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SCANNED MAR A 5 2012

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

		f the Treasury nue Service	► The organization		use a copy of this		•	reporting requ	rements.	- Miles	Open to Ru	blic.
A	For the	2010 calend	lar year, or tax year be		JL 1, 201			UN 30,	2011			. 4 MINGS 18-MIN
В	Check if applicable	C Name o	f organization	<u>.</u>			<u> </u>	D Employe	r identific	cation	number	
	Addre	Main	e Internati	onal Tra	de Cente	r						
L	Name chang	e Doing B	lusiness As					<u> </u>	01-0	<u>509:</u>	<u> 118</u>	
	Initial return Termir ated		and street (or P.O. box Congress St		vered to street addre	ess)	Room/suite	E Telephon			1-7400	
	Ameno	Crty or t	own, state or country,	and ZIP + 4				G Gross receip	its \$		832,7	<u> 192.</u>
	Applic	LOIC		4101				H(a) Is this a	group re	eturn		
	pendir	F Name a	and address of principa	officer Jan:	ne Bisai	llon-C	ary	for affili	ates?		Yes 🖸	No
			as C above					H(b) Are all at	ffiliates inc	luded?	Yes	□No
		empt status)1(c)() •	◀ (insert no.)	4947(a)(1)	or 527	If "No,"	attach a	list (se	ee instructior	าร)
			mitc.com					H(c) Group				
				Trust Ass	ociation Ott	her ►	L Year	of formation: $ {f 1} $.996 N	1 State	of legal domic	ıle: ME
Pa	art 🎼	Summary										
ф	1	Briefly describ	oe the organization's m	ission or most	significant activitie	es. <u>To e</u> :	xpand	Maine's	eço:	nomy	<u> </u>	
Activities & Governance			increased								and	
ern			ox 🕨 📖 if the orga			ons or dispo	sed of more	than 25% of	its net as	sets		4.0
Š			ting members of the go						3			12
જ			dependent voting mem	-					4			11
ties	1		of individuals employe	-	ear 2010 (Part V, I	ine 2a)			5		 	20
Ęį			of volunteers (estimate	• •					6			0
Ac	1		d business revenue fro		• •				7a			0.
	b	Net unrelated	business taxable inco	me from Form 9	990-T, line 34		<u> </u>		7b			0.
								Prior Yea		- (Current Yea	
en			and grants (Part VIII, I	•					825.		725,0 86,7	
Revenue		-	ice revenue (Part VIII, I	O,		-	⊢		006.			329.
æ			come (Part VIII, column				<u> </u>		864.		20,1	
	11	Other revenue	e (Part VIII, column (A)	TES VEGOSC,	9c, juc, and file) A) lun = 40)		1,043,			832,7	
			- add lines 8 throùgñ milar amounts paid (Pa			A), line 12)		1,045,	0.		032,1	0.
	14	Renefite noid	to or for members Pai	41x6~11.117	0 4		 		0.			0.
s		Salaries othe	r compensation, emplo	ovee benefits (F	Part (X) column (A)	lines 5.10\	-	464,			437,4	
JSe.	16a		ومتسور والما	The state of the s	- P	, 11163 5-10)			0.			0.
Expenses	b	Total fundrais	undraising fees (Part.)	column (D) line	25)	53,7	46.	· New York				
ũ	17		es (Part IX, column (A),					466,	813.	Manual Ado	434,7	791.
			es Add lines 13-17 (mu			25)			917.		872,2	
	1		expenses Subtract lin			,			606.		<39,4	
Ses			···			····	Be	ginning of Curr			End of Year	
Net Assets or Fund Balances	20	Total assets (I	Part X, line 16)						779.		297,0	
See See	21	Total liabilities	s (Part X, line 26)						743.		62,4	191.
캺	22	Net assets or	fund balances Subtra	ct line 21 from	line 20			274,	036.		234,6	504.
Ρŧ	art II	Signature	e Block									
Und	ler pena	lties of perjury,	I declare that I have exam	ined this return,	ncluding accompan	yıng schedule	s and statem	ents, and to the	best of m	y knowl	edge and belie	ef, it is
true	, correc	t, and complete	. Declaration of preparer	other than office	r) is based on all info	ormation of wi	hich preparer	has any knowle	edge.			
_			Jone 7									
Sig	n	-	e of difficer	ノ				Date	/			
Her	re		ne Bisaillo	n-eary,	Presiden	<u>t</u>	_	2/2	/12			
		Type or p	print name and title								6910	
		Print/Type pre	parer's name		Preparer's signature	e	П	Date	Check		PTIN	

02/02/12 self-employed Paid Barbara J. McGuan, CPA Barbara J. McGuan, Firm's name Berry Dunn McNeil & Parker, Firm's EIN Firm's address P.O. Box 1100 Use Only Portland, ME 04104-1100 Phone no. (207) 775-2387

May the IRS discuss this return with the preparer shown above? (see instructions)

032001 02-22-11 LHA For Paperwork Reduction Act Notice, see the separate instructions.

X Yes No Form **990** (2010)

See Schedule O for Organization Mission Statement Continuation



4e	Total program :	service expenses	2 - 2
	(Expenses \$	91,131.	including grants of \$
4d	Other program s	ervices. (Describe in	Schedule O)

) (Revenue \$ 21,999.)

359,274.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	ı	Ì	
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to	1		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		-	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	1		
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			37
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			v
	If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11a	х	
L	Part VI	Ha		
ъ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110	_	
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
а	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
•	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		,.	
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			v
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			-
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			l 🕶
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	_17	-	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			х
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		x
^-	complete Schedule G, Part III	202	 -	$\frac{\Lambda}{X}$
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		 -
Ð	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	20b		
	operate one or more hospitals must attach audited financial statements (see instructions)		990	2010)

032003 12-21-10

Form 990 (2010) Maine International Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			17
	Schedule K If "No", go to line 25	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05.		x
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	200		
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			1
	Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			٠,,
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			- V
	If "Yes," complete Schedule N, Part I	31	-	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
22	Schedule N, Part II	32	 	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity?	<u> </u>		
-	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
_	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		ļ	[
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	<u> </u>
		Form	990	(2010)

032004 12-21-10

01-0509118 Form 990 (2010) Maine International Trade Center Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 0 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 1b b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 20 filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3а 3b b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a b If "Yes," enter the name of the foreign country. ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). X a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? **7g** h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. 9a a Did the organization make any taxable distributions under section 4966? 9b **b** Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter 10a a Initiation fees and capital contributions included on Part VIII, line 12 33 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter. a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

b	Gross income from other sources (Do not net amounts due or paid to other sources against			1337	3 8cm 371	Sale &	1
	amounts due or received from them.)	11b	<u> </u>			* '	-
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a			_
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				N	t
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			**	اللا تستاع أرب	٥	
a	Is the organization licensed to issue qualified health plans in more than one state?			13a			_
	Note. See the instructions for additional information the organization must report on Schedule O					1. M.	1
b	Enter the amount of reserves the organization is required to maintain by the states in which the					12 Type	-
	organization is licensed to issue qualified health plans	13b		100	- , ^	, ,,,,	
C	Enter the amount of reserves on hand	13c			ş.s	,, ·	-
14a	Did the organization receive any payments for indoor tanning services during the tax year?		-	14a		X	_
						1	

Form 990 (2010) Maine International Trade Center 01-0509118 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response to any question in this Part VI		_	X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1a	12		
b	Enter the number of voting members included in line 1a, above, who are independent 1b	11		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6	Х	
	Does the organization have members of stockholders, or other persons who may elect one or more members of the		 	
1 a	· · · · · · · · · · · · · · · · · · ·	7a	x	İ
L.	governing body?	—	 ^ -	Х
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	13.20	21
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following	- Table		
	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			1
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,		ļ	
	and branches to ensure their operations are consistent with those of the organization?	10b	<u> </u>	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	<u> </u>	X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			*
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by independent	43300		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	ZIME PRINT.	X
	Other officers or key employees of the organization	15b		Х
-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		200	YEWE
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
L	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	30/40006-022	1500	
D				
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	465		
500	exempt status with respect to such arrangements?	16b	<u> </u>	i
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►ME			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available.	ilable for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest pol	icy, and fin	ancial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the org	anization	-	
	Patty Davis - (207)541-7400			
	511 Congress Street, Portland, ME 04101-3428			
		Form	1 990	(2010)

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

Check if Schedule O contains a response to any question in this Part VII

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

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

 List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees; officers; key employees, highest compensated employees; and former such persons

(A)	(B)	Ľ		((C)	•		(D)	(E)	(F)
Name and Title	Average			Pos		1		Reportable	Reportable	Estimated
	hours per	(cl	heck	all	that	app	ly)	compensation	compensation	amount of
	week	ig:				}		from	from related	other
	(describe hours for	를	١.,			ted		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	stee	ruste			Sensa	ļ	(W-2/1099-MISC)	(** 27 1033 141100)	organization
	organizations	nal tru	la la		ploye	ee ee	ŀ			and related
	in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
Janine Bisaillon-Cary	0,		\vdash	\vdash			H			
President	40.00	Х		Х				0.	83,395.	28,719.
William DeWitt, III						T			·	
Director	1.00	Х			ł			0.	0.	0.
John W. Gulliver, Esq.				Γ						
Secretary	1.00	Х		Х				0.	0.	0.
Joseph Mooney										
Treasurer	1.00	Х		Х		<u>.</u>		0.	0.	0.
Aaron Moser										
Director	1.00	Х						0.	0.	0.
Christopher Paradis										
Chair	1.00	X	L.	X				0.	0.	0.
Brian Perkins										
Director	1.00	X			L.		<u> </u>	0.	0.	0.
Kathleen Robinson	1 00									
Director	1.00	X	_	_	L	ļ	<u> </u>	0.	0.	0.
Laurenz Schmidt	1 00	,,			l					
Director John Wolanski	1.00	X	_		<u> </u>	-		0.	0.	0.
Vice Chair	1 00	v		x				0.	0.	_
Kathy Billings	1.00	_	<u> </u>	_	⊢	┢	⊢	0.	- 0.	0.
Director	1.00	х						0.	0.	0.
Timothy Harper	1.00	Α	┢		⊢	\vdash	┢	0.	0.	•
Director	1.00	x						0.	0.	0.
Wade Merritt		-	\vdash		\vdash	╁	┢		<u>~</u>	-
Vice President	40.00			x				69,941.	0.	9,042.
	1 2000	-	 		\vdash	\vdash	\vdash	03/3111		3,0120
				一	\vdash	┢	Τ			
		-	-	\vdash		\vdash	\vdash			
									_	

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Part VII Section A. Officers, Directors, Tr		nplo	yee			High	est				
(A)	(B)			(0	•			(D)	(E)		(F)
Name and title	Average hours per	101		Posi		app	LΛ	Reportable	Reportable	1	stimated
•	week (describe hours for	H		an				compensation from the organization	compensation from related organizations (W-2/1099-MIS	соп	mount of other npensation from the
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		ar	ganization nd related panizations
	0)	=	<u> </u>	0	ž	Ξ.	Œ				
											<u> </u>
		-									_
					-	-					
1b Sub-total				i				69,941.	83,39	95. 3	37,761.
c Total from continuation sheets to Part \ d Total (add lines 1b and 1c)	/II, Section A					>		0. 69,941.	83,39	0. 95. 3	0. 37,761.
Total number of individuals (including but compensation from the organization	not limited to ti	nose	liste	ed a	bov	e) w	ho r	eceived more than \$100	0,000 in reportabl	e	0 Yes No
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for			e, ke	y en	nplo	yee,	or I	nighest compensated e	mployee on	3	X
4 For any individual listed on line 1a, is the s and related organizations greater than \$15									the organization	149°6	X
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," con Section B. Independent Contractors	•					•	relat	ted organization or indiv	ridual for services	5	X
Complete this table for your five highest c the organization NONE	ompensated in	dep	ende	ent c	cont	racte	ors 1	that received more than	\$100,000 of con	npensation	from
(A) Name and busines	s address							(B) Description of	services		(C) ensation
						<u> </u>					
	· · · · · · · · · · · · · · · · · · ·		-							of the second	Marie Sure .
2 Total number of independent contractors \$100,000 in compensation from the organ	-	not l	mıte	d to		ose li O	ste	d above) who received i	nore than		
ψτουρού πι compensation from the organ	nzauon 🚩					<u> </u>				Form	n 990 (2010)

	•	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran	ts, and	86,700. 584,689. 53,683.				۵,
ontrik od ot	g	similar amounts not included abo Noncash contributions included in lines		33,003.				
ğ ğ	h	Total. Add lines 1a-1f		<u> </u>	725,072.			
Program Service Revenue	2 a b		es	Business Code 900099	86,731.	86,731.		
m S	C							
gra Re	d e	····						
g.	f	All other program service reve	enue				-	
\perp	g	Total. Add lines 2a-2f		<u> </u>	86,731.			
	3	Investment income (including other similar amounts)	·	•	829.			829.
	4 5	Income from investment of tax Royalties	x-exempt bona p	oroceeas -				<u> </u>
	·	rioyanios	(ı) Real	(II) Personal				
	6 a b	Gross Rents Less. rental expenses	20,160.					
		Rental income or (loss)	20,160.					
		Net rental income or (loss)			20,160.			20,160.
		Gross amount from sales of assets other than inventory	(i) Securities	(II) Other				r.
		Less. cost or other basis and sales expenses Gain or (loss)				٧		- 20 5
		Net gain or (loss)	L	<u> </u>				
enne			g events (not			. ^ .		
Other Revenu		contributions reported on line Part IV, line 18	a			."		in this co
ŏ		Less: direct expenses Net income or (loss) from fund	b draising events			, ,		
		Gross income from gaming ac Part IV, line 19	_		,		·	
		Less direct expenses	b					
		Net income or (loss) from gam	-	<u> </u>				
	10 a	Gross sales of inventory, less and allowances						
	h	Less cost of goods sold	a b					*, ` ' '
		Net income or (loss) from sale						
Ī		Miscellaneous Revenu		Business Code				
	11 a							
	b							
	C							
	d	All other revenue Total. Add lines 11a-11d				and the second		· .
	12	Total revenue. See instructions.			832,792.	86,731.	0.	20,989.
03200 12-21					,	,/		Form 990 (2010)

Part IX Statement of Functional Expenses

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

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and			* /	
	organizations in the U.S. See Part IV, line 21	·			•
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22			1 1 1	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.		ĺ		
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	50 000		TO 000	
	trustees, and key employees	78,983.		78,983.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		i		
	persons described in section 4958(c)(3)(B)		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
7	Other salaries and wages	274,495.	104,350.	126,714.	43,431
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	14,677.	4,333.	8,541.	1,803 4,937
9	Other employee benefits	40,178.	11,861.	23,380.	4,937
10	Payroll taxes	29,100.	8,591.	16,934.	3,575
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	6,075.		6,075.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	4,426.	4,426.		<u> </u>
13	Office expenses	159,641.	116,753.	42,888.	•
14	Information technology	·		· · · · · · · · · · · · · · · · · · ·	
15	Royalties				
16	Occupancy	100,526.		100,526.	
17	Travel	32,476.		32,476.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,850.	2,850.		
20	Interest	2,0301	2,0300		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,301.	·	8,301.	
23	Insurance	3,620.		3,620.	
23	Other expenses. Itemize expenses not covered	3,020*	**	3,020 ·	. 4 " Was " " " " " " " " " " " " " " " " " " "
24	above. (List miscellaneous expenses in line 24f. If line		'		
	24f amount exceeds 10% of line 25, column (A)			Land Con the	a things
	amount, list line 24f expenses on Schedule 0.) Trade Mission & Educati	103,839.	103,839.	√ 33/33/2 < 33 · fet	7.5% Are x 1
а	Miscellaneous	13,037.	2,271.	10,766.	
b	MIRCELIAIIEOUS	13,037.	4,411.	10,700.	
C					
ď					
е	 				
f	All other expenses			450 004	F2 F46
<u>25</u>	Total functional expenses. Add lines 1 through 24f	872,224.	359,274.	459,204.	53,746
26	Joint costs. Check here ▶ ☐ If following SOP		i		
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a				
	combined educational campaign and fundraising solicitation			l	

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Pai	rt X	Balance Sheet					0303110 Tage 11
		•			(A) Beginning of year		(B) End of year
	_1	Cash - non-interest-bearing			153,542.	1	17,564.
	2	Savings and temporary cash investments			112,698.	2	239,580.
	3	Pledges and grants receivable, net			50,000.	3	
	4	Accounts receivable, net		[6,613.	4	6,447.
	5	Receivables from current and former officers, di	rectors	, trustees, key	Ţ		1.1
		employees, and highest compensated employee	es Co	mplete Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as	define	d under section			
		4958(f)(1)), persons described in section 4958(c					
		employers and sponsoring organizations of sect	ion 50	1(c)(9) voluntary			
ω		employees' beneficiary organizations (see instru	ctions	_	···	6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			15,267.	9	11,899.
	10a	Land, buildings, and equipment, cost or other					,
		basis. Complete Part VI of Schedule D	10a	277,537.			
	ь	Less. accumulated depreciation	10b	255,932.	8,659.	10c	21,605.
	11	Investments - publicly traded securities		į		11	
	12	Investments - other securities. See Part IV, line	11			12	
	13	Investments - program-related See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equ	al line	34)	346,779.	16	297,095. 23,315.
	17	Accounts payable and accrued expenses		39,787.	17	23,315.	
	18	Grants payable				18	
	19	Deferred revenue	-		32,956.	19	39,176.
	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, director		· · · ·		l	-
효		highest compensated employees, and disqualif	ed per	sons. Complete Part II	·		
_		of Schedule L		}		22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities. Complete Part X of Schedule D		ļ	70 742	25	60.401
	26	Total liabilities. Add lines 17 through 25		137	72,743.	26	62,491.
		Organizations that follow SFAS 117, check he	ere 🕨	and complete	2 × 2 × 1 ×		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Ses	l	lines 27 through 29, and lines 33 and 34.			174 026	<u> </u>	200 604
lan	27	Unrestricted net assets		}	174,036.	27	209,604. 25,000.
Ва	28	Temporarily restricted net assets			100,000.	28	25,000.
פַּר	29	Permanently restricted net assets		. — .	22 3 8 8 8 8 2 3 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4	29	No. 20, 2867 475 48 5 19 Aud 4
Ę		Organizations that do not follow SFAS 117, c	heck r	ere 🕨 📖 and		150 m	
S		complete lines 30 through 34.			· · · · · · · · · · · · · · · · · · ·		
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or ed		3		31	
Net	32	Retained earnings, endowment, accumulated in	come,	or other funds	271 N26	32	224 604
	33	Total net assets or fund balances			274,036.	33	234,604.
	_34	Total liabilities and net assets/fund balances			346,779.	34	297,095.

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Open to Public Inspection

Employer identification number

			International						01	L-0509118
Part I	Reason	for Public Cha	arity Status (All organiz	ations mu	st comple	te this par	t) See inst	ructions.		
	A church, co A school des A hospital or A medical res city, and stat	a private foundation invention of church cribed in section of a cooperative hos search organization e	n because it is (For lines alones, or association of churing 170(b)(1)(A)(ii). (Attach Sopital service organization on operated in conjunction be benefit of a college or un	I through ches desc hedule E) described with a hos	11, check ribed in se in section pital desc	only one bection 170 170(b)(1) ribed in se	oox.) (b)(1)(A)(i) (A)(iii). ection 170	(b)(1)(A)(ii	•	
6	A federal, sta An organizati section 170(ite, or local govern on that normally re b)(1)(A)(vi). (Comp	ment or governmental unreceives a substantial part	of its supp	ort from a	governme		r from the	general p	oublic described in
9 🔲	An organizate activities relations and uncome and uncome and uncome and an organizate	on that normally re ted to its exempt f unrelated business 509(a)(2). (Completon organized and	eceives (1) more than 33 functions - subject to certal taxable income (less sectore Part III) operated exclusively to te	1/3% of its ain excepti tion 511 ta st for publ	s support tons, and (ax) from but to safety	rom contr 2) no more isinesses See secti o	e than 33 1 acquired b on 509(a)(4	/3% of its y the orga	s support anization a	from gross investment after June 30, 1975
e f g	more publicly describes the a Type By checking foundation m If the organiz supporting o Since Augus (i) A perso the gove (ii) A family (iii) A 35% o	v supported organice type of supporting the type of supporting this box, I certify the transpers and other extremely a warganization, check to 17, 2006, has the many body of the transpers of a persecontrolled entity of	hat the organization is not r than one or more publich ritten determination from t	on 509(a)(ete lines 1 controlled y supporte the IRS the ny gift or c lone or tog	1) or section of the through t	on 509(a)(a) in 11h. ctionally in or indirectly ations des ripe I, Type in from any	2). See sec tegrated y by one or cribed in s e II, or Type r of the follo	r more dis ection 509 etlil	d Qualified per sons?	Type III - Other persons other than
	e of supported panization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	(iv) Is the o in col. (i) In governing		organiza	u notify the tion in col. r support?	(vi) Is organizati (i) organiz U.S	on in col.	(vii) Amount of support
			(see instructions))	Yes	No	Yes	No	Yes	No	
						/ y · \ \		÷ ,		

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Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2010 Maine International Trade Center 01-05091 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support				·		·
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and	` , ,	` .	, ,	· · ·		
	membership fees received (Do not						
	include any "unusual grants ")	776,270.	787,128.	735,552.	836,825.	725,072.	3,860,847.
2	Tax revenues levied for the organ-		-				
	ization's benefit and either paid to				1		
	or expended on its behalf						
3	The value of services or facilities			-			
	fumished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	776,270.	787,128.	735,552.	836,825.	725,072.	3,860,847.
5	The portion of total contributions		-				
	by each person (other than a					;	
	governmental unit or publicly			•			
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4						3,860,847.
Se	ction B. Total Support					.,	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	776,270.	787,128.	735,552.	836,825.	725,072.	3,860,847.
8	Gross income from interest,						_
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	30,072.	28,372.	26,579.	23,870.	20,989.	129,882.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10				l		3,990,729.
12	Gross receipts from related activities,	etc (see instructi	ons)			12	738,148.
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectic	n 501(c)(3)	
Se	organization, check this box and stor	here ic Support Pe	rcentage			 	<u>▶</u> □
	Public support percentage for 2010 (column (fl)		14	96.75 %
	Public support percentage from 2009	• • •	•			15	96.53 %
	33 1/3% support test - 2010.If the o			n line 13, and line	14 is 33 1/3% or m	· · · · · · · · · · · · · · · · · · ·	
	stop here. The organization qualifies	•		· ·		•	$\triangleright X$
t	33 1/3% support test - 2009.If the o	. ,	· ·		line 15 is 33 1/3%	or more, check th	
	and stop here. The organization qual					,,	▶□
17a	10% -facts-and-circumstances tes		• • •		e 13. 16a. or 16b. a	and line 14 is 10%	or more.
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			-	•		▶□
ŀ	10% -facts-and-circumstances tes	•			•	7a, and line 15 is	10% or
_	more, and if the organization meets the	· ·					
	organization meets the "facts-and-cire				•		
18	Private foundation. If the organization		•	•			s 🕨
				, ,		edule A (Form 990	

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

0	tion A Dublic Company	elow, please comp	nete rait II)					
	etion A. Public Support		0.005-		4,,,,,,,,		-1.0010	/0 × · ·
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	 	e) 2010	(f) Total
1	Gifts, grants, contributions, and					l		
	membership fees received (Do not include any "unusual grants")				1			
2	·					 -		
2	Gross receipts from admissions, merchandise sold or services per-							
	formed, or facilities furnished in							
	any activity that is related to the							
3	organization's tax-exempt purpose Gross receipts from activities that	 		 	 	\vdash		
3	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
•	ization's benefit and either paid to							
	or expended on its behalf			[
5	The value of services or facilities				 		•	
-	furnished by a governmental unit to							1
	the organization without charge							1
6	Total. Add lines 1 through 5							
	Amounts included on lines 1, 2, and				1			
	3 received from disqualified persons					1		<u> </u>
b	Amounts included on lines 2 and 3 received							
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the							
	amount on line 13 for the year	,						
c	Add lines 7a and 7b							
	Public support (Subtract line 7c from line 6)	alternation and the same of th	San Barrell	報告が必要	Markada 18	274		
	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	<u> </u>	(e) 2010	(f) Total
	Amounts from line 6					1		
10a	Gross income from interest, dividends, payments received on				ļ	1		ŀ
	securities loans, rents, royalties					1		
	and income from similar sources					-		
b	Unrelated business taxable income				İ	ŀ		İ
	(less section 511 taxes) from businesses acquired after June 30, 1975			}				
					 	₩		
	Add lines 10a and 10b Net income from unrelated business	<u> </u>			}	 		
••	activities not included in line 10b,				•			ļ
	whether or not the business is				Ì	1		
19	regularly carried on Other income. Do not include gain	<u> </u>		 	 	+		
12	or loss from the sale of capital							
12	assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12)		· · · · · · · · · · · · · · · · · · ·	 		+		
	•	r the organization's	E first soood +5::	rd fourth or fifth	lay year on a cost	1 on 50:	1/c)/3\ organ:	Zation
14	First five years. If the Form 990 is for check this box and stop here	i tile organization s	s iirst, s e cona, thii	ia, iourui, or illth t	lax year as a section	JII 3U	ricioj organi	±atiOH, ▶ [
Sec	ction C. Computation of Publ	ic Support Pe	rcentage	···				
	Public support percentage for 2010 (column (fl)		15		
	Public support percentage from 2009		•	COMMITTE (1))		16		
	ction D. Computation of Inve					1.0	l	
	Investment income percentage for 20		·····			17		
	Investment income percentage from	· ·	•	10 10, Column (1))		18		
	33 1/3% support tests - 2010. If the			on line 14, and lin	e 15 is more than		3%, and line	
.50	more than 33 1/3%, check this box a	•						▶ □
h	33 1/3% support tests - 2009. If the				-			and
_	line 18 is not more than 33 1/3%, che	_						
20	Private foundation. If the organization		-				_	
	23 12-21-10	3.4 0110011 4		, cc., cc.	,			90 or 990-EZ) 20
				15	30.		,	, 20

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047 Inspection

Name of the organization

Employer identification number Maine International Trade Center

01-0509118 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds _ Yes ∟ No are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure 2d listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 No Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) __ Yes and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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Schedule D (Form 990) 2010

Schedule D (Form 990) 2010

Part VII	Investments - Other Securities. Set	e Form 990, Part X, II	ne 12		
((a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of valuatest or end-of-year mark	
(1) Financ	al derivatives				
(2) Closely	y-held equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)				<u> </u>	
(E)					
(F)					
(G)		··· ·			
(H)					
(I)					
	(b) must equal Form 990, Part X, col (B) line 12.)				
Part VII	II Investments - Program Related. Se	ee Form 990, Part X,	line 13	(-)) (-) -	·
	(a) Description of investment type	(b) Book value	Co	(c) Method of valua st or end-of-year mark	
(1)					
(2)					
(3)				<u></u>	
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)	(b) must equal Form 990, Part X, col (B) line 13.) ▶				
	Other Assets. See Form 990, Part X, line	 15			<u>.</u> .
1 4.1	•	Description			(b) Book value
(1)		· · · · · · · · · · · · · · · · · · ·			
(2)	·				
(3)				_	
(4)					
(5)					<u> </u>
(6)					
(7)					
(8)					
(9)					
(10)					
	lumn (b) must equal Form 990, Part X, col (B) line			> _	
Part X	Other Liabilities. See Form 990, Part X,	line 25.		.	
1.	(a) Description of liability		(b) Amount		
	ederal income taxes				
(2)			<u> </u>		
(3)					
(4)			<u> </u>	-	\
(5)				-	s.
(6)		· ·	<u> </u>	}	
(7)				-	
(8)				1	
(9)		-		1	
(10)				1	•
(11) T-1-1 (Ca	hann (h) much agual Forms 000. Don't V and (D) I a	- 05 \		4	
FIN 48 (lumn (b) must equal Form 990, Part X, col (B) line	e ∠O / o the organization s tinancia	statements that reports the organ	I lization's liability for uncerta	in tax positions under

032053

Schedule D (Form 990) 2010

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990. ➤ See separate instructions.

Inspection

Name of the organization

Employer identification number

<u> Maine Internati</u>				01-050911	
Part I General Info	rmation on A	ctivities Out	side the United States. Compl	ete if the organization answered "Y	'es"
to Form 990, Par	t IV, line 14b				
 For grantmakers. Does 	the organization	n maintain record	ds to substantiate the amount of the g	rants or assistance, the	
grantees' eligibility for th	ne grants or assis	stance, and the	selection criteria used to award the gra	ants or assistance?	Yes L No
2 For grantmakers. Desc	ribe in Part V the	organization's p	procedures for monitoring the use of g	rant funds outside the United State	es
			an be duplicated if additional space is i	***	
(a) Region	(b) Number of offices	emplovees.	(d) Activities conducted in region (by type) (e.g., fundraising, program	(e) If activity listed in (d) is a program service,	(f) Total expenditures
	in the region	agents, and	services, investments, grants to	describe specific type	for and
		independent contractors	recipients located in the region)	of service(s) in region	investments in region
		ın region	,		- ITTEGIOTI
	•				
East Asia and the				1	
Pacific	0	0	Program Services	Trade Missions	24,389.
	 		riogram bervices	Tidde Mibbienb	21,303.
Europe (Including				Trade missions & Trade	
Iceland & Greenland)	0	0	Program Services	Shows	28,675.
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2 o Cub total	0	0			53,064.
3 a Sub-total	 			\.*·	33,004.
b Total from continuation sheets to Part I	۱ ,	0			0.
c Totals (add lines 3a		 		3.50	
c rotais (add lines sa		{		The state of the s	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2010

Page 2	any .	(i) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2010
	990, Part IV, line 15, for a	(h) Description of non-cash assistance						Schedu
09118	l "Yes" to Form 9	(g) Amount of non-cash assistance					xempt by	
01-0509118	ganization answered	(f) Manner of cash disbursement					recognized as tax-e	
	omplete if the org than \$5,000	(e) Amount of cash grant					foreign country,	
1 Trade Center	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed.	(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	
Maine International	Grants and Other Assistance to Organizations or Entities Outsi recipient who received more than \$5,000. Check this box if no one Part II can be duplicated if additional space is needed.	(c) Region					s listed above that are re I has provided a section	r entities
Maine	Grants and Other Assistance to Organizations or Er recipient who received more than \$5,000. Check this b Part II can be duplicated if additional space is needed.	(b) IRS code section and EIN (if applicable)					recipient organization he grantee or counse	other organizations or
Schedule F (Form 990) 2010	Part Grants and Other recipient who recipient who recipient who recipient who are the dual can be dual.	1 (a) Name of organization					ł	3 Enter total number of other organizations or entities

01-0509118

Page 3

Maine International Trade Center

Schedule F (Form 990) 2010 Maine International Trade Center 01–0509118

Partill Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2010
(g) Description of non-cash assistance					Schedu
(f) Amount of non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant			-		
c) Number of recipients					
(b) Region					
(a) Type of grant or assistance (b) Region					

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2010

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Maine International Trade Center

Employer identification number 01-0509118

Form 990, Part I, Line 1, Description of Organization Mission:
related activities.
Form 990, Part III, Line 4d, Other Program Services:
Technical Assistance & Trade Counseling:
The Trade Center assists its members in researching new markets;
reviewing trade regulations, tariffs and logistics, and in product
sourcing. The Trade Center's staff is committed to providing quality
information and practical advice in selecting markets for our members'
products and services. There are a number of resources we have
available to the public in our Portland Trade Library, and on our
website where trade news and current export data is listed. We have
extensive internet research capabilities and on-line database services
along with internet reference guides that provide our members with
timely information on foreign markets.
Expenses \$ 91,131. including grants of \$ 0. Revenue \$ 21,999.
Form 990, Part VI, Section A, line 6: The Board of Directors shall
consist of twelve directors - seven directors elected from the membership,
and five directors appointed by the Governor.
Form 990, Part VI, Section A, line 7a: Members qualified to vote shall
elect seven directors from among the members.
Form 990, Part VI, Section B, line 11: The Form 990 is reviewed by the
Accounting Manager against the current audited financial statements, and
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2010) 2 8
7 X

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

· 2010 OpenitoRublica Inspection OMB No 1545-0047

Name of the organization

Maine International Trade Center

Employer identification number 01-0509118

Direct controlling

entity

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets Total income Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity Pencil

(g) Section 512(b)(13) ŝ × controlled entity? Yes Direct controlling entity status (if section Public charity 501(c)(3)) **3overnment** Exempt Code section ਉ Legal domicile (state or foreign country) Maine Primary activity <u>a</u> Name, address, and EIN of related organization State House Station 04333 State of Maine Augusta, ME

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

032161 12-21-10 LHA

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Schedule R (Form 990) 2010

01-0509118 Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Maine International Trade Center Schedule R (Form 990) 2010

Page 2

Percentage ownership General or Percentage managing ownership Schedule R (Form 990) 2010 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) 3 Ξ Yes 3 Share of end-of-year assets Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of total income Disproportionate allocations? Yes No Ξ Type of entity (C corp, S corp, or trust) Share of end-of-year assets <u>e</u> Direct controlling entity Share of total income ਉ Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) છ <u>e</u> Primary activity Direct controlling entity 9 Ē (c)
Legal
domicile
(state or
foreign Primary activity <u>a</u> Name, address, and EIN of related organization Name, address, and EIN of related organization <u>a</u> 032162 12-21-10

Schedule R (Form 990) 2010 Maine International Trade Center

Note. Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule				Yes	ž
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	is with one or more re	lated organizations listed	in Parts II:1V?	· · · · · · · · · · · · · · · · · · ·	1
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		•		19	×
				9	×
				Ç	×
				<u> </u>	; }
d Loans or loan guarantees to or for other organization(s)				P	4
 Loans or loan guarantees by other organization(s) 					
					A. 16.
f Sale of assets to other organization(s)				*	×
g Purchase of assets from other organization(s)				19	×
				‡	×
i Lease of facilities, equipment, or other assets to other organization(s)				i =	×
J Lease of facilities, equipment, or other assets from other organization(s)				į.	×
k Performance of services or membership or fundraising solicitations for other organization(s)	ızatıon(s)			¥	×
1 Performance of services or membership or fundraising solicitations by other organization(s)	ization(s)			=	×
m Sharing of facilities, equipment, mailing lists, or other assets				1m	×
n Sharing of paid employees				th X	_
 Reimbursement paid to other organization for expenses 				10	×
p Reimbursement paid by other organization for expenses				1p	×
q Other transfer of cash or property to other organization(s)				10	×
 Other transfer of cash or property from other organization(s) 				11	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	is line, including covered	relationships and transaction thresholds		
(a)	9	(2)	(p)		
Name of other organization	Transaction type (a-r)	Amount involved	Method of determining amount involved		
Ctate of Maine	Þ	ALL CLL	TWA.		
3	4	1 1 1 1 1 1			
(2)					
(3)					
(4)					
7.7					
(5)					
(9)					
032163 12-21-10	32		Schedule	Schedule R (Form 990) 2010) 2010

Page 4

Schedule R (Form 990) 2010 Maine International Trade Center

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.) Pent W Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	ile	(d) Are all partners section 501(c)(3) organizations?	(e) Share of end-of- year assets	(f) Disproportionate allocations?	(g) Code V·UBI amount in box 20 of Schedule K·1	(h) General or managing partner?	al or ging
		country)	Yes No		Yes No	(Form 1065)	Yes	2
					-		1	
								_
					-			
						Schedule R (Form 990) 2010	m 990)	2010

Schedule R	(Form 990) 2010	Maine	International	Trade	Center	01-0509118 Page 5
Part VII	(Form 990) 2010 Supplemental Info	ormation		-		
	Complete this part to be	rovide addition:	al information for responses	to questions	s on Schedule R (see instru	ictions).
	,	TOTAL AGAINST	ar morniadori for responses	to question	3 OH 001100 11 (000 11110	
						
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Form **8868** (Rev. January 2011) Department of the Treasury

Internal Revenue Service

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No. 1545-1709

 $\triangleright X$

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on 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 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits 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 Type or Name of exempt organization **Employer identification number** print 01-0509118 Maine International Trade Center File by the Number, street, and room or suite no. If a P O. box, see instructions due date for filing your 511 Congress Street return See City, town or post office, state, and ZIP code For a foreign address, see instructions. instructions Portland, ME 04101 0 1 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Code Is For Code Form 990 Form 990-T (corporation) 07 01 Form 990-BL Form 1041-A 80 Form 990-EZ Form 4720 09 0.3 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 Patty Davis • The books are in the care of ▶ 511 Congress Street - Portland, ME 04101-3428 Telephone No \blacktriangleright (207)54 $\overline{1-7400}$ 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 . 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 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until February 15, 2012 , to file the exempt organization return for the organization named above. The extension is for the organization's return for calendar year ► X tax year beginning JUL 1, 2010 , and ending JUN 30, 2011 __ Initial return If the tax year entered in line 1 is for less than 12 months, check reason. Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions. За If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. 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. Form 8868 (Rev. 1-2011) For Paperwork Reduction Act Notice, see Instructions.

023841 01-03-11