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# Short Form Return of Organization Exempt From Income Tax

2010

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

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

**A** For the 2010 calendar year, or tax year beginning July 1, 2010, and ending June 30, 2011

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

**C** Name of organization: **Maine Library Association**

Number and street (or P.O. box, if mail is not delivered to street address) / Room/suite: **PO Box 634**

City or town, state or country, and ZIP + 4: **Augusta, ME 04332-0634**

**D** Employer identification number: **01-0383486**

**E** Telephone number: **207-441-1410**

**F** Group Exemption Number: **▶**

**G** Accounting Method:  Cash  Accrual Other (specify) **▶**

**I** Website: **▶ www.mainelibraries.org**

**J** Tax-exempt status (check only one) -  501(c)(3)  501(c) ( **6** ) ◀ (insert no)  4947(a)(1) or  527

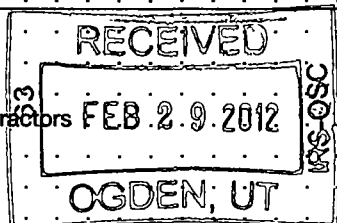
**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**K** Check  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

**L** Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ **▶ \$ 58807.00**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I.)  
 Check if the organization used Schedule O to respond to any question in this Part I

	Description		Amount
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received	<b>1</b>	1695.00
	<b>2</b> Program service revenue including government fees and contracts	<b>2</b>	43691.00
	<b>3</b> Membership dues and assessments	<b>3</b>	13902.00
	<b>4</b> Investment income	<b>4</b>	292.00
	<b>5a</b> Gross amount from sale of assets other than inventory	<b>5a</b>	
	<b>b</b> Less: cost or other basis and sales expenses	<b>5b</b>	
	<b>c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	<b>5c</b>	
	<b>6</b> Gaming and fundraising events		
	<b>a</b> Gross income from gaming (attach Schedule G if greater than \$15,000)	<b>6a</b>	
	<b>b</b> Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	<b>6b</b>	
<b>c</b> Less: direct expenses from gaming and fundraising events	<b>6c</b>		
<b>d</b> Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	<b>6d</b>		
<b>7a</b> Gross sales of inventory, less returns and allowances	<b>7a</b>		
<b>b</b> Less: cost of goods sold	<b>7b</b>		
<b>c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	<b>7c</b>		
<b>8</b> Other revenue (describe in Schedule O)	<b>8</b>	227.00	
<b>9</b> Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	<b>9</b>	59807.00	
<b>Expenses</b>	<b>10</b> Grants and similar amounts paid (list in Schedule O)	<b>10</b>	3400.00
	<b>11</b> Benefits paid to or for members	<b>11</b>	0
	<b>12</b> Salaries, other compensation, and employee benefits	<b>12</b>	0
	<b>13</b> Professional fees and other payments to independent contractors	<b>13</b>	5,833.00
	<b>14</b> Occupancy, rent, utilities, and maintenance	<b>14</b>	0
	<b>15</b> Printing, publications, postage, and shipping	<b>15</b>	202.00
	<b>16</b> Other expenses (describe in Schedule O)	<b>16</b>	51301.00
	<b>17</b> Total expenses. Add lines 10 through 16	<b>17</b>	60736.00
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9)	<b>18</b>	(929.00)
	<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	<b>19</b>	79,927.00
	<b>20</b> Other changes in net assets or fund balances (explain in Schedule O)	<b>20</b>	
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20	<b>21</b>	78998.00



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B

**Part II Balance Sheets.** (see the instructions for Part II.)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
<b>22</b> Cash, savings, and investments . . . . .	67,197.00	66809.00
<b>23</b> Land and buildings . . . . .		
<b>24</b> Other assets (describe in Schedule O) . . . . .	13,113.00	11,710.95
<b>25</b> Total assets . . . . .		
<b>26</b> Total liabilities (describe in Schedule O) . . . . .	383.00	478.00
<b>27</b> Net assets or fund balances (line 27 of column (B) must agree with line 21) . . . . .	79,927.00	78998.00

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III.)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? **Library Advocacy and Training**  
 Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)
<b>28</b> 1. Provided workshops and continuing ed. opportunities via 2 day MLA Conference (160 participants) 2. Gave scholarship and 4 grants to students enrolled in library school or attending MLA 2010 conference 3. Held a special continuing education event, awarded OLY Award and celebrated MLA's 120th year (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>28a</b>
<b>29</b> . . . . . (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>29a</b>
<b>30</b> . . . . . (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>30a</b>
<b>31</b> Other program services (describe in Schedule O) . . . . . (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>31a</b>
<b>32</b> Total program service expenses (add lines 28a through 31a) . . . . .	<b>32</b>

**Part IV List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated. (see the instructions for Part IV.)

Check if the organization used Schedule O to respond to any question in this Part IV

(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 & deferred compensation	(e) Expense account and other allowances
Sonja Plummer-Morgan Turner Library, 39 Second St., Presque Isle, ME 04769	President	0	0	0
Andrea Jackson-Darling Falmouth Mem Lib, 5 Lunt St., Falmouth, ME 04105	Vice-President	0	0	0
Lisa Neal-Shaw Turner Library, 39 Second St., Presque Isle, ME 04769	Secretary	0	0	0
Mamie Ney So. Berwick PL, PO Box 35, So Berwick, ME 03908-0035	Treasurer	0	0	0
Joyce Rumery Fogler Lib. UMaine, Orono, ME 04469	Member-at-Large	0	0	0
Nissa Flanagan Merrill Mem Lib., 215 Main St., Yarmouth, ME 04096	Member-at-Large	0	0	0
Paul Dostie Curtis Mem. Lib, 23 Pleasant St, Brunswick, ME 04011	NELA Representative	0	0	0
Betsy Paradis Belfast Free Lib., 106 High St., Belfast, ME 04915	Archives & Special Coll. Chair	0	0	0
Annika Black Bridgton PL, 1 Church St., Bridgton, ME 04009	YSS Chair	0	0	0
Jim Campbell Modiular Media PO Box 1119, Bucksport, ME 04416	Intellectual Freedom Chair	0	0	0
Brian Sylvester Thomaston PL, 60 Main St., Thomaston, ME 04861	Legislative Chair	0	0	0
Debbie Lozito Edythe Dyer Library, 269 Main St. Hampden, ME 04444	Scholarship&Loan CoChair	0	0	0
Ann Rea Beal Coll Lib, 99 Farm Rd., Bangor, ME 04001-6831	Scholarship&Loan CoChair	0	0	0

Part V Other Information (Note the statement requirements in the instructions for Part V.)

Check if the organization used Schedule O to respond to any question in this Part V . . . . .

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O . . . . .		✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) . . . . .		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements? . . . . .		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)? . . . . .		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ <b>37a</b> _____		
b	Did the organization file Form 1120-POL for this year? . . . . .		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . . . . .		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . . <b>38b</b> _____		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 . . . . . <b>39a</b> _____		
b	Gross receipts, included on line 9, for public use of club facilities . . . . . <b>39b</b> _____		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .		
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ _____		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ _____		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. . . . .		✓
41	List the states with which a copy of this return is filed. ▶ _____		
42a	The organization's books are in care of ▶ <u>Edna M. Comstock, Business Manager</u> Telephone no. ▶ <u>207-441-1410</u> Located at ▶ <u>74 Winthrop St., Augusta, ME</u> ZIP + 4 ▶ <u>04330</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .		✓
	If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . .		✓
	If "Yes," enter the name of the foreign country: ▶ _____		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b> _____		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .		✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .		✓
c	Did the organization receive any payments for indoor tanning services during the year? . . . . .		✓
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .		✓

- 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? 45  Yes  No
- a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) 45a  Yes  No
- 46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 46  Yes  No

**Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 47  Yes  No
- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 48  Yes  No
- 49a Did the organization make any transfers to an exempt non-charitable related organization? 49a  Yes  No
- b If "Yes," was the related organization a section 527 organization? 49b  Yes  No
- 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

f Total number of other employees paid over \$100,000 ▶ \_\_\_\_\_

- 51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ▶ \_\_\_\_\_

- 52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ▶  Yes  No

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

**Sign Here** 12.14.12  
 Signature of officer Date  
 MAMIE ANTOINE WEL, TREASURER  
 Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶	Firm's EIN ▶			
Firm's address ▶	Phone no			

May the IRS discuss this return with the preparer shown above? See instructions ▶  Yes  No

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

**Supplemental Information to Form 990 or 990-EZ**

OMB No 1545-0047

**2011**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization

Employer identification number

Maine Library Association

01-0383486

Line #8 Other revenue - \$2 refund & \$225 returned check

Line #10 Scholarship recipient- \$2000 to Iris Eichenlaub, Rockport Public Library, Rockport, ME

Line #10 Grant recipients: - \$250 Keith Larson, Memorial School, New Gloucester, ME

Line #10 Grant recipients: - \$250 Lia Horton, St Josephs College Library, Windham, ME

Line #10 Grant recipients: - \$250 Jeanne Benedict, Henry D. Moore Library, Steuben, ME

Line #10 Grant recipients: - \$250 Hedy Langdon, Philips Public Library, Philips, ME

Line #16 - \$20 Room Rental

Line #16 - \$175 MLA Presenter

Line #16 - \$679 Lupine Award Expenses

Line #16 - \$500 Kathadin Award Materials

Line #16 - \$185 Stickers for Port City Graphics

Line #16 - \$60 Auction Expenses

Line #16 - \$406 Communications Committee

Line #16 - \$44 Journalism Award expenses

Line #16 - \$49 Outstanding Librarian Expenses

Line #16 - \$1,755 MLA Web Site - Development and maintenance of site

Line #16 - \$99 Legislative Committee Expenses

Line #16 - \$33,030 Conference Expenses - 2 day continuing education conference for 160 participants

Line #16 - \$2,047 ALA Councilor Expenses -Expenses to attend ALA and Midwinter Conferences as MLA's representative

Line #16 - \$5,931 President & Officer Expenses -Travel to National Conferences and to represent the Association

Line #16 - \$107 NELA Representaitve Expenses

Line #16 - \$600 Annual Meeting Expenses

Line #16 - \$546 Miscellaneous

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Cat No. 51056K

Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization <b>Maine Library Association</b>	Employer identification number <b>01-0383486</b>
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**Line #16 - \$3,003 Special Projects - Continuing Education event with National Speaker in Portland, ME**

**Line #16 - \$13 Office Supplies**

**Line #16 - \$501 Insurance**

**Line #16 - \$1,551 CSLP Expenses Statewide Children's Summer Literacy Program**

**Line #16 - Total \$51301.00**

**Line #24 Other Assets - \$11,711 Outstanding scholar loans**

**Line #26 Liabilities - \$478 Funds designated for Interest Group activities, pending payments**

**Line #31 - 1 The Scholarship and Loan programs provides a \$2000 scholarship each year and interest free loans to library school students**

**Line #31 - 2 The YSS Interest Group sponsors and provides materials for the statewide summer reading program to all Maine public libraries.**

**Line # 31 - 3 The Lupine and Kathadin Awards recognize and honor Maine authors each year with appropriate plaques and bookends**

**Line #31 - 4 MLA informs membership about pertinent legislative, intellectual freedom and professional library issues**

**Line #31 - 5 Funds the state representative to the American Library Association Council to give voice to Maine library issues**