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

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

OMB No 1545-0052

2009

For calendar year 2009, or tax year beginning , and ending

G Check all that apply: [ ] Initial return [ ] Initial return of a former public charity [ ] Final return [ ] Amended return [ ] Address change [ ] Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.

Name of foundation: MAINE HEALTH ACCESS FOUNDATION, INC.

Number and street (or P O box number if mail is not delivered to street address): 150 CAPITOL STREET — Room/suite: 4

City or town, state, and ZIP code: AUGUSTA, ME 04330

A Employer identification number: 01-0535144

B Telephone number: (207) 620-8266

C If exemption application is pending, check here ▶ [ ]

D 1. Foreign organizations, check here ▶ [ ]
2. Foreign organizations meeting the 85% test, check here and attach computation ▶ [ ]

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ [ ]

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ [ ]

H Check type of organization: [X] Section 501(c)(3) exempt private foundation [ ] Section 4947(a)(1) nonexempt charitable trust [ ] Other taxable private foundation

I Fair market value of all assets at end of year *(from Part II, col. (c), line 16)* ▶$ 104,022,832.

J Accounting method: [ ] Cash [X] Accrual [ ] Other (specify) *(Part I, column (d) must be on cash basis.)*

Part I Analysis of Revenue and Expenses (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 (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received	13,000.		N/A	
	2 Check ▶ [ ] if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	98,482.	98,482.		
	4 Dividends and interest from securities	2,072,328.	2,072,328.		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	2,273,281.			
	b Gross sales price for all assets on line 6a 43,225,359.				
	7 Capital gain net income (from Part IV, line 2)		2,273,281.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income	62.	-2,271,759.		Statement 1
	12 Total Add lines 1 through 11	4,457,153.	2,172,332.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	150,884.	3,000.		147,884.
	14 Other employee salaries and wages	411,866.	0.		411,866.
	15 Pension plans, employee benefits	94,395.	0.		94,395.
	16a Legal fees Stmt 2	17,904.	0.		17,904.
	b Accounting fees Stmt 3	53,070.	500.		52,570.
	c Other professional fees Stmt 4	1,592.	0.		1,592.
	17 Interest				
	18 Taxes Stmt 5	289,992.	0.		40,992.
	19 Depreciation and depletion	19,381.	0.		
	20 Occupancy	59,420.	0.		59,420.
	21 Travel, conferences, and meetings	76,143.	0.		76,143.
	22 Printing and publications	15,743.	0.		15,743.
	23 Other expenses Stmt 6	1,387,662.	802,048.		609,000.
	24 Total operating and administrative expenses. Add lines 13 through 23	2,578,052.	805,548.		1,527,509.
	25 Contributions, gifts, grants paid	2,256,204.			3,555,500.
	26 Total expenses and disbursements. Add lines 24 and 25	4,834,256.	805,548.		5,083,009.
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-377,103.			
	b Net investment income (if negative, enter -0-)		1,366,784.		
	c Adjusted net income (if negative, enter -0-)			N/A	

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Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	2,120,081.	4,676,448.	4,676,448.
	3 Accounts receivable ▶			
	Less allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	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 ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	14,045.	25,493.	25,493.
	10a Investments - U.S and state government obligations Stmt 8	4,378,927.	3,524,132.	3,524,132.
	b Investments - corporate stock			
	c Investments - corporate bonds Stmt 9	10,548,466.	10,167,543.	10,167,543.
	11 Investments - land, buildings, and equipment basis ▶			
	Less accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other Stmt 10	71,804,215.	84,713,222.	84,713,222.
	14 Land, buildings, and equipment basis ▶ 210,862.			
	Less accumulated depreciation ▶ 174,868.	50,323.	35,994.	35,994.
	15 Other assets (describe ▶ Statement 11)	1,129,000.	880,000.	880,000.
	16 **Total assets** (to be completed by all filers)	90,045,057.	104,022,832.	104,022,832.
Liabilities	17 Accounts payable and accrued expenses	70,579.	58,641.	
	18 Grants payable	5,441,227.	4,141,931.	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities** (add lines 17 through 22)	5,511,806.	4,200,572.	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ [X] and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted	84,533,251.	99,822,260.	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ [ ] and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 **Total net assets or fund balances**	84,533,251.	99,822,260.	
	31 **Total liabilities and net assets/fund balances**	90,045,057.	104,022,832.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	84,533,251.
2 Enter amount from Part I, line 27a	2	-377,103.
3 Other increases not included in line 2 (itemize) ▶ See Statement 7	3	15,666,112.
4 Add lines 1, 2, and 3	4	99,822,260.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	99,822,260.

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	VARIOUS SECURITIES	P		
b				
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	43,225,359.		40,952,078.	2,273,281.
b				
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a				2,273,281.
b				
c				
d				
e				

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7; If (loss), enter -0- in Part I, line 7 } 2 2,273,281.

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8 3 N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008	5,867,395.	111,335,080.	.052700
2007	6,119,155.	123,844,069.	.049410
2006	4,976,013.	111,323,523.	.044699
2005	3,933,200.	102,098,122.	.038524
2004	4,768,480.	98,061,384.	.048628

2	Total of line 1, column (d)	2	.233961
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.046792
4	Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	92,131,179.
5	Multiply line 4 by line 3	5	4,311,002.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	13,668.
7	Add lines 5 and 6	7	4,324,670.
8	Enter qualifying distributions from Part XII, line 4	8	5,083,009.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI 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 ▶ ☐ 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% of Part I, line 27b		1	13,668.
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-)		2	0.
3	Add lines 1 and 2		3	13,668.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5	**Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0-		5	13,668.
6	Credits/Payments:			
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a 140,312.		
b	Exempt foreign organizations - tax withheld at source	6b		
c	Tax paid with application for extension of time to file (Form 8868)	6c		
d	Backup withholding erroneously withheld	6d		
7	Total credits and payments. Add lines 6a through 6d		7	140,312.
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached		8	
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	126,644.
11	Enter the amount of line 10 to be **Credited to 2010 estimated tax** ▶	126,644. Refunded ▶	11	0.

Part VII-A Statements Regarding Activities

			Yes	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 any political campaign?	1a		X
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	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?	1c		X
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 ▶ $ 0.			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		X
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*	3		X
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year? N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		X
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 remain in the governing instrument?	6	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.*	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ ME			
b	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*	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

Part VII-A Statements Regarding Activities *(continued)*

			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of 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 August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ▶ www.mehaf.org

14 The books are in care of ▶ WENDY J. WOLF Telephone no ▶ (207) 620-8266
Located at ▶ 150 CAPITOL STREET, SUITE 4, AUGUSTA, ME ZIP+4 ▶ 04330

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the year ▶ | 15 | N/A

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
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? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☒ Yes ☐ No			
	(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)? ☐ Yes ☒ No			
	(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) ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		X
	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 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))			
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 before 2009? ☐ Yes ☒ No			
	If "Yes," list the years ▶ ____, ____, ____, ____			
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 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) N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ ____, ____, ____, ____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
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	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? ☒ Yes ☐ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? **5b** X (No)

Organizations relying on a current notice regarding disaster assistance check here ▶ ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☒ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b** X (No)

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? N/A **7b**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(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	(e) Expense account, other allowances
See Statement 12		150,884.	19,929.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BARBARA LEONARD 150 CAPITOL STREET, AUGUSTA, ME 04330	VP - PROGRAMS 40.00	103,971.	16,954.	0.
KIMBERLY CRICHTON 150 CAPITOL STREET, AUGUSTA, ME 04330	PROGRAM OFFICER 40.00	66,650.	10,762.	0.
BECKY HAYS BOOBER 150 CAPITOL STREET, AUGUSTA, ME 04330	PROGRAM OFFICER 40.00	61,750.	5,332.	0.
LEONARD BARTEL 150 CAPITOL STREET, AUGUSTA, ME 04330	PROGRAM OFFICER 40.00	56,596.	10,074.	0.
CATHERINE LUCE 150 CAPITOL STREET, AUGUSTA, ME 04330	GRANT MANAGER 37.50	49,095.	13,181.	0.

Total number of other employees paid over $50,000 ▶ 0

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than $50,000	(b) Type of service	(c) Compensation
PRIME BUCHHOLZ & ASSOCIATES 40 PLEASANT STREET, PORTSMOUTH, NH 03801	INVESTMENT ADVISORY	56,575.
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 statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 VARIOUS DIRECT CHARITABLE ACTIVITIES AND CONTRACTS. PLEASE SEE ATTACHED STATEMENTS 6 AND 14.	521,963.
2	
3	
4	

Part IX-B **Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments See instructions 3	
Total. Add lines 1 through 3 ▶	0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities	1a	93,441,484.
b	Average of monthly cash balances	1b	56,714.
c	Fair market value of all other assets	1c	35,994.
d	**Total** (add lines 1a, b, and c)	1d	93,534,192.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) — 1e: 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	93,534,192.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,403,013.
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	92,131,179.
6	**Minimum investment return.** Enter 5% of line 5	6	4,606,559.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6	1	4,606,559.
2a	Tax on investment income for 2009 from Part VI, line 5 — 2a: 13,668.		
b	Income tax for 2009 (This does not include the tax from Part VI) — 2b:		
c	Add lines 2a and 2b	2c	13,668.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,592,891.
4	Recoveries of amounts treated as qualifying distributions	4	139,540.
5	Add lines 3 and 4	5	4,732,431.
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	4,732,431.

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	5,083,009.
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	5,083,009.
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	13,668.
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	5,069,341.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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				4,732,431.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			4,923,758.	
b Total for prior years ____ , ____ , ____		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ $ 5,083,009.				
a Applied to 2008, but not more than line 2a			4,923,758.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2009 distributable amount				159,251.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
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.		
c 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.		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				4,573,180.
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.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				

Part XIV Private Operating Foundations (see instructions 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)

	Tax year	Prior 3 years			
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, 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 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 Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year-see the instructions.)

1 **Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

None

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

None

2 **Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed

SEE STATEMENT 15

b The form in which applications should be submitted and information and materials they should include

SEE STATEMENT 15

c Any submission deadlines

SEE STATEMENT 15

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

SEE STATEMENT 15

Part XV **Supplementary Information** (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SEE STATEMENT 14		PUBLIC	ENHANCE HEALTH CARE IN MAINE	3555500.
Total			▶ 3a	3555500.
b *Approved for future payment*				
SEE STATEMENT 14		PUBLIC	ENHANCE HEALTH CARE IN MAINE	4141931.
Total			▶ 3b	4141931.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income (a) Business code	Unrelated business income (b) Amount	Excluded by section 512, 513, or 514 (c) Exclusion code	Excluded by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	98,482.	
4 Dividends and interest from securities			14	2,072,328.	
5 Net rental income or (loss) from real estate					
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			18	2,273,281.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a OTHER			01	62.	
b NET ADJUSTMENT FOR					
c INVESTMENT INCOME ON					
d SCHEDULES K-1				-2,271,759.	
e (NOT RECORDED ON BOOKS)				2,271,759.	
12 Subtotal Add columns (b), (d), and (e)		0.		4,444,153.	0.

13 Total. Add line 12, columns (b), (d), and (e) 13 4,444,153.

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
11	ALL REVENUE IS USED TO PROMOTE AFFORDABLE AND QUALITY HEALTHCARE FOR
	MAINE PEOPLE. PLEASE SEE STATEMENT 14.

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge

Signature of officer or trustee — Date: 11/4/20 — Title: PRESIDENT & CEO

Paid Preparer's Use Only

Preparer's signature: E. Drew Cheney — Date: 11/1/10 — Check if self-employed ☐ — Preparer's identifying number

Firm's name (or yours if self-employed), address, and ZIP code: BAKER NEWMAN & NOYES, BOX 507, PORTLAND, ME 04112 — EIN — Phone no (207) 879-2100

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organization

MAINE HEALTH ACCESS FOUNDATION, INC.

Employer identification number

01-0535144

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	[X] 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year. ▶ $ ______________

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization: MAINE HEALTH ACCESS FOUNDATION, INC.

Employer identification number: 01-0535144

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	NORTHEAST DELTA DENTAL FOUNDATION P.O. BOX 2002 CONCORD, NH 03302-2002	$ 10,500.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Form 990-PF	Other Income		Statement 1
Description	(a) Revenue Per Books	(b) Net Investment Income	(c) Adjusted Net Income
OTHER	62.	0.	
NET ADJUSTMENT FOR INVESTMENT INCOME ON SCHEDULES K-1	-2,271,759.	-2,271,759.	
(NOT RECORDED ON BOOKS)	2,271,759.	0.	
Total to Form 990-PF, Part I, line 11	62.	-2,271,759.	

Form 990-PF	Legal Fees			Statement 2
Description	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
LEGAL	17,904.	0.		17,904.
To Fm 990-PF, Pg 1, ln 16a	17,904.	0.		17,904.

Form 990-PF	Accounting Fees			Statement 3
Description	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
ACCOUNTING	53,070.	500.		52,570.
To Form 990-PF, Pg 1, ln 16b	53,070.	500.		52,570.

Form 990-PF Other Professional Fees Statement 4

Description	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
CONSULTANTS	1,592.	0.		1,592.
To Form 990-PF, Pg 1, ln 16c	1,592.	0.		1,592.

Form 990-PF Taxes Statement 5

Description	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
EXCISE TAXES	249,000.	0.		0.
PAYROLL TAXES	40,992.	0.		40,992.
To Form 990-PF, Pg 1, ln 18	289,992.	0.		40,992.

Form 990-PF Other Expenses Statement 6

Description	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
OFFICE SUPPLIES & EXPENSES	29,117.	0.		29,117.
WEBSITE	1,685.	0.		1,685.
INSURANCE	18,540.	0.		18,540.
TELECOMMUNICATIONS	14,309.	0.		14,309.
INVESTMENT FEES	802,048.	802,048.		0.
PROGRAM RELATED CONTRACTS (SEE STATEMENT 14)	440,487.	0.		440,487.
OTHER PROGRAM-RELATED FUNDING AND MINOR DONATIONS (SEE STATEMENT 14)	57,546.	0.		57,546.
PROGRAM RELATED EXPENSES: OTHER	23,930.	0.		23,930.
ACCRUAL TO CASH CONVERSION	0.	0.		23,386.
To Form 990-PF, Pg 1, ln 23	1,387,662.	802,048.		609,000.

Form 990-PF	Other Increases in Net Assets or Fund Balances	Statement 7

Description	Amount
NET UNREALIZED GAIN ON INVESTMENTS	15,526,568.
REFUNDED GRANTS	139,540.
ROUNDING	4.
Total to Form 990-PF, Part III, line 3	15,666,112.

Form 990-PF	U.S. and State/City Government Obligations	Statement 8

Description	U.S. Gov't	Other Gov't	Book Value	Fair Market Value
UNITED STATES GOVERNMENT OBLIGATIONS	X		3,524,132.	3,524,132.
Total U.S. Government Obligations			3,524,132.	3,524,132.
Total State and Municipal Government Obligations				
Total to Form 990-PF, Part II, line 10a			3,524,132.	3,524,132.

Form 990-PF	Corporate Bonds	Statement 9

Description	Book Value	Fair Market Value
MUTUAL FUNDS	10,167,543.	10,167,543.
Total to Form 990-PF, Part II, line 10c	10,167,543.	10,167,543.

Form 990-PF	Other Investments	Statement 10

Description	Valuation Method	Book Value	Fair Market Value
COMMINGLED FUNDS (INVESTMENT PARTNERSHIPS)	FMV	84,713,222.	84,713,222.
Total to Form 990-PF, Part II, line 13		84,713,222.	84,713,222.

Form 990-PF — Other Assets — Statement 11

Description	Beginning of Yr Book Value	End of Year Book Value	Fair Market Value
DEFERRED TAX	265,000.	0.	0.
PROGRAM-RELATED INVESTMENT	750,000.	750,000.	750,000.
REFUNDABLE INCOME TAXES	114,000.	130,000.	130,000.
To Form 990-PF, Part II, line 15	1,129,000.	880,000.	880,000.

Form 990-PF — Part VIII - List of Officers, Directors Trustees and Foundation Managers — Statement 12

Name and Address	Title and Avrg Hrs/Wk	Compen-sation	Employee Ben Plan Contrib	Expense Account
WENDY J. WOLF, M.D., M.P.H. 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	PRESIDENT & CEO 40.00	150,884.	19,929.	0.
LAURIE EDDY, MSN, FNP, NP-C 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 3.00	0.	0.	0.
MAROULLA GLEATON, M.D. 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 4.00	0.	0.	0.
KAREN O'ROURKE 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 4.00	0.	0.	0.
RICHARD MARSTON 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 5.00	0.	0.	0.
LISA MILLER, M.P.H. 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 4.00	0.	0.	0.
DIANA C. SCULLY. MSW 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 5.00	0.	0.	0.

NEIL ROLDE 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 5.00	0.	0.	0.
CHERYL LEE RUST 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	CHAIR & TRUSTEE 7.00	0.	0.	0.
LEE WEBB 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 4.00	0.	0.	0.
JEFF WAHLSTROM 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 5.00	0.	0.	0.
WAYNE MYERS, MD 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 5.00	0.	0.	0.
SARA GAGNE-HOLMES, ESQ. 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 4.00	0.	0.	0.
KENNETH HEWS 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 5.00	0.	0.	0.
FRANCIS MCGINTY 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 2.00	0.	0.	0.
CONSTANCE SANDSTROM 150 CAPITOL STREET, SUITE 4 AUGUSTA, ME 04330	TRUSTEE 4.00	0.	0.	0.
Totals included on 990-PF, Page 6, Part VIII		150,884.	19,929.	0.

MAINE HEALTH ACCESS FOUNDATION 01-0535144
FORM 990-PF: SUPPLEMENTAL STATEMENT 13 12/31/2009

PART I, LINE 19 & PART II, LINE 14

	COST	DEPREC.	A/D
FURNITURE & EQUIPMENT	210,862	19,381	174,868

Part IX-A: Summary of Direct Charitable Activities

The mission of the Maine Health Access Foundation (MeHAF) is to ***promote affordable and timely access to comprehensive quality health care and improve the health of every Maine resident***. As the state's largest private health care foundation, MeHAF advances strategic solutions to improve health and health care in Maine with a special emphasis on addressing the needs of people who are uninsured and medically underserved. Attaining MeHAF's mission requires strategies that drive lasting and fundamental improvements in our health care system so we can focus on improving the health of all Maine people.

In 2009, MeHAF provided $4,017,286 in new and continuing grants and contracts to organizations across Maine to advance our three strategic priorities:

- Advancing Health Reform
- Promoting Patient and Family-Centered Care
- Strengthening Maine's Safety Net

Nonprofits faced significant challenges in 2009. The economic downturn precipitated by the collapse of Wall Street caused job loss and economic insecurity. Many Maine nonprofits were pushed to the brink as they faced more demand for services while funding was curtailed or eliminated.

Philanthropy was not immune to this turmoil. Endowments, which fuel philanthropic grantmaking and operations, fell significantly, prompting some foundations to cease new grantmaking or trim existing programs. Although MeHAF's endowment declined, our Board affirmed that we would meet our grantmaking commitments, continue support for key programs, and even offer new funding.

The realities of this new economy have prompted MeHAF to think deeply and creatively about how to advance our work to meet the needs of Maine people. Philanthropy does not have sufficient resources to replace shrinking public support, nor can it underwrite core operations over the long-term. But there are other ways foundations can strengthen nonprofits in these challenging times.

Grantmaking is our most well-known function, yet there are other tools we can tap to foster change. In 2009, we participated in the new "Viability Program" for nonprofits, marking a new approach for MeHAF aimed at strengthening health sector agencies.

We fielded the new Fund for the Future – employing efficient social networking tools to assist community-based health solutions.

As a trusted partner, MeHAF has brought dedicated people with diverse opinions together to address tough issues. We've commissioned research and conducted evaluations so leaders know what works and what doesn't. This is vital for more informed advocacy, public policy, and program improvements.

MeHAF has also been nimble enough to help leverage unexpected new opportunities. In 2009, we helped Maine leaders secure new health information technology funding provided in the federal "stimulus bill".

As the state's largest nonprofit health foundation, Maine people expect MeHAF to keep pushing forward to promote access and improve health. We're prepared to reach deeper into that philanthropic toolbox to go beyond grantmaking to help our nonprofit partners meet the challenges ahead.

Tapping New Tools, Technologies and Community Partners

In the current economy our nonprofit partners have been struggling to align tight budgets with increased demand. There are many ways to respond to tough times, but just working harder won't suffice. Philanthropy does not have the fiscal resources to fill the gaps nonprofits face, but we can work in partnership to tap new tools and technologies, and think creatively about alternative, more efficient strategies to meet our core missions - and margins.

Building Stronger Nonprofits
Working in collaboration with the Maine Association of Nonprofits, Maine Community Foundation, Institute for Civic Leadership, United Ways, and Common Good Ventures, MeHAF supported a new approach to build the capacity of our nonprofit partners through a "Viability Program." Working in a specific sector, a small group of nonprofits was offered the opportunity to participate in a two-day clinic that connected them with experts in business, finance, communications, board governance, and nonprofit management. After conducting an internal assessment of their organization, these experts – and their sector colleagues – shared strategies, helped participants develop action plans aimed at strengthening their organizations, and were offered follow up technical assistance to begin implementing these plans. In 2009, MeHAF sponsored seven long-term care organizations for our first Viability Program. Initial feedback from the program was positive, and the foundation will be repeating this program in 2010.

Looking to the Future
Funders are constantly challenged to balance the imperative of addressing current issues with the need to look out over the long term. As the prospect of national health reform loomed, the MeHAF Board asked how we can learn more from our nonprofit partners about the "next" iteration of issues that would be front and center if universal coverage became reality. This challenge sparked the development of MeHAF's new pilot program called "Fund for the Future." Based on feedback from Maine people, we know that preserving and improving health is highly dependent on having support and resources in the communities where Maine people live, work and play. In 2009, MeHAF offered the first competitive Fund for the Future grant opportunity. Drawing on information derived from community needs assessments, the Fund for the Future was designed to help community leaders define and advance strategies to improve the health of their neighbors and colleagues. The RFP drew a diverse portfolio of projects from around the state. People were encouraged to weigh in on Facebook with comments about the proposed projects, and this process strengthened the final applications. The three 2009 grantees will promote healthy food and healthy weight in their respective communities. The second pilot round will be issued in early 2010.

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2009 01-0535144

Embracing New Technologies

MeHAF is always seeking new ways to engage more people in our work, and widen the circle of our colleagues and partners. In 2009, MeHAF developed a Facebook page to spread the word about its new pilot Fund for the Future program, and prompt conversations about what helps communities be healthy. Using social media to publicize the program and initiate these dialogues, MeHAF actively solicited ideas from community leaders and sought feedback from "friends" on various project ideas. Questions about the funding opportunity were addressed through two live chat sessions that drew in a higher number of potential applicants than the typical face-to-face bidder's conference. These inclusive outreach strategies linked MeHAF to new organizations and individuals who share our commitment to health and health care, and placed MeHAF at the forefront in using Web 2.0 tools for grantmaking. The foundation's use of Facebook was featured in a 2009 Robert Wood Johnson Foundation blog post called "What We Give: Doing Philanthropy Differently in a Web 2.0 World."

Streamlining Our Processes

In 2009, MeHAF examined our internal processes to see how we could streamline grantmaking and reporting for our nonprofit partners, while maintaining important relationships and contacts. We upgraded our grants management software systems, trained staff, and implemented new procedures for on-line grantmaking and timely on-line grant review. To cut down on travel costs, we offered more webinar trainings and on-line technical assistance. These changes will improve the consistency, efficiency, and standard documentation of our grantmaking processes. It also decreases paperwork, reporting requirements and administrative burdens on our grantees. MeHAF tested its first on-line grant application with the new Fund for the Future, and in December 2009, the foundation converted its Discretionary Grants program to an on-line application.

Advancing Health Reform

Advancing comprehensive health reform is a national undertaking, but any new federal legislation will have varying impacts on states depending on their economy, population demographics, existing health care systems, and previous efforts to push state-level health reform. MeHAF sees national reform as a key strategy to achieve our mission. In 2009, the foundation seized the opportunity, in a nonpartisan way, to share with policymakers how Maine's experiences with state-based reform and our grantees' practical approaches to improve care could inform and deepen the national debate.

Tapping Maine's Experience

Maine has been a leader in health reform and has fared well at preserving coverage. However, state-based efforts must be complemented and strengthened by national health reform to achieve universal access to care. In 2009, MeHAF reached out to Maine's Congressional delegation, spoke with key local leaders and business groups, and published editorials in an effort to inform and deepen the debate on national health reform in a way that advanced our vision, values and experience. As a nonpartisan health foundation, MeHAF is in a unique position to share policy lessons learned from Maine's health reform efforts, the work of grantees in the field, and knowledge generated from foundation-funded policy research. The foundation's policy work prompted an invitation from two national philanthropic organizations, Grantmakers in Health and the Council on Foundations, for MeHAF to participate in a Congressional briefing that focused on the role health philanthropy can play in promoting pubic policy, supporting implementation and ensuring public engagement and education.

Improving Quality, Lowering Costs

Concern over rapidly escalating health care costs spurred bipartisan interest in national health reform. In Maine, leaders from all sectors know that rising costs threaten public and private coverage. A diverse group of MeHAF grantees comprised of business coalitions, consumer advocacy groups, policy organizations and others are working on achievable strategies to "bend the cost curve" so access can be preserved. Their projects include developing new methods for payment reform using models other than fee for service; building tools for quality and cost transparency so people can make informed decisions about care; educating providers so that prescribing practices are driven by objective science rather than pharmaceutical marketing; and evaluating peer support programs as an effective, lower cost component to improving care. Maine's Congressional delegation was keenly interested in these strategies to rein in costs during meetings with MeHAF staff. As policy makers debate the broad structure of national reform, the strategies advanced by our grantees are practical steps we can take now to make Maine's health care system more responsive, effective, patient-centered, and affordable.

Practical Advice from Maine People About Reforms

One of MeHAF's most important roles is to ensure that the experiences of Maine people inform policy changes and reform efforts. In 2009, the Department of Health and Human Services and seven MeHAF grantees joined the foundation to identify ways to strengthen the understanding, impact and value of MaineCare for its members. The group researched and shared local and national best practices, and gathered input from Maine people on proposed improvement strategies using surveys and focus groups. Nearly 1,000 Maine people shaped the final recommendations in *Improving the Health of Maine People: Getting Down to Basics.* The final recommendations included input from people served by public and private programs as well as from those who are uninsured. The report presents practical and policy-driven strategies that people felt were essential for improving health. Some suggestions are straightforward such as extending office hours, offering same day appointments, and providing help to understand prevention, treatments and medications. However, people also pointed out that ensuring good health means reaching beyond clinic or hospital walls to communities. It's a clear reminder that for health reform to succeed, people need help and support in their communities if we want to promote health, rather than just treat disease.

Building Informed Leaders

Pushing state-based and national health reform forward is a complicated process that requires all our best thinking. MeHAF is committed to ensuring that leaders have the fundamental knowledge and skills required to meet the challenge of reforming Maine's health care system. For this reason, the foundation sponsors an array of learning opportunities for leaders across all sectors. Working with the Maine Development Foundation, MeHAF sponsors a biennial Policy Leaders Academy conference on health care for the new legislature. Foundation funding also helped Leadership Maine expand its experiential curriculum so leaders have an understanding of how health care impacts Maine's economy. Annually, the legislative leadership is invited to select a bipartisan group of legislators to attend the annual National Academy for State Health Policy meeting with MeHAF support. The foundation also provides scholarship underwriting to the Dan Hanley Health Leadership Development program as well as Leadership Maine so leaders from nonprofits serving Maine's uninsured and underserved can participate in these important programs.

Promoting Patient and Family-Centered Care

The foundation continually seeks opportunities to make the health care system work better for those it serves. This focus lies at the heart of our work to promote patient and family-centered care. Many providers see the office practice or hospital as the center of care. Yet, Maine people are clear that community resources are key elements of what it takes to preserve and improve health. In 2009, MeHAF expanded its work to promote care integration to ensure that community support is a core component of patient and family-centered care.

Expanding Care Integration Across Maine
Promoting patient and family-centered care is a long-term strategy. In 2009, the foundation awarded $1.4 million to the final cadre of six new grantees to advance the integration of mental and behavioral health with primary health care services. The insights and practical advice of 43 integration grantees and their 150 partner organizations are guiding our collective efforts to reshape the structure, payment and culture of day-to-day practice so patients receive more timely, seamless and coordinated care from physicians, nurses, psychologists, social workers and other health professionals. Moving forward, this initiative will more fully integrate community resources by reaching beyond the office setting. A new grant to the Maine Department of Health and Human Services, Center for Disease Control and Prevention will promote public messages about ways to improve mental health, publicize community resources, and build local support for Maine people so they can get help in their communities.

Improving Policy and Aligning Incentives
Doctors, nurses, mental and behavioral health specialists and other providers across Maine are working hard to offer more patient and family-centered care in their practices. Yet sustaining this approach requires overcoming an array of system-level barriers. MeHAF has convened a statewide Integration Policy Group comprised of visionary health care leaders and consumer advocates who are guiding our efforts to advance policy. Drawing on information from policy experts across the country, recommendations from the commissioned *Maine Barriers to Integration Study,* as well as the on-the-ground experiences of the Integration Initiative grantees, this group is identifying specific regulatory, licensure, reimbursement and other changes that must occur to support and sustain integrated care moving forward. To help align incentives and reimbursement practice, MeHAF sponsored an integration reimbursement training meeting attended by 71 participants that highlighted current payment strategies that support care integration.

Learning Together
Many health care organizations and foundations across the nation are deeply engaged in promoting coordinated, seamless, patient and family-centered care. Quarterly, MeHAF invites local and national experts and leaders in the field to learning sessions with our 43 integration grantees and their collaborative partners. This rapid-cycle learning has improved grantees' day-to-day work, offered new perspectives and strategies to overcome barriers to integrated care, and spurred greater synergy and coordination of their work. The learning sessions raise awareness of other Maine-based initiatives and studies, such as the Patient-Centered Medical Home pilot and the Emergency Department Utilization study, where support for integrated care can be strengthened and expanded. MeHAF also participates in a New England and national affinity group of foundations focused on integrated care and improving mental health.

Listening to Our Communities

In May 2009, the foundation's Community Advisory Committee participated with Grantmakers in Health to co-sponsor a National Meeting on Community Engagement. This meeting, which was held in Portland, Maine, raised important issues on how foundations engage, listen to and meet the needs of various communities. Over the course of the two-day meeting, participants shared strategies on how funders can actively seek input from new and emerging constituencies to deepen their work. As part of the conference, Grantmakers in Health conducted a survey of health foundations from across the nation to determine how they seek formal and informal community input. Following the conference, Grantmakers in Health published a *View from the Field* authored by MeHAF staff that summarized the meeting's key findings and messages. This publication has been cited by several national philanthropies, including a new Council on Foundation guide: *10 Ways for Independent Foundations to Consider Diversity and Inclusive Practices.*

Strengthening Maine's Safety Net

The economic downturn has strained health care safety net organizations as they struggle to provide care for more people who are uninsured and underserved. In 2009, the American Recovery and Reinvestment Act infused new funding into community health centers, but many other vital safety net providers were untouched by this infusion of new dollars. In response, MeHAF focused its safety net grantmaking on key organizations that did not receive stimulus funds to help boost their capacity to meet the needs of low-income people and the uninsured.

Expanding Access to Oral Health
A new emergency department (ED) analysis found the leading cause of preventable ED visits for Maine adults ages 15 to 44 was seeking relief from untreated dental pain and disease. Good oral health is critical to overall health, yet many people face significant barriers getting care. Maine's oral health safety net provides affordable, high quality care, yet these providers often face fiscal and workforce recruitment challenges as they strive to meet demand. In 2009, MeHAF provided funding to eight oral health safety net providers to expand operatories, purchase state-of-the-art equipment, and install new clinical software. These grants help meet short-term challenges, but MeHAF is also focused on longer-term solutions. As part of our sustained commitment to improve oral health, the University of New England was awarded a planning grant to develop a comprehensive strategy for recruitment and outplacement training that will be vital components of building Maine's dental workforce through the new College of Dental Medicine.

Small Rural Hospitals Strengthen Medication Safety Practices
About 40% of Maine's hospitals are small "critical access hospitals" (CAHs) that serve rural communities. Since 2008, fourteen CAHs have joined forces with the Quality Forum, Maine Office of Rural Health and Primary Care, and MeHAF to strengthen medication safety and management. Working with USM Muskie School of Public Service faculty, the CAHs participate in facilitated learning sessions to learn from national best practices and each other, and get technical assistance to advance medication safety in their institutions. Projects focus on improving communication about medications; using personal health folders so patients have up-to-date medications lists; and using new technology like bar code scanning, electronic medication dispensing machines, and computer systems for ordering medications. The CAHs work garnered the 2009 President's Award for Excellence from the New England Rural Health Roundtable, and was featured in a poster presentation and panel discussion at the Institute for Healthcare Improvement Annual National Forum on Quality Improvement in Healthcare.

Accessing and Managing Medications to Improve Health
Helping Maine's increasing number of uninsured or underinsured access free or low-cost medication is vital in treating illness and preserving health. For three years, MeHAF has partnered with 10 organizations to provide free or low-cost medications and improve the ability of patients and providers to manage medications. Through the work of these grantees over 4,000 new patients accessed more than $12 million in free and low-cost medicines through pharmaceutical patient assistance programs. Patients also received assistance applying for other important public programs for which they were eligible. At the start of these projects, more than 40% of the people receiving assistance reported being in fair or poor health, but with better access and management of medications nearly half these patients reported improved health with fewer doctor visits, less need to visit the emergency rooms, and fewer hospitalizations.

Charting the Health Needs of People in Maine's Tribal Nations
Very little data exists on the current health status and quality of care for enrolled members of the state's four federally recognized tribes in five tribal communities: The Aroostook Band of Micmac Indians, The Houlton Band of Maliseet Indians, The Passamaquoddy Tribe Indian Township, The Passamaquoddy Tribe Pleasant Point, and The Penobscot Indian Nation. Tribal health directors have been working together to plan and implement a comprehensive community health needs assessment. A new MeHAF grant will help support the needs assessment that will gather aggregate and tribal specific health information from all five Maine Tribal communities. Tribal health directors will use this information to guide program planning, development, implementation and evaluation.

MeHAF deploys an array of strategies to advance our work. We award single and multi-year grants, engage consultants for targeted work on various initiatives, and underwrite research and analysis.

The following is a list of the grant and contract payments that MeHAF provided in fiscal year 2009.

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Promoting Patient & Family-Centered Care (Integration Initiative)									
New Projects									
2009B-0005	Eastern Maine Medical Center 489 State Street Bangor, ME 04401	$220,770 00	$80,000.00	$140,770.00	X				EMMC Center for Family Medicine (CFM) will implement a Clinical Services project The proposed Screening, Brief Intervention, and Referral for Treatment (SBIRT) model will strengthen integration of behavioral and mental health care services within the CFM. EMMC Family Medicine Residency Program is within in the Center for Family Medicine, and the training of residents will ensure that future Primary Care Physicians are well versed in integrated health care services. Substance Abuse Counselors from Wellspring, Inc., and The Acadia Hospital will be co-located on-site at the CFM to provide counseling services to patients screened and determined to need these services.
2009B-0006	HealthReach Community Health Centers 10 Water Street, Suite 305 Waterville, ME 04901	$230,000.00	$80,000.00	$150,000.00	X				HealthReach will implement HealthReach Integrated Behavioral Health Initiative (HIBHI) within 6 of 11 Federally Qualified Health Centers (FQHCs). As integrated members of the FQHC teams, the new Behavioral Health Consultants (BHC) will provide assessments and short term interventions to patients receiving primary care services HealthReach provides medical and preventive services to patients of all ages in medically underserved rural areas. The HIBHI fits well into our overall plan of increasing focus on patient and family.
2009B-0012	Mercy Hospital 144 State Street Portland, ME 04101	$230,000.00	$80,000.00	$150,000 00	X				Mercy Health System, in partnership with Community Counseling Center (CCC) and other key collaborators, will implement an integrated clinical services Patient-Centered Care Management (P-CCM) pilot program Our goal is to apply a patient and family-centered, primary care approach to a target population of adults with dual diagnoses (chronic behavioral/mental illness and chronic disease) Building on the integrated strengths of Mercy, CCC, Community Dental, and Amistad as a way to take advantage of each organization's resources, we will employ a Patient Care Navigator (PCN) as part of an Integrated Care Management Team.

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2009B-0013	Quality Counts 30 Association Drive P. O. Box 190 Manchester, ME 04351	$229,955.00	$76,787.00	$153,168 00	X				Quality Counts will create a Behavioral Health Integration (BHI) Metrics System to promote and sustain integration by providing data to guide appropriate, service delivery enhancements, public policy decisions, payment reforms, and consumer choice of healthcare setting and provider We will harness the organizational participation, time commitment, resources, and leadership from our partners in behavioral and physical health practices, government entities, and advocacy organizations to develop a statewide infrastructure for data collection, analysis, and reporting. By employing collaborative workgroups we will refine and deploy a set of metrics to measure patient satisfaction, patient outcomes, provider satisfaction, site demographics, and return on investment.
2009B-0015	State of Maine, Maine Center for Disease Control and Prevention 286 Water Street - Key Plaza, 9th Floor 11 State House Station Augusta, ME 04333	$229,999.00	$79,999.00	$150,000.00			X		This project will advance changes at the systems, rather than the health practice or patient level, to integrate public health and mental health programs and planning to improve the health of all Mainers. These systems have been largely isolated from one another, with separate target populations, policy development, infrastructure, funding streams, and programming. The initiative will fill gaps in knowledge about population-based mental health indicators, use mental health data to inform community public health efforts, and support linkages between community-based prevention/health promotion partners and community mental health systems. The project will expand the integration of mental health into chronic disease programming as a critical next step in the development of full integration of mental health into essential public health activities.
2009B-0016	Tri-County Mental Health Services P O Box 2008 Lewiston, ME 04241-2008	$230,000.00	$80,000 00	$150,000.00	X				This Integrated Health Care project will increase access to behavioral health care services provided by Tri-County Mental Health Services to the approximately 12,000 people of all ages in the Bridgton region who are patients of Bridgton Hospital Physicians Group's multiple practices. The project will embed mental health clinicians in the practices to provide brief, solution-oriented behavioral health treatment, streamline referrals for other TCMHS services offered in the community, provide information and education about behavioral health issues for staff of Bridgton Hospital Physician's Group, and create an integrated record for patients seen in the primary care setting. We will increase access to care by removing barriers such as geographic distance for rural consumers, improving convenience, enhancing coordination and holistic treatment among disciplines, and reducing stigma of accessing services at a community mental health clinic.

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2009CON-0012	*Barbara Shaw, JD 29 Bowdoin Street Portland, ME 04102*	*$884 87*	*$884 87*	*$0 00*				*X*	*Barbara Shaw will develop and present a 20-minute presentation on 'Overview of Medical and Behavior Health Ethics in the Integrated Setting' at the October 23 Integration Learning Community meeting In addition, she will facilitate a one-hour and fifteen minutes breakout session on 'Medical and Behavioral Health Ethics for Integrated Settings'.*
2009CON-0009	*Emily Hill & Associates, Inc 221 N. Front Street, Suite 101 Wilmington, NC 28401*	*$2,146 34*	*$2,146.34*	*$0 00*				*X*	*Consultant will develop and co-present with Mary Jean Mork a 4-hour presentation on 'Integration Reimbursement Strategies Training' to the Integration Learning Community on November 18, 2009*
2009CON-0006	*Health Psych Maine 2 Big Sky Lane Waterville, ME 04901*	*$400 00*	*$400.00*	*$0 00*				*X*	*Dr Matranga will develop and present a presentation on 'Evidence-based Mental and Behavioral Health Care for Adults' to the Integration Initiative Learning Community on July 24, 2009*
2009CON-0003	*Holly Korda 15 Birch Lane Old Orchard Beach, ME 04064*	*$841 90*	*$841.90*	*$0.00*				*X*	*Purpose Provide consultant services to support MeHAF program evaluation for the Integration Initiative and Fund for the Future*
2009CON-0004	*Javitch Associates 221 Lexington Street Newton, MA*	*$1,847.37*	*$1,847 37*	*$0.00*				*X*	*Scope of work: (1) Develop and present a 45-minute talk on leading change to a group of 70 health care administrators, clinicians, researchers and advocates. The audience is composed of MeHAF grantees who are working on projects to integrate primary care and behavioral health services and in some cases to link additional services such as dental and long term care (2) Facilitate a one-hour round table discussion immediately after the talk Approximately 10 - 20 people will participate in the round table discussion The format will be informal and largely responsive to participant questions In addition to the themes of leadership and change, techniques for inspiring motivation toward change should be addressed*

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2009EVAL-0002	John Snow, Inc. (JSI) 44 Farnsworth Street Boston, MA 02210-1211	$197,455 00	$160,000 00	$37,455.00				X	JSI will conduct an evaluation of MeHAF's Integration Initiative. Task 1 Support for Numeric Data Collected by Grantees Task 2 Qualitative Assessment of Grantees' Implementation of Integrated Care
2009CON-0007	MacNeal Family Medicine Residency 3231 S. Euclid Avenue, 5th Floor Berwyn, IL 60402	$1,492.98	$1,492.98	$0 00				X	Dr. Talen will develop and present on 'Mental and Behavioral Health Care in the Primary Care Setting' to the Integration Initiative Learning Community on July 24, 2009. The presentation will include concrete examples and take-away approaches and techniques that the grantees can put to use to enhance their projects Dr Talen will also facilitate a workshop session on 'Screening Mental Health in Primary Care' and conduct an exercise to practice screening.
2009CON-0001	Public Health Consulting, LLC 144 Common Road Dresden, ME 04342	$36,080 00	$36,080 00	$0.00				X	Public Health Consulting/Laura Ronan will provide support for MeHAF's Patient-Centered Care Integration Initiative Grantee Learning Collaborative.
2009CON-0002	Scheirer Consulting 238 Sayre Drive Princeton, NJ 08540	$21,771.56	$21,771.56	$0 00				X	Scheirer Consulting will help coordinate and extend the evaluation plans, including the following tasks (1) Working with evaluation contractors, to set up and review implementation evaluation; (2) Working with grantees' evaluation and presenting at 2 Learning Sessions meetings, (3) Continuing to plan for evaluation of systemic change toward integrated care for Maine; (4) Develop guidance on grantees' use of patient surveys and other methods to assess patient involvement and feedback; and (5) Participation in national research & events on change toward integrated care.
Continuing Projects									
2007A-0023	Acadia Hospital 268 Stillwater Ave P O Box 422 Bangor, ME 04402-0422	$325,000.00	$148,940.00	$89,926.00	X				This project provides an integrated, team-based model of care in which physical behavioral and specialty care are provided to more people through co-location. The key goal is to reduce the growing number of opiate abusers through integration, while providing greater access to all patients.

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2007A-0010	Amistad , Inc. 66 State St. P O. Box 992 Portland, ME 04104	$324,577.00	$114,713.00	$109,986.00	X				The Peer Patient Navigator project will use the potent techniques of mental health recovery and peer support to help integrate primary care, specialty care, and behavioral health care for individuals with severe and persistent mental illness and co-occurring chronic illness - individuals at high risk for drastically shortened life spans
2007A-0006	Aroostook Mental Health Services, Inc (dba AMHC) 43 Hatch Drive P O Box 1018 Caribou, ME 04736-1018	$325,000.00	$125,000 00	$100,000.00	X				AMHC will collaborate with three physical health care providers whom it currently works with. Pines, Fish River Rural Health and the Houlton Regional Hospital's pediatric practice, Houlton Pediatrics, to implement evidence-based, integrated health care that reflects the Institute of Medicine's six health care aims· that it be patient-centered, safe, timely, effective, efficient and equitable.
2007A-0034	Community Counseling Center 343 Forest Avenue Portland, ME 04101	$317,110.00	$105,208.00	$121,431 00	X				Community Counseling Center's proposal builds on co-location within Portland's Student Health Centers to better integrate primary care, behavioral health, and oral health services to high school students in Portland. The proposal provides care coordination, culturally-accessible case management, enhanced oral health capacity, flexible scheduling for mental health services, and student advocacy.
2007A-0027	Community Dental 276 Canco Road Portland, ME 04103	$325,000.00	$22,050.00	$22,400.00	X				The Western Maine Health Access and Integration Coalition proposes to increase access to health care services and to integrate primary/acute care, behavioral health care and dental (specialty) care for underserved residents of all ages living in Oxford County and the surrounding Western Maine communities.
2007A-0021	DFD Russell Medical Center 180 Church Hill Road Leeds, ME 04263	$286,926.00	$77,798.00	$56,580 00	X				DFD Russell Medical Center proposes to create the Mental Health Access at the Center of Health (MATCH) project which will match community needs with access and advance patient-centered care in our communities through integration of behavioral health and primary care for a rural and underserved population.
2007A-0029	Hitchcock Foundation One Medical Center Drive Lebanon, NH 03756	$324,958 00	$110,637 00	$105,540 00	X				This project provides the opportunity for collaboration between the Veteran's Administration health system and community-based providers to provide integrated care. Specific attention is paid to those veterans who have sustained concussive injuries.
2007A-0004	Maine Children's Alliance 303 State St Augusta, ME 04330	$179,955.00	$59,992.00	$59,994 00	X				This project will work with Maine's child serving departments to establish the routine collection and reporting of consistent, valid, and coordinated children's mental health care data. These data will be published in reports that will be used to assist in evaluating the children's mental health care system in Maine.

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2007A-0017	Maine Migrant Health Program 9 Green St P O Box 405 Augusta, ME 04332-0405	$73,332.00	$13,782.00	$0.00	X				Migrant and seasonal farm workers' (MSFWs) access to care is often greatly hindered by cultural, geographic and economic barriers, or is simply inaccessible for members of this population. The Integration Planning Project will evaluate the behavioral health needs of Maine's MSFWs in order to develop a plan to access integrated care.
2007A-0031	Maine-Dartmouth Family Medicine Residency 15 East Chestnut Drive Augusta, ME 04330	$238,860.00	$84,082.00	$56,347.00	X				An existing collaboration between Maine-Dartmouth Family Medicine Residency and Bread of Life Ministries (BOLM) provides coordinated health and social services for young families in BOLM transitional housing with support from a Bingham grant. The MeHAF project will add evidence-based behavioral paraprofessionals supervised by Crisis and Counseling Centers. The project will provide a model of integrated care within a family practice training setting.
2007A-0033	Northeast Health Foundation/Pen Bay Healthcare Foundation 22 White Street Rockland, ME 04841	$325,000.00	$100,000.00	$100,000 00	X				This project addresses mental health issues of youth and adults in the mid-coast area of Maine. Its goal is to solidify a mechanism of early detection, assessment and screening through an unprecedented level of integration of mental health with primary care and through collaboration with key local nonprofit agencies.
2007A-0022	Penobscot Community Health Center 1048 Union Street, Suite 5 Bangor, ME 04401	$325,000.00	$100,000.00	$100,000.00	X				Persons in transitional/permanent subsidized housing programs often have difficulty securing stable housing due to untreated medical and mental health issues. Penobscot Community Health Center will increase access to integrated medical, dental, mental health and substance abuse services and partner with local housing and supportive services to help individuals secure and retain permanent housing.
2007A-0025	Sacopee Valley Health Center P.O Box 777 Parsonsfield, ME 04047	$324,999.00	$98,477.00	$119,747.00	X				Sacopee Valley Health Center (SVHC) will expand its current Integrated Primary Care program by adding care management services, introducing the use of additional screening tools, offering a compendium of psychoeducational classes, establishing a Patient and Family Council, and strengthening the use of the 'Shadow Health Care' system to ensure access to care.
2007A-0007	Spring Harbor Hospital 123 Andover Road Westbrook, ME 04092	$324,697.00	$127,227.00	$91,970.00	X				A 2005-2007 pilot test of a mental health integration model funded by MeHAF has proven to benefit patients by improving access to care and enhancing the quality of care provided in the primary care setting. In 2008-2010, we propose to sustain the model at the pilot sites and expand it to an additional 12-16 primary care practices and mental health organizations.

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2007A-0014	St. Mary's Health System P.O. Box 7291 Lewiston, ME 04243	$325,000 00	$109,913.00	$85,575.00	X				This project will integrate four primary care settings providing care management and counseling in co-located space across health systems and in school-based health centers We will also implement strategic activities that bring behavioral health providers to look at issues of access and bring payers to the table to discuss reimbursement.
2007A-0008	University of New England 11 Hills Beach Road Biddeford, ME 04005	$214,816.00	$108,135.00	$0.00	X				People exposed to extensive poverty and violence in childhood frequently experience multi-morbidities Our previous work demonstrated that none of the 1748 people seeking mental health services had access to a medical home appropriate to their needs. Thisproject defines and delvers that population-specific, patient-centered resource.
2007A-0016	York County Community Action Corporation 6 Spruce Street Sanford, ME 04073	$324,000 00	$134,000.00	$100,000.00	X				The project will build capacity by expanding YCCAC's currently successful integrated health model. The goals of the project include: (1) the enhancement of coordination and collaboration among YCCHC providers, York County community resources and the clients, (2) further development and expansion of the use of care/case management at YCCHC; and (3) expansion of referral networks to incorporate under utilized community partners. To accomplish these goals, the project will implement a Client Centric Care Model, developed by the health center and based on Dunn's model of High Level Wellness and Wagner's Chronic Care model.
2008CON-0009	*Scheirer Consulting* *238 Sayre Drive* *Princeton, NJ 08540*	*$5,200.00*	*$5,200.00*	*$0 00*				*X*	*Evaluation of MeHAF's 2007A Integration Initiative*
Promoting Patient & Family-Centered Care: Total Grants (23) & Contracts (10) = $2,347,405.02									

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Strengthening Maine's Safety Net - Medication Assistance & Management									
Continuing Projects									
2008B-0012	St. Andrews Hospital & Healthcare Center 6 St Andrews Lane P O. Box 417 Boothbay Harbor, ME 04538	$50,000 00	$50,000 00	$0.00	X				St. Andrews will reduce medication errors, improve medication safety for patients and provide patient education related to medications. It will implement a 3-part medication safety project to address areas identified as gaps in best safe medication practices.
2006CON-0005	*USM/Edmund S Muskie School of Public Service, Cutler Institute for Health & Social Policy 34 Bedford Street P O Box 9300 Portland, ME 04104-9300*	*$374,086 00*	*$77,517 00*	*$0 00*	*X*				*Muskie will evaluate MeHAF's 'Promoting Medication Assistance Strengthening and Expanding Maine's Safety Net' initiative as a whole and its component parts, provide support to grantees in collecting data necessary to evaluate their projects, compare them to similar projects, and develop a business case to sustain projects, and provide ongoing technical assistance, feedback, and interim evaluation results to the stakeholders group, Foundation staff, and individual project directors*
2008CON-0010	*USM/Edmund S. Muskie School of Public Service, Cutler Institute for Health & Social Policy 34 Bedford Street P O Box 9300 Portland, ME 04104-9300*	*$142,584 00*	*$25,000.00*	*$25,000 00*	*X*				*Muskie will assist members of the Maine Critical Access Hospital Patient Safety Collaborative in the implementation of the hospital medication safety initiatives Muskie will also provide technical assistance to MeHAF's Medication Assistance grantees*

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Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2009	Ending Balance 2009	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
Strengthening Maine's Safety Net - Oral Health									
New Projects									
2009C-0002	Community Dental 276 Canco Road Portland, ME 04103	$50,000.00	$50,000.00	$0.00	X				Community Dental will establish a new community-based dental health care facility in Biddeford, Maine. This project will improve the delivery of appropriate health care, target high risk and underserved populations, and impact workforce development by addressing the shortage of dental health providers in the State of Maine. Community Dental's existing small York County Dental Centers in Saco and Sanford will be consolidated into the new location in the Thatcher Brook Business Park in Biddeford
2009C-0003	Downeast Health Services, Inc. 52 Christian Ridge Road Ellsworth, ME 04605	$19,950.00	$19,950.00	$0.00	X				Downeast Health Services will purchase portable digital x-ray equipment. 170 underserved children in Regional School Unit 24 will participate in the school-based portable oral health program. Capital project planning funds will provide financial support necessary for DEHS to work with Design Group Collaborative and with Ovation Fundraising Counsel on a multi-phase plan to co-locate Maine Coast Community Dental Clinic to the DEHS main office, joining the already collaborative team of programs, including Family Planning, WIC, home visiting, sexual assault support and family resource
2009C-0004	Kennebec Valley Dental Coalition, Inc d/b/a Community Dental Center 93 Main Street, 3rd Floor Waterville, ME 04901	$39,620.00	$39,620 00	$0 00	X				Grant funds will be used to purchase and install the required equipment for two additional operatories. The Center will be able to expand capacity to 1.5 times its prior hygiene volume and will ultimately double dentist services through this two phase expansion.
2009C-0007	Penobscot Indian Nation/Penobscot Nation Health Department Ruth Attean Davis Health Building 23 Wabanaki Way Indian Island, ME 04468	$31,340.00	$31,340.00	$0 00			X		The Penobscot Nation Health Department (PNHD) will purchase dental equipment that will allow for replacing of old out-dated equipment that frequently requires repairing, increasing the inventory of necessary equipment for the provision of services and increasing the array and number of on-site dental services that can be provided. PNHD has a current registered population of approximately 1500 people. Of this population, approximately 900 received dental services in the past 12 months.

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2009C-0008	Pleasant Point Passamaquoddy 11 Back Road P.O. Box 351 Perry, ME 04667	$15,000.00	$15,000.00	$0.00			X		MeHAF funds will be used to complete the purchase of a new panoramic x-ray machine. Currently, there are no up-to-date panoramic dental x-rays of the patient population due to issues such as transportation and lack of available MaineCare dental providers. The panorex machine, once purchased will be used to obtain current radiographs of the active clinic population of more than 1,300 AI/ANs and eligible users. Having a panorex will increase access to a vital dental service and satisfy a Standard of Care established by the Indian Health Service.
2009C-0005	St Andrews Hospital & Healthcare Center 6 St Andrews Lane P O. Box 417 Boothbay Harbor, ME 04538	$20,205 00	$20,205.00	$0 00	X				CarePartners Plus will add dental health services to its current program This project will provide oral health screening, periodontal services and urgent care services for this priority population. With current support from five local dentists, one hygienist, one denturist, the expanded program will be able to provide a service to this county that is not currently available. In addition to providing dental access, the expanded program will work to begin a dialogue with the larger medical community in an effort to have a model of full health care integration, one that includes medical, behavioral, and dental health care within one community.
2009C-0013	Waldo Community Action Partners 9 Field St., Suite 435 P.O Box 130 Belfast, ME 04915	$4,693 55	$4,693 55	$0.00	X				Funding will be used to purchase new and upgraded dental equipment. Acquiring new equipment, such as an ultrasonic scaler and additional instrument packs, will allow hygienists who currently can only provide care for 5 clients per clinic to increase that number to 8 Having additional and upgraded equipment will also allow clinics to be held more frequently.
2009C-0011	Washington County Children's Program Board P.O. Box 311 Machias, ME 04654	$39,725 00	$39,725 00	$0 00	X				The Washington County Children's Program (WCCP) will purchase s new clinical software which will allow for efficient data collection of preventive oral health services at 39 Washington County sites for approximately 800 children it sees annually For many children, WCCP is their first dental experience, and many times, it will see that same child with a five year gap between encounters. The software will give WCCP the ability to follow.that child, determine if its preventive oral health measures have been successful, and assist in determining a sealant retention rate since each year it places over 700 dental sealants. This system will also allow the program to track the very transient families as they move between the various school systems within the county.

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2009CON-0013	*DentaQuest Foundation 465 Medford Street Boston, MA 02129*	*$7,300 00*	*$7,300.00*	*$0.00*	X				*The Oral Health Policy Group provides a co-learning environment for funders committed to and engaged in efforts to change policy that will improve oral health in their communities*
2009CON-0005	*Karin Anderson/Dala Consulting 66 Munjoy Street #2 Portland, ME 04101*	*$23,445 00*	*$23,445 00*	*$0 00*				X	*The Oral Health Consultant will focus on leading strategic initiatives to promote solutions to Maine's oral health needs*
Strengthening Maine's Safety Net - Oral Health									
Continuing Projects									
2008CON-0004	*Karin Anderson/Dala Consulting 66 Munjoy Street #2 Portland, ME 04101*	*$ 14,600 00*	*$ 14,600.00*	*$ 0 00*				X	*The Oral Health Consultant will focus on leading strategic initiatives to promote solutions to Maine's oral health needs.*
Strengthening Maine's Safety Net - Other									
New Projects									
2009FI-0001	Maine Community Foundation, Inc. 245 Main Street Ellsworth, ME 04605	$2,500 00	$2,500.00	$0.00	X				This project will support the planning process for a collaborative initiative involving training and technical assistance organizations, the United Ways, and funders to identify and provide programs and services that will help nonprofit organizations adapt to the economic downturn.

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2009FI-0005	Maine Community Foundation, Inc. 245 Main Street Ellsworth, ME 04605	$28,450.00	$28,450.00	$0 00	X				The Maine Nonprofit Viability Program, established by the Nonprofit Sector Viability Collaboration, was designed in response to needs expressed by Maine nonprofits for assistance in navigating the current economic climate by assessing their organizational sustainability and viability. MeHAF funding will support a cohort of 10 health-related nonprofits, who address a field of service, to assess their organizational sustainability and viability, as well as support the continued coordination and program design work of the Collaboration.
2009E-0001	Penobscot Indian Nation/Penobscot Nation Health Department Ruth Attean Davis Health Building 23 Wabanaki Way Indian Island, ME 04468	$150,000.00	$150,000.00	$0.00			X		Very little data exists, in Maine, on the current health and status and the quality of care for enrolled members of the state's five federally recognized tribes: The Aroostook Band of Micmac Indians, The Houlton Band of Maliseet Indians, The Passamaquoddy Tribe Indian Township, The Passamaquoddy Tribe Pleasant Point, and The Penobscot Indian Nation. In a meeting on May 25, 2009, the Tribal Health Directors underscored the need for a Maine tribal health survey to provide an up-to-date comprehensive community health assessment at the individual tribal level, and at an aggregate state-wide level (combining data from all five tribes) Results from such a survey would assist the Tribal Health Directors with program planning, development, implementation, and evaluation, to strategically address the health disparities which exist within their respective communities. The study will profoundly impact the State of Maine's understanding the status of tribal health That data that has often been missing from Maine's aggregates.
Strengthening Maine's Safety Net: Total Grants (12) & Contracts (5) = $599,345.55									
Advancing Health Reform - Cost Containment Policy & Advocacy									
Continuing Projects									
2008D-0013	Consumers for Affordable Health Care Foundation 12 Church Street PO Box 2490 Augusta, ME 04330	$120,000.00	$60,000 00	$0.00	X				The goal of this Project is to build consumer confidence in and understanding of health cost and quality reforms in Maine. CAHC proposes three core activities under this initiative: research, plan, and advocate. These activities support our efforts to understand and advance two potential policy options: transparency in cost and quality information and payment reform Building consumer confidence in and understanding of payment reforms and measures to lower costs and improve quality will require meaningful and significant consumer-to-consumer outreach and education.

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Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2009	Ending Balance 2009	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2008D-0011	Maine Center for Economic Policy P O. Box 437 Augusta, ME 04332-0437	$120,000.00	$60,000.00	$0.00	X				The Maine Center for Economic Policy (MECEP) will pursue three strategic policy initiatives to address health care cost-containment to achieve better health care and health outcomes for the people of Maine. These include. efforts to increase transparency regarding price and quality information for Maine providers focusing on Maine hospitals; strengthening the certificate of need process through the formation of a technology assessment board, and movement towards a shared decision-making model that will support physicians who present an array of treatment options to patients. MECEP will pursue these initiatives through a collaborative approach with key medical providers, state agencies, nonprofits, and legislators. In addition, we will utilize the expertise of other states who have implemented these initiatives.
2008D-0003	Maine Equal Justice Partners 126 Sewall Street Augusta, ME 04330	$118,018.00	$59,925 00	$0 00	X				Maine Equal Justice sees an opportunity to achieve cost containment while enhancing access to, and delivery of care by addressing continuity of coverage for Maine's Medicaid enrollees. MEJP will focus its efforts on issues related to stability of coverage for this population. Coverage instability and churning lead to significant waste in resources and expenditures, but they are problems that can be addressed largely through administrative means. MEJP propose several strategies to improve continuity of coverage; including standardizing eligibility policies for certain populations, simplifying enrollment and recertification processes, and restructuring the delivery system for MaineCare-eligible children, particularly those with special needs. MEJP will work in collaboration with the Department of Health and Human Services to develop recommendations and implement proposed policies, and will seek input from the Maine Association of Interdependent Neighborhoods, its primary constituency group, as well as community agencies and advocacy organizations throughout the state

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2008D-0004	Maine Health Management Coalition Foundation P O Box 357 Scarborough, ME 04070-0357	$120,000.00	$60,000.00	$0.00	X				The Maine Health Management Coalition Foundation (MHMC-F) will research and develop a new Value-Based Payment Model that supports a health care system with six attributes identified by a group of Maine leaders as being critical to optimizing quality and value These six attributes are that the system: (1) provides transparent cost and quality information, (2) supports integrated health information technology (IT) infrastructure that promotes patient-centered coordination of care across settings; (3) promotes accountability for cost and quality at the patient, provider and community levels; (4) supports a viable and sustainable primary care foundation for the health care system that provides integrated, patient-centered care, (5) aligns payment with desired outcomes and eliminates waste; and (6) supports a public that is informed and engaged. The ultimate goal of the MHMC's commitment to payment reform is to reduce overall health care spending in Maine, while maintaining and expanding access and providing care that meets the Institute of Medicine's six aims - i.e. health care that is safe, timely, effective, efficient, equitable, and patient-centered.
2008D-0001	Maine Primary Care Association 73 Winthrop Street Augusta, ME 04330	$120,000.00	$60,000.00	$0.00	X				MPCA will undertake strategic policy activities in the first year of the project that will shape the model and test the value and role of a Medicaid managed care plan in Maine The policy approaches of this project are designed to: (1) incent both health care professionals and patients to engage in care delivery as provided through a patient-centered medical home (PCMH) that increases value (as defined by quality over costs) to the MaineCare program; (2) increase overall access to evidence-based primary and preventive care and cost-effective specialist care; and (3) reduce the overall costs of care by lowering per capita costs through cost effective treatment and improved health status through better use of primary care, pharmacy benefit management and care management.
2008D-0002	Medical Care Development 11 Parkwood Drive Augusta, ME 04330	$120,000.00	$60,000.00	$0.00	X				This project develops and tests analytic tools and policy methods to advance adult access to oral health services as a means of reducing the overall cost of health care. MCD will create a unique Maine-specific database linking dental and medical claims; engage stakeholders to define key elements and assumptions in a consensus approach to estimating return on investment (ROI); and demonstrate the method by using it to estimate impacts of oral health services in Maine for two groups: pregnant women and people with diabetes. The ROI estimates may be used to make the economic case for improved oral health services. Depending on the results of the analyses, the information will be used to inform and promote policy changes with both public and private insurers, particularly MaineCare.

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2008D-0007	NAMI-Maine One Bangor Street Augusta, ME 04330	$119,840 00	$59,920.00	$0.00	X				NAMI Maine, Amistad, CQI, and several other peer-run organizations will evaluate the quality and cost savings associated with Maine's family and peer support services The value of current cost containment protocols in Maine's mental health system will be reviewed A report will describe Maine's current peer and family support system, how it can be improved, what it can contribute to improved access and reduced cost Recommendations for policy change will result and a well-trained coalition of champions for change will pursue the adoption of recommendations.
2008D-0006	Prescription Policy Choices P O. Box 204 Hallowell, ME 04347	$119,996.75	$59,997.80	$0 00	X				Prescription Policy Choices (PPC) is committed to developing and vetting policy options that promote and institutionalize evidence-based prescribing and academic detailing programs as an effective, efficient and appropriate strategy to advance health care and delivery reform, contain and reduce health care costs without cost-shifting, and improve the overall value-benefit of health care spending by improving health outcomes. The Initiative to Promote Evidence-Based Prescribing Policies as a Cost-Containment Strategy to Preserve and Expand Health Care Access project will conduct the research and analysis resulting in best practices recommendations that will add validity and momentum to the promotion, institutionalization and sustainability of evidence-based health care policy reform and policymaking.
Advancing Health Reform - Policy/Research/Leadership Development									
New Projects									
2009FI-0006	Blue Cross and Blue Shield of Massachusetts Foundation, Inc Landmark Center 401 Park Drive Boston, MA 02215-3326	$17,000 00	$17,000 00	$0 00	X				This grant will be used to sponsor the participation of a Maine-based medical journalist in the Health Coverage Fellowship. The Fellowship is an intensive nine-day immersion program for journalists on health access and reform issues Fellows hear from top health officials, policymakers, and researchers; they also watch first-hand how the system works
2009FI-0007	Center for Health Policy Development National Academy for State Health Policy 10 Free Street Portland, ME 04101	$13,334.29	$13,334 29	$0 00	X				MeHAF funds will be used to sponsor health policy leaders from Maine to attend NASHP's State Health Policy Conference.

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2009FI-0002	Daniel Hanley Center for Health Leadership P O. Box 15275 Portland, ME 04112-5275	$52,000 00	$20,000 00	$32,000.00	X				The 'MeHAF Scholars' program will assure that individuals from health-related organizations that serve MeHAF's priority populations can fully participate in the statewide Hanley-Institute for Civic Leadership (ICL) Health Leadership Development (HLD) course. Increased enrollment from this sector will build leadership capacity, contribute to the diversity of each HLD class and build understanding and awareness about issues relating to access, health disparities and the needs of underserved populations in Maine It will also stimulate greater collaboration among health and health care leaders as they address these issues in the months and years ahead
Advancing Health Reform - Policy/Research/Leadership Development									
Continuing Projects									
2006FI-0003	Maine Development Foundation 295 Water Street, Suite 5 Augusta, ME 04330	$123,949.00	$24,950.00	$24,950.00	X				This project will integrate and link health care and health care costs to the economic viability of our state. By bringing that perspective to the program, current and future leaders will gain additional needed information to their decision making processes in shaping Maine's future.
Advancing Health Reform - Public Education/Consensus Building									
New Projects									
2009A-0002	Community Concepts, Inc 17-19 Market Square PO Box 278 South Paris, ME 04281	$20,000 00	$20,000.00	$0.00	X				Community Concepts will partner within its large and diverse community action agency to offer a comprehensive perspective of the issues and potential solutions to optimizing MaineCare members' health Corralling its program leaders within transportation, head start, low income home energy assistance, case/care management, clinical counseling, social work and prevention, we have the ability to reach MaineCare members and stimulate change.
2009A-0008	Co-Occurring Collaborative Serving ME 94 Auburn St., Suite 110 Portland, ME 04103	$19,171 50	$19,171.50	$0 00	X				The Co-Occurring Collaborative will draw upon its experiences, expertise and membership to participate in a planning process to develop collaborative strategies to strengthen the understanding, impact and value of MaineCare for its members.

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2009A-0013	Maine Equal Justice Partners 126 Sewall Street Augusta, ME 04330	$19,280 00	$19,280.00	$0 00	X				Maine Equal Justice Partners will participate in a collaborative planning process to identify and design strategies to improve the delivery of care to MaineCare members. MEJP will work in partnership with its primary client and grassroots partner, the Maine Association of Interdependent Neighborhoods (MAIN) to identify access and service delivery issues confronting MaineCare recipients and will bring their experiences and their voices directly to this planning initiative. We will conduct data gathering at monthly MAIN meetings, as well as through outreach efforts, specifically designed to solicit input. MEJP will conduct two focus groups with MaineCare members to learn the issues they face in navigating the health care system. MEJP's work in this initiative will be informed, as well, by its many allies and organizational members of MAIN, including Head Start programs, CAP agencies, senior citizen groups, and other low-income coalitions.
2009A-0012	Maine Primary Care Association 73 Winthrop Street Augusta, ME 04330	$20,000.00	$20,000 00	$0.00	X				Utilizing a framework of patient-centered care, MPCA will work with its members to conduct focus groups of MaineCare members as well as survey MaineCare members concerning their challenges to navigating the health care system, their use of hospital emergency departments, and ability to improve their health in the context of the challenges that they face in their everyday lives. Focus groups will be held in at least five locations - Sanford, Lewiston, Bangor, Lincoln, and Ellsworth. MPCA will coordinate efforts with other participating safety net providers in this project. MPCA will also support a survey that elicits comparative information among a broader array of FQHCs
2009A-0007	Medical Care Development 11 Parkwood Drive Augusta, ME 04330	$16,347.25	$16,347.25	$0 00	X				Forty-three percent of the users ofMaine's School-based Health Centers (SBHCS) are MaineCare members. The MeASBHC will research and disseminate the patient-centered care models and best practices found in these 27 SBHCS in 17 Maine communities, to help improve access and care for MaineCare members. MeASBHC will draw from existing patient databases, satisfaction surveys, ongoing program evaluations, and information from the National Assembly on School-based Health Care for this effort It will also conduct user forums at selected SBHCS in collaboration with its partners.
2009A-0001	NAMI-Maine One Bangor Street Augusta, ME 04330	$16,675 00	$16,675 00	$0 00	X				NAMI Maine will participate actively in the nine-month planning process led by MeHAF. NAMI's Executive Director will serve on the committee, organize a process for and collect information from NAMI callers, volunteers, and trainees, and carry out research or other activities as needed as part of the planning process

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2009A-0006	Sacopee Valley Health Center P O. Box 777 Parsonsfield, ME 04047	$20,000 00	$20,000.00	$0.00	X				Sacopee Valley Health Center (SVHC) proposes a four methodology survey process to explore with MaineCare members what strategies might improve the value and impact of MaineCare for them. SVHC's survey process will include mailed surveys, on-site surveys when accessing care, focus group surveys and one one-on-one interview surveys using the same tool SVHC will share with the other MeHAF-funded planning partners the results of the surveys, as well as sharing our knowledge regarding working with the MaineCare population.
2009CON-0011	*Anita Teague Ruff 41 East Milan Street Bath, ME 04530*	*$697.50*	*$697 50*	*$0 00*				*X*	*Consultant will facilitate a focus group.*
2009CON-0010	*USM/Edmund S Muskie School of Public Service, Institute for Public Sector Innovation 45 Commerce Drive, Suite 11 Augusta, ME 04330*	*$2,160 00*	*$2,160 00*	*$0 00*	*X*				*Consultant will facilitate six focus groups.*
Advancing Health Reform - Public Education/Consensus Building									
Continuing Projects									
2008CON-0013	*Pivot Point, Inc Carol Kelly 15 Briggs Street Portland, ME 04102*	*$22,856 25*	*$22,856 25*	*$0 00*				*X*	*Facilitation of MeHAF's planning process to bring together providers, advocates, payers, employers and other stakeholders to craft a plan for improving the impact and value of MaineCare for all Maine people by increasing the ability of MaineCare enrollees to navigate the health care system, and improve their care and their health.*

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Advancing Health Reform - Other									
New Projects									
2009FI-0004	University of New England 11 Hills Beach Road Biddeford, ME 04005	$82,444.00	$82,444.00	$0.00	X				University of New England (UNE) is requesting funding for planning for clinical site development and student recruitment for UNE's College of Dental Medicine.
2009FI-0003	USM/Edmund S. Muskie School of Public Service, Cutler Institute for Health & Social Policy 34 Bedford Street P.O Box 9300 Portland, ME 04104-9300	$60,000 00	$60,000.00	$0.00	X				A recently completed study of emergency department (ED) use in Maine determined that average use rates in Maine are high in relation to national use patterns and that substantial variation exists in rates of use between health service areas and between different population groups (based on health coverage status). Phase II of the study is a comparative case study of six health service areas in Maine, three selected for high ED use and three for low use rates. Information will be collected from the six areas to evaluate the contribution of various population and health system characteristics that may be contributing to different patterns of ED use
Advancing Health Reform: Total Grants (21) & Contracts (3) = $854,758.59									

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Other Funding - Fund for the Future									
2009D-0001	AOS 93 767 Main St Damariscotta, ME 04543	$49,473 00	$24,559.00	$24,914.00	X				AOS No 93 seeks funding to expand the current work of the grassroots organization Focus on Agriculture in Rural Maine Schools (FARMS.) FARMS goals are to expand their work to bring local foods and farms into the schools by creating a FARMS to School Coordinator position to create 'food learning centers,' within the classroom and school cafeterias Additionally, FARMS seeks to change the culture of student food choice behaviors through educating AOS #93's 1625 students about healthy choices with a three pronged approach. This approach includes setting benchmarks for the schools health and nutrition programs, curriculum development involving taste testing and seed to table discussions and the analysis of local health data in collaboration with the local primary care practices and the local healthcare organization. With this 3 pronged approach AOS#93 and FARMS seek to demonstrate that schools can impact the health choices that students make resulting in life long healthy habits
2009D-0002	Child and Family Opportunities, Inc P.O. Box 648 Ellsworth, ME 04605	$50,000.00	$25,000.00	$25,000.00	X				Good Food: Community Based Support for Healthy Eating, a project in Sedgwick Maine, will make healthy eating easier, fun, and socially normative. This project has no interest in being the food police, chastising people for eating potato chips or celebrating a birthday with a chocolate layer cake. Most adults know that it is best for our health to eat plenty of vegetables and to limit fat, sugar, salt and processed foods. Limited economic resources, busy schedules, and force of habit make boxed Mac and cheese or a package of hot dogs easier. Focusing on education alone is not sufficient Thus, this project will combine education with economic, social, and environmental support. The Good Food Project will teach adults how to plan and cook nutritious meals, involve children and youth in cooking and nutrition education, make it easier to walk into the grocery store and pick up the ingredients for a healthy meal that takes minimal preparation time, make it easier to exit a convenience store with a healthy snack, provide economic support for individuals and families seeking fresh produce, support local food production by connecting families to farms, facilitate social networks that encourage healthy eating, and celebrate local wisdom about food preparation in a community blog

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2009	Ending Balance 2009	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2009D-0005	Rangeley Lakes Heritage Trust Inc 52 Carry Road PO Box 249 Oquossoc, ME 04964	$50,000.00	$25,000.00	$25,000.00	X				EcoVenture and partner Rangeley Region Health and Wellness Partnership (RRHWP) will implement an expanded version of EcoVenture's award-winning program to address childhood obesity in Rangeley. Collaborating with RRHWP, the EcoVenture program will increase the physical activity of its campers and provide nutritional education by expanding the program's length, scope of activities and number of campers. Designed to dovetail with the Rangeley Lakes Regional School's (RLRS) team-based 'Fit 'N Fun' program, and based loosely on the Rangeley's 'Biggest Loser' contest sponsored by RRHWP, the program will insure that health-based progress made by children during the school year are retained or improved while attending EcoVenture.
Fund for the Future: Total Grants (3) = $74,559.00									
Other Funding - Discretionary Grants									
2009DIS-0017	Acadia Hospital 268 Stillwater Ave. P.O Box 422 Bangor, ME 04402-0422	$2,000.00	$2,000 00	$0.00	X				Utilizing early psychosis experts from Yale, Harvard, PIER, the University of North Carolina, and Acadia's Aware Program, host a one day conference for regional primary care, mental health and education providers focused on assessment and early intervention strategies for young people with, or at risk for, psychotic disorders.
2009DIS-0004	Aroostook County Action Program, Inc. 771 Main Street PO Box 1116 Presque Isle, ME 04769	$1,000 00	$1,000.00	$0 00	X				Healthy Aroostook will provide an accessible, youth-driven meeting where youth in Grades 5-8 are welcome to learn about various health issues and will be provided with the tools and knowledge they need to improve the health status of themselves, their family, their peers, and their communities.
2009DIS-0006	Division of Public Health, HHS Dept., City of Portland Portland City Hall 389 Congress St. Portland, ME 04101	$3,500.00	$3,500 00	$0.00			X		Project is designed as a train-the-trainer to instruct 8-15 cultural facilitators in Portland. Training covers basics of sexuality education and intimate partner relationships in western culture. Facilitators' trainees will use this knowledge to educate parents and families with whom they interact in the community.
2009DIS-0008	Division of Public Health, HHS Dept, City of Portland Portland City Hall 389 Congress St. Portland, ME 04101	$1,765 00	$1,765 00	$0 00			X		The MHP is seeking funds to improve physical activities among Latino community through soccer while promoting disease preventions. This is the 6th annual Latino Soccer championship to be held on July 25th & August 1st, 2009. Event provides safe family environment for socio-cultural integration and celebration of their cultural identity/values

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Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2009	Ending Balance 2009	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2009DIS-0007	HealthInfoNet 16 Association Drive P.O. Box 360 Manchester, ME 04351	$10,000.00	$10,000.00	$0.00	X				This project will develop a statewide health information technology strategic plan (HITSP) that establishes a clear vision, priorities and an implementation road map for improving Maine's health information infrastructure as a central pillar for transforming health care delivery in the state.
2009DIS-0005	HealthReach Network 10 Water Street, Suite 307 Waterville, ME 04901	$2,350.00	$2,350 00	$0.00	X				Maine Hospice Education Day will be a full day educational event, held in Waterville, covering a range of hospice related topics in three broad categories: general end of life/hospice care, grief and bereavement, and self care There will be specific information related to end stage dementia
2009DIS-0016	Kennebec Valley Dental Center 269 Water Street Augusta, ME 04330	$10,000.00	$10,000 00	$0.00	X				Purchase of dental chair to properly equip Kennebec Valley Dental Center (KVDC), so that as many uninsured and medically underserved patients as possible are given high-quality care and treated with dignity. KVDC provides preventive and restorative care, accepts MaineCare, and uses a sliding-fee scale (income-based).
2009DIS-0002	Maine Boys to Men 565 Congress Street, Suite 206A Portland, ME 04101	$1,500.00	$1,500.00	$0.00	X				Boys to Men is partnering with the Maine Office of Substance Abuse, Portland Public Health Division, The Maine Medical Center and others to produce our ninth annual Boys to Men Conference; this year focused on substance abuse prevention and wellness promotion. We serve 350 boys and their significant adults.
2009DIS-0010	Maine Center for Public Health One Weston Court, Suite 109 Augusta, ME 04330	$9,333.00	$9,333.00	$0.00	X				The MCPH recognizes that Maine has a long standing interest in the potential linkages between environment and health, as well as in the development and assessment of community health systems. This project will build on successful past efforts in implementing this project, and specifically to incorporate the advice and review of those agencies and organizations doing significant work in this area.
2009DIS-0011	Maine Center on Deafness 68 Bishop St , Suite 3 Portland, ME 04103	$1,500.00	$1,500 00	$0.00	X				The sign language-using deaf population is critically underserved medically and under-informed due to communication barriers to public health messaging. This second Maine ASL health fair 'Prevent, Protect, Prepare' will provide hands-on-health care education, delivered in ASL Flu, HIV, cancer, primary care, MaineCare, dental, emergency preparedness, parenting will be covered.
2009DIS-0014	Maine Public Health Association 11 Parkwood Drive Augusta, ME 04330	$9,780 00	$9,780.00	$0.00	X				MPHA, in collaboration with organizations across the state, will implement a comprehensive preparedness messaging campaign. This campaign will reach approximately half of the population with special emphasis on low-income and seniors. The project goal is to motivate Mainers to create stay-home kits in the event of pandemic flu or other emergency.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2009 01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2009	Ending Balance 2009	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2009DIS-0003	MaineGeneral Medical Center 6 East Chesnut Street Augusta, ME 04330	$6,324 30	$6,324 30	$0.00	X				Project will create and distribute a 10-12 minute educational DVD addressing safety issues in prescription drug use for targeted audiences including. * Patients with chronic pain contracts, * Emergency room patients given a prescription for acute pain, * Family members of people with prescriptions for chronic or acute pain
2009DIS-0018	Mobius, Inc. 319 Main Street Damariscotta, ME 04543	$9,837 00	$9,837.00	$0 00	X				The proposed project would continue work of the applicant agency to research an approach for reviewing goals from service plans required by MaineCare for persons with mental retardation and autism disorders. Proposed activities would examine the extent that service goals are present to address recipient health needs.
2009DIS-0015	USM/Edmund S. Muskie School of Public Service, Cutler Institute for Health & Social Policy 34 Bedford Street P O Box 9300 Portland, ME 04104-9300	$9,784.00	$9,784 00	$0 00	X				As part of a national study of model safety net systems for the uninsured, the Muskie School will collaborate with Wake Forest University and MaineHealth to compare the costs of care for CarePartners patients, with the costs that Maine would have to incur if that population were covered by Medicaid (MaineCare)
2009DIS-0012	Welcoming Light, Inc. 45 High Street Nashua, NH 03060	$5,000 00	$5,000 00	$0.00	X				This three-day conference addresses multi-disciplinary and community based approaches to eliminating racial and ethnic health disparities. Abstracts are selected by regional experts, and each presenter is given enough time to create an environment of learning and sharing.
Discretionary Grants: Total Grants (15) = $83,673.30									
Other Program-Related Funding & Charitable Gifts									
2009CGF-0006	Alzheimer's Disease and Related Disorders Association, Inc - Maine Chapter 170 US Route One, Suite 250 Falmouth, ME 04105	$1,200 00	$1,200 00	$0.00	X				General Support

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2009 01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2009	Ending Balance 2009	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2009CGF-0002	Aroostook Mental Health Services, Inc (dba AMHC) 43 Hatch Drive P O Box 1018 Caribou, ME 04736-1018	$1,600.00	$1,600.00	$0.00	X				General Support
2009CGF-0009	Aroostook Mental Health Services, Inc. (dba AMHC) 43 Hatch Drive P.O. Box 1018 Caribou, ME 04736-1018	$8,000.00	$8,000.00	$0.00	X				General Support
2009CGF-0008	Association of Small Foundations 1720 N Street, NW Washington, DC 20036	$1,500.00	$1,500.00	$0.00	X				General Support
2009CGF-0004	Family Violence Project 83 Western Ave. P O Box 304 Augusta, ME 04332-0304	$800 00	$800 00	$0.00	X				General Support
2009CGF-0005	Hearing Loss Association of America, Rochester Chapter 145 Regatta Drive Webster, NY 14580	$800 00	$800 00	$0.00	X				General Support
2009CGF-0001	Maine Initiatives 295 Water Street, Suite 100 P O Box 2248 Augusta, ME 04338	$5,000.00	$5,000.00	$0 00	X				MeHAF sponsorship of the Watering Can Awards Dinner (lead sponsor).

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2009 01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2009	Ending Balance 2009	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2009CGF-0003	Natural Resources Council, Inc. 3 Wade St. Augusta, ME 04330	$800.00	$800 00	$0.00	X				General Support
2009CGF-0007	St Mary's Health System P O Box 7291 Lewiston, ME 04243	$1,600.00	$1,600.00	$0.00	X				General Support
2009CON-0008	*Amy Ahearn 4801 Connecticut Ave., NW, Apt. 618 Washington, DC 20008*	*$1,344 00*	*$1,344 00*	*$0.00*				*X*	*Amy Ahearn will do the following update MeHAF Oral Health Funding document, an analysis of Integration Initiative Round 3 applications to determine level of fit with the RFP, and analysis of Fund for the Future Letters of Intent to determine level of fit with the RFP, draft of a recommended approach to formalize internships at MeHAF.*
2008CON-0007	*Catharine A Hartnett 68 Graystone Lane Portland, ME 04103*	*$25,402.00*	*$25,402 00*	*$0 00*				*X*	*Catharine Hartnett will guide the development of an organizational communications strategy and "voice" that guides MeHAF's work as a grant maker, convener, health policy expert, nonbiased information source and public educator through activities as described in the contract.*
2009CON-0014	*The Center for Effective Philanthropy 675 Massachusetts Ave., 7th Floor Cambridge, MA 01239*	*$19,000*	*$9,500*	*$9,500*	*X*				*CEP will survey the 2008 active nonprofit grantees and 2008 nonprofit declined grant applicants of MeHAF using CEP's proprietary grantee and declined applicant survey instruments CEP will provide reports to the Foundation portraying grantee and declined applicant perceptions of the Foundation relative to CEP's proprietary data set of grantee and declined applicant responses of other foundations.*

Charitable Gifts: Total Grants (9) = $21,300

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2009 01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2009	Ending Balance 2009	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description

Total Grants Paid in 2009 (74)	$3,555,499.69
Total Contracts Paid in 2009 (21)	$440,486.77
Total Other Program-Related Funding & Charitable Gifts (12)	$57,546.00
Total Payments in 2009	$4,053,532.46

Total New Grant Awards (Newly allocated in 2009) = 48	**$2,382,904.89**

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 15
Year Ended December 31, 2009 01-0535144

Part XV, Line 2: Information Regarding Grant Programs

Line 2a: Grant applications should be addressed to:

Catherine Luce, Grants Manager
Maine Health Access Foundation
150 Capitol Street, Suite 4
Augusta, Maine 04330
email: cluce@mehaf.org
Phone: (207) 620-8266; ext 104

Line 2b: The Maine Health Access Foundation (MeHAF) provides explicit guidance for the submission of grant applications on its website. Current information about MeHAF's grant programs is available at www.mehaf.org under the section marked "Grants Center." In 2009, MeHAF issued several Request for Proposals (RFP) for its three strategic priorities: *Strengthening Maine's Safety Net; Promoting Patient & Family Centered Care; and Advancing Health Reform*. Information regarding MeHAF's funding priorities and grant opportunities, including all RFPs, are available on the MeHAF website. Each RFP provides explicit information on the submission requirements, application forms and other relevant project materials for major strategic programs and policy grants.

Line 2c:

All submission deadlines are outlined in the Foundation's request for proposals available through the website: www.mehaf.org. In addition to RFP solicitations, MeHAF offers open funding opportunities through the discretionary grants programs and foundation-initiated (invited) grants. Guidance is available on the MeHAF website.

Line 2d: MeHAF generally limits its grant awards offered through competitive RFPs to 501(c)(3) tax-exempt charitable organizations, educational institutions, governmental entities or other public, non-profit entities. Private foundations, individuals, fiscal sponsorships and organizations with pending non-profit status are ineligible to receive funding through the competitive RFP process. MeHAF primarily funds Maine-based organizations; however, qualified organizations may apply for funding if the project activities focus on Maine's health care system or Maine residents.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 16
Year Ended December 31, 2009 01-0535144

Part VII-A, Line 5c: Statement Required by Regs. Section 53-4945-5(d)

1. Name and address of grantee:

Blue Cross Blue Shield of Massachusetts Foundation
The Landmark Center
401 Park Drive
Boston, MA 02215

2. Date and amount of the grant:

Approval Date: 12/4/2009
Grant Amount: $17,000
Grant Period: 01/01/2010 – 10/31/2010

3. Purpose of the grant:

The Health Coverage Fellowship Program is designed to help the New England media do a better job covering critical health care issues. The goal of the Fellowship is to deepen the media's understanding of the intricate and dynamic world of medicine and health care, with an emphasis on the special problems facing low-income and uninsured individuals and families. MeHAF funding is to support a Maine journalist.

4. Amounts expended by the grantee (based on the most recent report):

Narrative and financial reports are due on 12/17/2010.

5. Statement regarding fund diversion:

To the best of Maine Health Access Foundation's knowledge, the grantee has not diverted any portion of the fund from the purpose of the grant.

6. Dates of any reports received from the grantee:

MeHAF has not received reports from the grantee as narrative and financial reports are due on 12/17/2010. Reports (narrative and financial) from previous grants, have been received, reviewed and approved on a timely basis.

7. Dates and results of verification of grantee's reports:

Upon receipt of narrative and financial reports, the CEO will review the reports from Blue Cross Blue Shield of Massachusetts Foundation, to ensure the appropriate use of grant funds.

Form **8868**
(Rev. April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I **Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶ [ ]

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization	Employer identification number
	MAINE HEALTH ACCESS FOUNDATION, INC.	01-0535144
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 150 CAPITOL STREET, No. 4	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. AUGUSTA, ME 04330	

Check type of return to be filed (file a separate application for each return):

[ ] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (sec. 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[X] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ▶ WENDY J. WOLF
150 CAPITOL STREET, SUITE 4 - AUGUSTA, ME 04330
Telephone No. ▶ (207) 620-8266 FAX No. ▶ (207) 620-8269
- 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 this is for 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 members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until August 15, 2010 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ [X] calendar year 2009 or
▶ [ ] tax year beginning ______ , and ending ______ .

2 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in 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	$ 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	$ 140,312.
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	$ 0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 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 copies needed).

Type or print		
	Name of Exempt Organization MAINE HEALTH ACCESS FOUNDATION, INC.	**Employer identification number** 01-0535144
File by the extended due date for filing the return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 150 CAPITOL STREET, No. 4	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. AUGUSTA, ME 04330	

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 1041-A [ ] Form 5227 [ ] Form 8870
[ ] Form 990-BL [X] Form 990-PF [ ] Form 990-T (trust other than above) [ ] Form 4720 [ ] Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ▶ WENDY J. WOLF 150 CAPITOL STREET, SUITE 4 - AUGUSTA, ME 04330

Telephone No. ▶ (207) 620-8266 FAX No. ▶ (207) 620-8269

- 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 this is for 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 members the extension 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 [ ] Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION NECESSARY TO PREPARE A COMPLETE AND ACCURATE RETURN.

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	$	12,133.
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 previously with Form 8868.	8b	$	140,312.
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.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ▶ E. Drew Cheney Title ▶ CPA Date ▶ 8/12/10

923832
05-26-09