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Form **990-EZ**

**Short Form
Return of Organization Exempt From Income Tax**

OMB No 1545-1150

2010

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

A For the 2010 calendar year, or tax year beginning 7/01, **2010, and ending** 6/30, **2011**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Application pending	C MAINE WOMEN'S NETWORK 1719 HEALD HWY., STE B UNION, ME 04862	D Employer identification number 20-0263064
		E Telephone number 207-785-3044
		F Group Exemption Number
		(blank)

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

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

I Website: ▶ WWW.MAINEWOMENSNETWORK.COM

J Tax-exempt status (ck only one) — 501(c)(3) 501(c) (6) (insert no.) 4947(a)(1) or 527

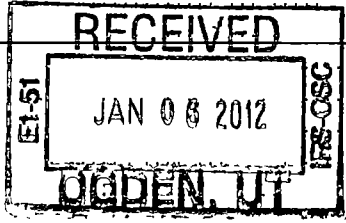
K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, 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 ▶ \$ 32,283.

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

REVENUE	1	Contributions, gifts, grants, and similar amounts received	1	1,637.
	2	Program service revenue including government fees and contracts	2	20,899.
	3	Membership dues and assessments	3	9,035.
	4	Investment income	4	19.
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	6a	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
6b	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)	6b	363.	
		6c	224.	
		6d	139.	
7a	Gross sales of inventory, less returns and allowances	7a	330.	
7b	Less: cost of goods sold	7b		
7c	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	330.	
8	Other revenue (describe in Schedule O)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	32,059.	
EXPENSES	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	3,675.
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe in Schedule O)	16	20,603.
17	Total expenses. Add lines 10 through 16	17	24,278.	
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	7,781.	
ASSETS	19	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)	19	14,265.
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	22,046.



SEE SCHEDULE O

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2010)

SCANNED JAN 13 2012

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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

X

Table with 3 columns: Question, Yes, No. Rows include 33-41 with various questions about IRS reporting, business activities, and tax returns.

42a The organization's books are in care of TAMMY SWASEY-BALLOU Telephone no. 207-691-4907 Located at 18 GOULD ST CAMDEN ME ZIP + 4 04843

42b 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... Yes No X

42c At any time during the calendar year, did the organization maintain an office outside of the U.S.? See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts. Yes No X

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

Table with 3 columns: Question, Yes, No. Rows include 44a-44d with questions about donor advised funds, hospital facilities, and tanning services.

		Yes	No
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?		X
45 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 inst.)		X
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		X

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

		Yes	No
47	Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		
49 a	Did the organization make any transfers to an exempt non-charitable related organization?		
49 b	If 'Yes,' was the related organization a section 527 organization?		

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 and 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
 Signature of officer: J. Swasey Ballou Date: 12/31/11
 Type or print name and title: Tamara Swasey Ballou Treasurer

Paid Preparer Use Only
 Print/Type preparer's name: ERICA JH MORTON Preparer's signature: Erica JH Morton, CPA Date: 12/29/11
 Firm's name: ERICA HARRIMAN CPA, LLC Check if self-employed PTIN: N/A
 Firm's address: 1719 HEALD HWY., SUITE B UNION, ME 04862 Firm's EIN: N/A
 Phone no: (207) 785-3044

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

2010

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

MAINE WOMEN'S NETWORK

Employer identification number

20-0263064

FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

IMPROVE THE STATUS OF ALL WOMEN THROUGH A NETWORKED FORUM FOCUSING ON PROFESSIONAL
GROWTH.

FORM 990-EZ, PART III, LINE 28 - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

MAINE WOMEN'S NETWORK PROVIDES OPPORTUNITIES TO IMPROVE THE STATUS OF ALL WOMEN
THROUGH NETWORKING FORUMS FOCUSING ON PROFESSIONAL GROWTH THROUGH COLLABORATIVE
LEADERSHIP, NETWORKING SUPPORT, EDUCATION, AND MEANINGFUL COMMUNITY INVOLVEMENT.

FORM 990-EZ, PART V, LINE 34 - CHANGES TO ORGANIZING OR GOVERNING DOCUMENTS

THE ORGANIZATION HAS RESCINDED ITS 501(C) (3) STATUS AND HAS APPLIED FOR A
501(C) (6) EXEMPTION.

MAINE WOMEN'S NETWORK

20-0263064

FORM 990-EZ, PART I, LINE 16
OTHER EXPENSES

BANK CHARGES	\$	217.
INSURANCE		1,268.
LICENSES & STATE FEES		55.
MEETING EXPENSE		16,238.
MISCELLANEOUS		131.
SUPPLIES		711.
WEBSITE		1,983.
TOTAL	\$	<u>20,603.</u>

FORM 990-EZ, PART II, LINE 24
OTHER ASSETS

	<u>BEGINNING</u>	<u>ENDING</u>
PREPAID EXPENSES AND DEFERRED CHARGES .	\$ 0.	\$ 270.
TOTAL	<u>\$ 0.</u>	<u>\$ 270.</u>

FORM 990-EZ, PART II, LINE 26
TOTAL LIABILITIES

	<u>BEGINNING</u>	<u>ENDING</u>
DUE TO/FROM CHAPTERS	\$ 184.	\$ 470.
TOTAL	<u>\$ 184.</u>	<u>\$ 470.</u>

FORM 990-EZ, PART IV
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED</u>	<u>COMPEN- SATION</u>	<u>CONTRI- BUTION TO EBP & DC</u>	<u>EXPENSE ACCOUNT/ OTHER</u>
CAROLYN HOLMAN 26 DIRIGO ST PORTLAND, ME 04102	DIRECTOR 1	\$ 0.	\$ 0.	\$ 0.
JISEL LOPEZ 307 LINCON ST. SO. PORTLAND, ME 04106	DIRECTOR 1	0.	0.	0.
ERICA J H MORTON 336 MILLER ROAD UNION, ME 04862	DIRECTOR 1	0.	0.	0.
DARLENE ALENDER-GINSBERG 141 JED MARTIN ROAD RUMFORD, ME 04276	DIRECTOR 1	0.	0.	0.

MAINE WOMEN'S NETWORK

20-0263064

FORM 990-EZ, PART IV (CONTINUED)
 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
TAMMY SWASEY-BALLOU 18 GOULD ST CAMDEN, ME 04843	TREASURER 2	\$ 0.	\$ 0.	\$ 0.
BARBARA MORAN 57 OLIVER ST ROCKLAND, ME 04841	SECRETARY 2	0.	0.	0.
JENNIFER HOGAN 144 PINE ST. LEWISTON, ME 04240	PRESIDENT 2	0.	0.	0.
LUANNE CAMERON 25 ANDREWS AVE FALMOUTH, ME 04105	DIRECTOR 1	0.	0.	0.
VICKI WORDEN 36 TAMARACK TRAIL CAMDEN, ME 04843	VICE PRESIDENT 2	0.	0.	0.
SUSAN JOYAL 96 OCEAN STREET UNIT 10 SO. PORTLAND, ME 04106	DIRECTOR 2	0.	0.	0.
JANE DAGLEY 96 CHESTNUT ST CAMDEN, ME 04843	DIRECTOR 2	0.	0.	0.
FREDERICKA COLLINS PO BOX 531 AUBURN, ME 04212	DIRECTOR 2	0.	0.	0.
TOTAL		\$ 0.	\$ 0.	\$ 0.

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- 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*.

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

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

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

Type or print <small>File by the due date for filing your return. See instructions.</small>	Name of exempt organization MAINE WOMEN'S NETWORK	Employer identification number 20-0263064
	Number, street, and room or suite number. If a P O box, see instructions 1719 HEALD HWY., STE B	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions UNION, ME 04862	

Enter the Return code for the return that this application is for (file a separate application for each return) 03

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

● The books are in the care of ▶ TAMMY SWASEY-BALLOU

Telephone No ▶ 207-691-4907 FAX No ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 2/15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year 20 ____ or
- ▶ tax year beginning 7/01, 20 10, and ending 6/30, 20 11

2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c 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.	3c	\$	0.

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

Minimum Filing Fee \$10.00. An additional \$10 filing fee if changing the purpose

DOMESTIC
NONPROFIT CORPORATION

STATE OF MAINE

ARTICLES OF AMENDMENT

File No. 20040142ND Pages 3
Fee Paid \$ 20
DCN 2112071600004 PURP
----FILED-----
07/25/2011

Jule R. Flynn
Deputy Secretary of State

A True Copy When Attested By Signature

Jule R. Flynn
Deputy Secretary of State

Maine Women's Network

(Name of Corporation)

Pursuant to 13-B MRSA §§802 and 803, the undersigned corporation executes and delivers the following Articles of Amendment.

FIRST: ("X" one box only) public benefit corporation mutual benefit corporation

SECOND: Describe NATURE OF CHANGE (i.e. change in name of corporation, purpose, number of directors, adding or deleting section or revision of section, etc) as well as TEXT of amendment Attach additional pages as needed

The purpose of the corporation has been changed; the corporation is no longer a 501(c)(3)
corporation organized for educational purposes. The new purpose is as follows:

The Corporation has been organized and shall be operated as a nonprofit corporation within the meaning of the Maine Nonprofit Corporation Act, 13-B M.R.S. 101 et seq., as the same may be amended, revised or repealed and replaced from time to time. As such, no part of its net earnings shall inure to the benefit of its Members or any private individual; provided, however, that nothing herein shall be construed to prevent the Corporation from providing reasonable compensation to those furnishing goods and services to it or on its behalf.

Except as otherwise provided in the Articles of Incorporation or these Bylaws, the Corporation shall be organized for any lawful purpose, including but not limited to, serving as a statewide resource for women as they build professional and personal partnerships.

THIRD:

("X" one box only.) The amendment was adopted on (date) Jan 13, 2011 as follows:

- By the members at a meeting at which a quorum was present and the amendment received at least a majority of the votes which members were entitled to cast
- (If the Articles require more than a majority vote) By the members at a meeting at which the amendment received at least the percentage of votes required by the Articles of Incorporation
- By the written consent of all members entitled to vote with respect thereto
- (If no members, or none entitled to vote thereon.) By majority vote of the board of directors

FOURTH:

The address of the registered office of the corporation in the State of Maine is 1719 Heald Hwy, Suite B.
1719 Heald Hwy, Suite B, Union, ME 04862
(street, city state and zip code)

DATED 7/21/11

*By Jennifer Hogan
(signature)
Jennifer Hogan, President
(type or print name and capacity)

**MUST BE COMPLETED FOR VOTE
OF MEMBERS**

I certify that I have custody of the minutes showing the above action by the members.

Barbara A Moran
(signature of clerk, secretary or asst secretary)

*By Erica J H Morton
(signature)
Erica J H Morton, Clerk
(type or print name and capacity)

*This document **MUST** be signed by any duly authorized officer (13-B MRSA §104.1 B)

Please remit your payment made payable to the Maine Secretary of State

**SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101**

ARTICLE 2. PURPOSES

The Corporation has been organized and shall be operated as a nonprofit corporation within the meaning of the Maine Nonprofit Corporation Act, 13-B M.R.S. §101 et seq., as the same may be amended, revised, or repealed and replaced from time to time. As such, no part of its net earnings shall inure to the benefit of its Members or any private individual, provided, however, that nothing herein shall be construed to prevent the Corporation from providing reasonable compensation to those furnishing goods or services to it or on its behalf.

Except as otherwise provided in the Articles of Incorporation or in these Bylaws, the Corporation shall be organized for any lawful purpose, including but not limited to, serving as a statewide resource for women as they build professional and personal partnerships.

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.