		Х
		ng of facilities, equipment, ma							10		Х
0		answer to any of the above is								sets,	
		rvices given by the reporting f			ess than fair market	value	in any transaction	or sharing arrangemer	nt, show in		
		nn (d) the value of the goods,									
(a)	Line no	(b) Amount involved	(c) Name of nonc		empt organization		(d) Description	of transfers, transactions,	and sharing ar	rangeme	nts
_			<u> </u>	N/A							
							<del></del>	<del></del>			-
								<del>-</del> ·			
		-									
					<del> </del>						
		<del> </del>								_	
2 :	le the	I foundation directly or indirect	the affiliated with or related	l to one or i	more tay-evemnt or	20172	lone described				
		ction 501(c) of the Code (other	•	-		urnza	iions described		X Yes		No
h		s." complete the following sch	, ,, ,,	i iii acciioii	027				162	<u> </u>	טאו ב
	- 11 10	(a) Name of org		(t	) Type of organization	n l		c) Description of relation	onship		
AS	SOC		CONTRACTORS		, ,,. <u> </u>			EMENT 5			
	INE				)1(C)6	$\dashv$					
		,	<del></del>			$\dashv$		-			
						$\neg$				-	
		<u>.                                    </u>			<u>-</u>	$\dashv$					
		penalties of perjury, I declare that I h						my knowledge and belief,	it is true, corre	ct,	
١	and co	nplete Declaration of preparer (other	or than taxpayer or fiduciary) is t	based on all ir	nformation of which prep	arer ha	s any knowledge				
12 NOVZOJO CEO											
ᇷ	S	gnature of officer or trustee			Date		Title				_
Sign Here		Preparer's	N a a will a	00-		Dat	- Loolf		parer's identify	ying num	ber
흸	Paid Preparer's Use Only	signature	Dance e Wht, C			11	/12/10 self	ployed ► 🔲			
	Paid epare		N, RANDALL 8			'S		EIN ▶		-	
	ج قع U	si self-employed), PO B	OX 445, 130							-	
	_	address, and ZIP code PORT	LAND, ME 04	1112-0	)445			Phone no. 207	-772-	198	1

FORM 990-PF	OTHER E	XPENSES		STATEMENT 1			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM					
DONATIONS	3,450.	1	0.	0. 3,450.			
TO FORM 990-PF, PG 1, LN 23	3,450.	(	0.	0. 3,450.			
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 2			
DESCRIPTION		LUATION ETHOD 1	BOOK VALUE	FAIR MARKET VALUE			
	<del></del>						
BENEFICIAL INTEREST IN ASSETS BY THE UNIV. OF MAINE FOUNDAT		FMV	420,834.	420,834.			

	LIST OF OFFICERS, I	STATEMENT		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
JACK F. KELLEY III P.O. BOX 911 BANGOR, ME 04402	CHAIRMAN 1.00	0.	0.	0.
MARK BANCORFT 23 PHILLIPS ROAD SOUTH PARIS, ME 04281	DIRECTOR 1.00	0.	0.	0.
JOHN LINSCOTT 89 PLEASANT AVENUE SO PORTLAND, ME 04106	DIRECTOR 1.00	0.	0.	0.
ELDON MORRISON 3 BONNEY STREET FREEPORT, ME 04032	DIRECTOR 1.00	0.	0.	0.
DAVE NAZAROFF 49 JOHN STREET CAMDEN, ME 04843	DIRECTOR 1.00	0.	0.	0.
JEFFREY OHLER P.O. BOX 677 AUBURN, ME 04210	DIRECTOR 1.00	0.	0.	0.
HERBERT R. SARGENT 655 MAIN ROAD NORTH HAMPDEN, ME 04444	DIRECTOR 1.00	0.	0.	0.
JOHN SIMPSON 127 TRILLIUM TRAIL BANGOR, ME 04401	DIRECTOR 1.00	0.	0.	0.
CHUCK GOULD 26 COURTLAND CIRCLE BANGOR, ME 04401	DIRECTOR 1.00	0.	0.	0.
DONALD STARR 66 DYKE FARM ROAD SOUTH PORTLAND, ME 04106	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PA	GE 6, PART VIII	0.	0.	0.

FORM 990-PF

STATEMENT

	D DURING THE YEAR	STATEMENT 4			
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT		
DEBORAH WILLIAMS 79 MAIN STREET RICHMOND, ME 04357	NONE TUITION		1,000.		
MICHELLE BAKER 87 UNIVERSITY ST., APT 37 AUBURN, ME 04210	NONE TUITION		3,500.		
SARAH WILLIAMS 79 MAIN STREET RICHMOND, ME 04357	NONE TUITION		3,000.		
JUSTIN CLEAVES 572 FLANDERS HILLD RD SANGERVILLE, ME 04479	NONE TUITION		1,000.		
MATTHEW FOSTER 34 ROGER STREET BANGOR, ME 04401	NONE TUITION		1,000.		
ANTHONY GRONDIN 39 BELANGER AVE WINDHAM, ME 04062	NONE TUITION		1,000.		
JAMIE KETCH 8 OAKRIDGE DRIVE STANDISH, ME 04084	NONE TUITION		2,000.		
NICHOLAS MULHERIN 524 OAK HILL ROAD LITCHFIELD, ME 04350	NONE TUITION		1,000.		

GRANTS AND CONTRIBUTIONS

ASSOCIATED GENERAL CONTRACTORS OF MAINE	01-0445998
JOSHUA SEIGARS  146 WEST ALNA RD WISCASSET, ME TUITION 04578	1,000.
TOTAL TO FORM 990-PF, PART XV, LINE 3A	14,500.

990-PF AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS STATEMENT 5 PART XVII, LINE 2, COLUMN (C)

NAME OF AFFILIATED OR RELATED ORGANIZATION

ASSOCIATED GENERAL CONTRACTORS OF MAINE, INC.

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

SHARE THE SAME ELEMENTS OF CONTROL

### 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 y	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box		▶ X
•	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this		
Do no	ot complete Part II unless you have already been granted an automatic 3-month extension on a previously file	ed Fo	m 8868
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed)		
A corp	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete	
Part I	only		▶ □
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an income tax returns	exten	sion of time
noted (not a you m	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or collust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Charities & Nonprofits.	cally if	(1) you want the additional ated Form 990-T. Instead,
Туре	or Name of Exempt Organization	Empl	oyer identification number
print	ASSOCIATED GENERAL CONTRACTORS OF MAINE EDUCATION FOUNDATION	۸	1-0445998
File by t due dat filing yo	Number, street, and room or suite no. If a P.O. box, see instructions		1-0443990
return S	See 1101 Don't 3313		
	Form 990-BL Form 990-T (corporation) Form 990-EZ Form 990-T (trust other than above) Form 990-PF Form 1041-A Form 990-Form 990-Fo	27 169	
Te ● If t	JOHN O'DEA  e books are in the care of ▶ 181 WHITTEN ROAD - AUGUSTA, ME 04332  ephone No ▶ 207-622-4741  for organization does not have an office or place of business in the United States, check this box  his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this  If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all		
1	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt AUGUST 15, 2010, to file the exempt organization return for the organization named a is for the organization's return for:    X   Calendar year 2009   or  , and ending		The extension
2	If this tax year is for less than 12 months, check reason		Change in accounting period
За	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
h	nonrefundable credits. See instructions	3a	\$ 0.
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	3b	s 0.
С	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.	3с	<u> </u>
A	and Maria are point to make an electronic find with drough with this form 9969, and form 9452 FO and form	0070	FO for novement instructions

#### 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	e filing for an Automatic 3-Month Extension, complete only Part I and check this box			<b>▶</b> 🗓	
If you are	e filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form)			
Do not cor	mplete Part II unless you have already been granted an automatic 3-month extension on a previously f	iled Fo	rm 8868.		
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed)				
A corporati	ion required to file Form 990-T and requesting an automatic 6-month extension - check this box and cor	nolete			
Part I only				<b>&gt;</b>	
	prporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a The tax returns	n exter	sion of time		
noted below (not automate) you must s	Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensive (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or coubmit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file for Charities & Nonprofits.	ically if	(1) you want ated Form 990	the additional DT Instead,	
Type or	Name of Exempt Organization ASSOCIATED GENERAL CONTRACTORS OF MAINE	Emp	loyer identific	ation number	
print	EDUCATION FOUNDATION	lo	1-04459	98	
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions				
return See Instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions AUGUSTA, ME $04332-5519$				
Form Form	990	227 069			
Telepho  If the org	JOHN O'DEA  sks are in the care of ▶ 181 WHITTEN ROAD - AUGUSTA, ME 04332  ne No. ▶ 207-622-4741  FAX No ▶  ganization does not have an office or place of business in the United States, check this box  for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If it is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all				
Is for	uest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time una $\frac{\text{AUGUST }}{15}$ , $\frac{2010}{\text{color}}$ , to file the exempt organization return for the organization named at the organization's return for $\frac{\text{Color}}{\text{Color}}$ calendar year $\frac{2009}{\text{color}}$ or $\frac{\text{Color}}{\text{Color}}$ , and ending, and ending		The extension	1	
2 If this	s tax year is for less than 12 months, check reason.		Change in acc	counting period	
	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				
	efundable credits. See instructions	3a	\$	0.	
	s application is for Form 990-PF or 990-T, enter any refundable credits and estimated	25	¢	0.	
	ayments made. Include any prior year overpayment allowed as a credit.  nce Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	3b	\$		
	isit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)				
	nstructions	3c	\$	0.	
Cautian If	you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453.FO and Form	. 0070	FO (		

Form 8868 (Rev. 4-2009)			Page 2
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this b	ox		X
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed		8868.	
● If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)			
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no c	opies r	eeded)	
Type or ASSOCIATED GENERAL CONTRACTORS OF MAINE		oyer identification	
EDUCATION FOUNDATION	0	<u>1-0445998</u>	
Number, street, and room or suite no. If a P O box, see instructions.  P.O. BOX 5519	For If	RS use only	
return See City, town or post office, state, and ZIP code For a foreign address, see instructions.  AUGUSTA, ME 04332-5519			
Check type of return to be filed (File a separate application for each return)  Form 990  Form 990-EZ  Form 990-PF  Form 990-PF  Form 990-T (trust other than above)  Form 4720		orm 5227	Form 8870
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	sly file	d Form 8868.	
JOHN O'DEA  • The books are in the care of ▶ 181 WHITTEN ROAD - AUGUSTA, ME 04332  Telephone No. ▶ 207-622-4741 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)     . If the second	ıs ıs fo	the whole group,	check this
box   If it is for part of the group, check this box   and attach a list with the names and EINs of all			
4 I request an additional 3-month extension of time until NOVEMBER 15, 2010			
5 For calendar year $2009$ , or other tax year beginning, and ending			<u> </u>
6 If this tax year is for less than 12 months, check reason Initial return Final return		Change in accour	ting period
7 State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO PREPARE A COMPLETE AND ACCOUNTY.	CUR	ATE RETUR	N.
8a 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	8a	\$	<u>0.</u>
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid	1 1		_
	-		
previously with Form 8868	8b	\$	0.
c Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit	8b	\$	
c Balance Due. Subtract line 8b from line 8a 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	8b 8c	\$	0.
c Balance Due. Subtract line 8b from line 8a 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  Signature and Verification	8c	\$	0.
c Balance Due. Subtract line 8b from line 8a 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	8c	\$	0.

Form 8868 (Rev. 4-2009)

Form 8868 (Rev. 4-2009)			Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	x		► X
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed		3868	
• If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	pies n	eeded)	
Type or ASSOCIATED GENERAL CONTRACTORS OF MAINE EDUCATION FOUNDATION	oyer identificat 1-044599		
Number, street, and room or suite no. If a P O box, see instructions  P.O. BOX 5519	For IF	S use only	
return See Instructions Crty, town or post office, state, and ZIP code. For a foreign address, see instructions AUGUSTA, ME 04332-5519			
Check type of return to be filed (File a separate application for each return)  Form 990  Form 990-EZ  Form 990-T (sec 401(a) or 408(a) trust)  Form 990-BL  Form 990-PF  Form 990-T (trust other than above)  Form 4720		rm 5227 rm 6069	Form 8870
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	sly file	d Form 8868.	
JOHN O'DEA  • The books are in the care of ▶ 181 WHITTEN ROAD - AUGUSTA, ME 04332  Telephone No ▶ 207-622-4741 FAX No ▶			
<ul> <li>If the organization does not have an office or place of business in the United States, check this box</li> </ul>		)	<b>.</b> .
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this	s is for	the whole group	o, check this
box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all r	nembe	ers the extension	n is for
4 I request an additional 3-month extension of time until NOVEMBER 15, 2010			
5 For calendar year 2009, or other tax year beginning, and ending			
6 If this tax year is for less than 12 months, check reason: Initial return Final return	ا نـــا	Change in accou	intirig period
7 State in detail why you need the extension			
ADDITIONAL TIME IS NEEDED TO PREPARE A COMPLETE AND ACC	CURA	ATE RETU	KN.
0 WH			
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nonrefundable credits. See instructions.	8a	\$	<del></del>
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tax payments made Include any prior year overpayment allowed as a credit and any amount paid		•	0.
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c Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit			0.
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions  Signature and Verification	8c	\$	
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the it is true, correct, and complete, and that I am authorized to prepare this form.	best of	my knowledge an	d belief,
Signature ▶ Title ▶	Date	•	
<u></u>			3 (Rev. 4-2009)