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Return of Organization Exempt From Income Tax

2011

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

OMB No 1545-0047

Depa Inter	artment of th	e Treasury Service	► The organization	on may have to use a copy of	this return to satisf	fy state reporti	ng requirements			
$\overline{\mathbf{A}}$	For the 2	2011 calen	dar year, or tax year begi	nning 7/01	, 2011,	and ending	6/30		, 2012	
В	Check if ap	plicable	С			_	D	Employer Ide	ntification Numb	er
	Addres	s change	MAINE ASSOCIATION		TERS			01-033	8987	
	Name	change	69 SEWALL STREET				E	Telephone nu	mber	
	Initial	return	AUGUSTA, ME 0433	30				207-62	3-3870	
	Termin	nated								
	Amend	led return				_	G	Gross receipts	s \$48	82,176.
	Applica	ation pending	F Name and address of princip	al officer SUZANNE	D. GOUCHE		I(a) Is this a gro	· • ·		Yes X No
			SAME AS C ABOVE			'	(b) Are all affiliate (d) !	ates included? h a list (see i		Yes No
<u> </u>	Tax-exen	npt status	501(c)(3) X 501(c) (6) ◄ (insert no.)	4947(a)(1) or	527	" No, altac	11 8 1131 (300 1	nistractions/	
J	Websit	te:► WW	W.MAB.ORG				(c) Group exem	ption number	>	
K		organization	X Corporation Trust	Association Other ►	L	Year of Formation	on 1947	M State o	of legal domicile	ME
		<u>Summar</u>	у		-, -, 4		·	·	··	
			be the organization's miss				<u>ig_and_pi</u>	ROMOTIN	<u>ig the </u>	
9	_B <u>I</u>	<u>ROADCAS</u>	TING INDUSTRY IN	<u> MAINE_IN_THE</u>	PUBLIC IN	TEREST_			~	
nan										
Activities & Governance	2 2 Ch	ock this bo	x If the organization	on discontinued its one	rations or disp	osed of mor	 e than 25%	of its net s		
ő			ting members of the gove			osea or mor	e man 2576	3		9
න්			dependent voting membe			1b)		4		9
/ite			of individuals employed i		(Part V, line 2a))		5		2
Ę	1		of volunteers (estimate if					6	 	1 005
٩	1		ed business revenue from					71		1,025.
	b Ne	t unrelated	business taxable income	trom Form 990-1, line	9 34		Deign			0.
	8 Co	ntributions	and grants (Part VIII, line	a 1h)			Prior	rear 19,960.	Curren	19,420.
ē			ice revenue (Part VIII, lin					18,810.		23,372.
Revenue			come (Part VIII, column)					30,814.		29,333.
æ			e (Part VIII, column 🏟 , I					2,155.		1,918.
<			(Alada Ines 8 Inrough 1			ne 12)	3	71,739.		74,043.
2012	13 Gra	an is a nd si	milar amounts paid (Part	IX, column (A), lines 1	1-3)			<u>22,000.</u>		10,800.
ଚ	14 Be	nefits paid	to or for members (Part	IX, column (A), line 4)						·
	15 Sa	laries, othe	r compensation, employe	ee benefits (Part IX, co	lumn (A), lines	5-10)	1.	<u>23,104.</u>	1	39,178.
EL) Expenses	16a Pro	ofessional	fundraising fees (Part IX,	column (A), line 11e)						
ÇĞ	b Tot	tal fundrais	ing expenses (Part IX, co	olumn (D), line 25) 🕨						
	17 Oth	ner expens	es (Part IX, column (A), I	nes 11a-11d, 11f-24e)			1	44,049.	1	87,995.
	18 Tot	lal expense	es Add lines 13-17 (must	equal Part IX, column	(A), line 25)		2	89,153.	. 3	37,973.
	19 Re	venue less	expenses Subtract line	18 from line 12				82,586.		36,070.
₹8							Beginning of			
Net Assets of Fund Balancos	1		Part X, line 16)					<u>55,284.</u>		67,099.
5 4 5	ì		s (Part X, line 26)					<u> 29,103.</u>		30,059.
žį			fund balances Subtract	line 21 from line 20			7:	<u> 26,181.</u>	.]7.	<u>37,040.</u>
		Signatur	e Block	_	·					
Und	er penalties iplete Decla	of perjury, I d	eclare that I have examined this re irer (other than officer) is based of	eturn, including accompanying n all information of which prep	schedules and state	ments, and to to	ne best of my kn	owledge and b	oelief, it is true, co	prrect, and
			WWW S	mulla				0/2.1	17	
c:-		Signatu	re of officer	ALVVVVVV	<i>Y</i>		Date Date	75.1		
Sig He	jn re	S117	ANNE D. GOUCHER				PRESIDE	እነጥ / ሮፑር		
•••		IF	print name and title				TIVESTOR	MI/CEO		
		Print/Type p	reparer's name	Preparer's signature		Date / /	Chec	ck I if	PTIN	
Pai	id		L R. DUNN	Muchon	O	9/5/1	7 -	employed	P003407	11
	eparer	Firm's name	WAGDOWALD DA	GE & CO LLC		()	- 5511		1	
	e Only	Firm's addre		REET, PO BOX 2	749		Fırm	's EIN - 0	1-0242373	3
	-		AUGUSTA, ME						7-622-476	
Mav	the IRS	discuss th	is return with the prepare		nstructions)				X Yes	No
			eduction Act Notice, see			TEEA	A0113L 08/18/1	 1		990 (2011)

Forn	n 990 (2011) MAINE ASSOCIATION OF BROADCASTERS	01-0338987	Page 2
_	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission SUPPORTING AND PROMOTING THE BROADCASTING INDUSTRY IN MAINE IN THE BROADCASTING INDUSTRY IN THE BROADCASTING IN THE	THE PUBLIC INTE	REST
			-
2	Did the organization undertake any significant program services during the year which were not listed Form 990 or 990-EZ?	on the prior Yes	X No
_	If 'Yes,' describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program s If 'Yes,' describe these changes on Schedule O	ervices? Yes	X No
4	Describe the organization's program service accomplishments for each of its three largest program ser Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the others, the total expenses, and revenue, if any, for each program service reported.	vices, as measured by amount of grants and al	expenses locations to
4 a	PUBLIC EDUCATION PARTNERSHIP PROGRAM: (PEP PROGRAM): MEMBER AND TELEVISION STATIONS IN THE STATE VOLUNTARILY DONATE AIRTIME WHICH UNDER THE PROGRAM, MAKES AVAILABLE TO GOVERNMENTAL AND NOT-FOR-FORGANIZATIONS TO ACHIEVE STATEWIDE COVERAGE OF THEIR ACTIVITIES, WHICH BENEFIT THE PUBLIC AT LARGE. THE MONIES RECEIVED BY THE ASTATIONS SO THAT THEY CAN BETTER SERVE THE PUBLIC INTEREST. IMPORTANT SERVES TO STRENGTHEN THE RELATIONSHIPS BETWEEN THE BROAD GOVERNMENTAL AND NOT-FOR-PROFIT ENTITIES AND ORGANIZATIONS	NONMEMBER RADICH THE ASSOCIATE PROFIT ENTITIES EVENTS AND PROFICE OF THE PERSON OF THE	ION, AND OGRAMS USED BY S FOR
4 b	C(Code (Code		1,640.) TO
40	C(Code (Code	TIBUTIONS TO MARKET COMMUNICATIONS	5
4 d	Other program services (Describe in Schedule O) SEE SCHEDULE O (Expenses \$ 93,742. including grants of \$) (Revenue \$	12,482.	`
4e	Total program service expenses ► 262,923.	12,402.	,
			000 (0011)

Form 990 (2011) MAINE ASSOCIATION OF BROADCASTERS

Checklist of Required Schedules

			Yes	No
	to the control of the		163	110
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 (see instructions)?	2		X
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		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
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	_ X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		X
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 credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
â	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
t	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	11 b		Х
(c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
(d 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	11 d		Х
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
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	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		X
ŧ	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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
14 <i>a</i>	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> X</u>
ł	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? 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 or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	aDid the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u> </u>
ı	b if 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

			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 17 If 'Yes,' complete Schedule I, Parts I and II	21	Х	
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		Х
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? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(c 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		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
t	b 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		
	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
	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		<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
	c 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 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part L	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
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		<u> </u>
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
b	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	35b		_X_
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		
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		<u>X</u>
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	
AA		Form	990 (2	2011)

	Check if Schedule O contains a response to any question in this Part V					П
					Yes	No
1 a	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1 a		5	1	
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1ь		Ö	İ	
	Did the organization comply with backup withholding rules for reportable payments to vendo	rs and	reportable gaming			
	(gambling) winnings to prize winners?		reportable gammig	1	c X	
2 8	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a		2		1
ŀ	f at least one is reported on line 2a, did the organization file all required federal employmen	nt tax re	eturns?	2	b X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see in	nstructi	ons)		ĺ	
	Did the organization have unrelated business gross income of \$1,000 or more during the year			3		$oxed{oxed}$
ŀ	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q			3	b X	<u> </u>
	At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other f	or oth	er authority over, a I account)?	4:	a	x
t	of If 'Yes,' enter the name of the foreign country			_		ļ
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and F			<u> </u>	<u> </u>	<u> </u>
	Was the organization a party to a prohibited tax shelter transaction at any time during the ta	-		5		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelf	ter tran	saction?	5	_	X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?			5		+
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible?	ınd dıd	the organization	6	a	х
	If 'Yes,' did the organization include with every solicitation an express statement that such contact deductible?	ontribu	tions or gifts were	61	b	
7	Organizations that may receive deductible contributions under section 170(c).				İ	
a	a Did the organization receive a payment in excess of \$75 made partly as a contribution and p services provided to the payor?	artly fo	or goods and	7:	<u> </u>	
ŧ	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?			7		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for w Form 8282?		was required to file	70		
c	If 'Yes,' indicate the number of Forms 8282 filed during the year	7d			1	1
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal	benefit	contract?	70	•	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal ben	efit cor	ntract?	71	:	
ç	If the organization received a contribution of qualified intellectual property, did the organization as required?	on file	Form 8899	7	9	
ŀ	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	organ	ization file a	71	า	<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year?	ng orga nave ex	anizations. Did the cess business	8		
9	Sponsoring organizations maintaining donor advised funds.				ļ]
a	Did the organization make any taxable distributions under section 4966?			9;	<u> </u>	
	Did the organization make a distribution to a donor, donor advisor, or related person?			91)	<u>Ц</u>
	Section 501(c)(7) organizations. Enter					,
	a Initiation fees and capital contributions included on Part VIII, line 12	10 a		_		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b				<u> </u>
	Section 501(c)(12) organizations. Enter	ایدا				
	a Gross income from members or shareholders	11 a		\dashv		'
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11 Ь				
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu o		1041?	12	1	Щ,
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b		4	i	,
	Section 501(c)(29) qualified nonprofit health insurance issuers.			-	1	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	ı. ^		138	1	Щ,
	Note. See the instructions for additional information the organization must report on Schedul	ie O				, 1
t	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13Ь				
c	Enter the amount of reserves on hand	13c		\dashv		'
	a Did the organization receive any payments for indoor tanning services during the tax year?			148		X
	of 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schedu	le O	141	 	<u> </u>
BAA				Fori	n 990	(2011)

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.

	Schedule O. See instructions.	_		(G)
500	Check if Schedule O contains a response to any question in this Part VI			X
360	ction A. Governing Body and Management			
	a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1b 9		Yes	No
	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		3		X
4				
_	·	4		X
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? SEE SCHEDULE O	5 6	X	X
7	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? SEE SCHEDULE O	7a	х	
ı	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.			
i	a The governing body?	8a	Х	
(b Each committee with authority to act on behalf of the governing body?	8ь	Х	
9	Is there any officer, director or 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		Х
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10:	a Did the organization have local chapters, branches, or affiliates?	10a	-	Х
ı	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 Ь		
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O			
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
•	C Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done SEE SCHEDULE Q	12 c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did 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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
í	The organization's CEO, Executive Director, or top management official SEE SCHEDULE Q	15a	Х	
	Other officers of key employees of the organization	15b		Х
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16 a	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		X
ı	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
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 inspection indicate how you make these available. Check all that apply Own website Another's website X Upon request	ailable	e for p	oublic
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available public during the tax year. SEE SCHEDULE O	ble to		
	State the name, physical address, and telephone number of the person who possesses the books and records of the orga SUZANNE GOUCHER 69 SEWALL STREET, SUITE 2 AUGUSTA ME 04330 207-623-3870	nızatı	on 	

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
- 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

Check this box if neither the organization	on nor any	relate	d or	gan	ızat	ion co	mpe	ensated any current of	fficer, director, or trus	tee
(A) Name and title	(B) Average hours per week		ot che ss per and a	Pos ck mo	ction ore the s both ctor/tr	an one n an offi ustee)	box, cer	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	(describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) DOUG FINCK PAST CHAIR	0.5	х						0.	0.	0.
(2) MARK OSBORNE	1 0.5	<u> </u>	H					Ų.	0.	<u> </u>
CHAIR	1	x		X				0.	0.	0.
(3) MICHAEL GRANT	-	 						Ŭ.		<u> </u>
2ND VICE CHAIR	0.5	X		Х				0.	0.	0.
(4) WARREN MADDOCK										
DIRECTOR	0.5	Х						0.	0.	0.
(5) STEVE HILTZ										
1ST VICE CHAIR	0.5	Х		Х				0.	0.	0.
(6) IRWIN GRATZ										
SECRETARY-TREAS	0.5	Х		Х				0.	0.	0.
Ø STEVE STEINBERG										
DIRECTOR	0.5	Х						0.	0.	0.
(8) MARK NASON										
DIRECTOR	0.5	Х						0.	0.	<u> </u>
(9) JON SHIELDS	_									
DIRECTOR	0.5	Х						0.	0.	0.
(10) SUZANNE D. GOUCHER										
PRESIDENT/CEO	40			Х				97,507.	0.	13,651.
(11)										
(12)										-
<u>(13)</u>										
(14)								-		

Section A. Officers, Directors, Trust	ees, l	Кеу	En	plo	oye	es,	and	Highest Con	pensated Emp	loyees (cont)
(A) Name and title	(B) Average	(do	not c	Pos heck	C) sition more erson	than	one h an	(D) Reportable	(E) Reportable	(F) Estimated
ivalite and title	hours	or director	cer ar		irecto	Highest compensated employee	tee)	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(15)					-					
<u>(16)</u>										
(17)		-								
(18)										
(et)								-		
<u>(20)</u>										
<u>(21)</u>										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total							▶	97,507.	0.	13,651.
c Total from continuation sheets to Part VII, Section	A						•	0.	0.	0.
d Total (add lines 1b and 1c)							•	97,507.	0.	13,651.
2 Total number of individuals (including but not limited from the organization ► 0	a to the	ose i	isted	ab	ove)	who	rec	eived more than	\$100,000 of report	
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or trus	tee, al	key	emp	oloy	ee, c	or hi	ghest compensate	ed employee	Yes No
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater the such individual	portabl nan \$1	e co 50,00	mpe	nsa If 'Y	tion 'es'	and comp	othe	er compensation to Schedule J for	from	4 X
5 Did any person listed on line 1a receive or accrue or for services rendered to the organization? If 'Yes,' or the organization or the organization of the organization of the organization.	ompen:	satio	n fre	om a Jule	any <i>I foi</i>	unre	late	d organization or	ındıvıdual	5 X
Section B. Independent Contractors	,									1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Complete this table for your five highest compensation from the organization. Report compensation.	ed indensation	pen for	dent the	cor	ntrac nda	tors yea	that ir en	t received more the	nan \$100,000 of n the organization'	s tax year
(A) Name and business address	S							(B) Description of		(C) Compensation
							\dashv			
			_							
2 Total number of independent contractors (including \$100,000 in compensation from the organization		lımı	ted	to th	nose	liste	ed a	bove) who receive	ed more than	72. av

	Statement of Revenue						
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
STS	1a Federated campaigns	1 a					
NA P	b Membership dues	1 b	19,420.				
S S	c Fundraising events.	1c					
FA	d Related organizations	1 d					
S, C	e Government grants (contributions)	1 e		_			
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, an similar amounts not included above	1 1 f					
E 0	g Noncash contributions included in Ins 1						
징존	h Total. Add lines 1a-1f	· -	•	19,420.			
3			Business Code				
Ä.	2a PEP PROGRAM	[515100	309,250.	309,250.		
F	b FCC INSPECTION PROG	RAM	519100	7,250.	7,250.		
ջ	c CONVENTION AND SEMI	NARS [611710	5,232.	5,232.		
SER	d EDUCATION	[611710	1,640.	1,640.		
Ψ	e						
PROGRAM SERVICE REVENUE	f All other program service rever	nue [
-	g Total. Add lines 2a-2f			323,372.			
	3 Investment income (including of other similar amounts)4 Income from investment of tax		•	20,204.	:		20,204.
	5 Royalties		•				
		Real	(II) Personal				
	6a Gross rents.	·					
	b Less rental expenses						
İ	c Rental income or (loss)						
	d Net rental income or (loss)		•				,
	7a Gross amount from sales of (i) Se	curities	(II) Other				
	assets other than inventory 11	7,262	•				
	b Less cost or other basis and sales expenses 108	3,133					
		7,129					
	d Net gain or (loss)		•	9,129.			9,129.
Ų.	8a Gross income from fundraising (not including \$	events					
<u> </u>	of contributions reported on line	e 1c)					
œ	See Part IV, line 18	i	a				
OTHER REVENUE	b Less direct expenses	1	o				
١	c Net income or (loss) from fund	aising e	vents				
	9a Gross income from gaming act See Part IV, line 19	vities	 a				
	b Less direct expenses	ı	D				
	c Net income or (loss) from game	ng activ	ities -				
	10a Gross sales of inventory, less r and allowances	eturns					
ŀ	b Less cost of goods sold		•				
}	c Net income or (loss) from sales	ot inve					
}	Miscellaneous Revenue		Business Code	1 025		1 025	
	11a ADVERTISING		511190	1,025. 893.	902	1,025.	
	b MISCELLANEOUS INCOM	'		093.	893.		
	d All other revenue	}					
	e Total. Add lines 11a-11d	L		1,918.		···	
	12 Total revenue. See instructions		•	374,043.	324,265.	1,025.	29,333.
	1 TOTAL LEAGURE: DEC III2(I (ICHO))			<u></u>	324,203.	1,023.	۷۶,۵۵۵.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a re			40)	<u>X</u>
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	and organizations in the United States See Part IV, line 21	10,800.	10,800.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	111,158.	83,369.	27,789.	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0
7	Other salaries and wages.	16,425.	12,319.	4,106.	
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	2,299.	1,724.	575.	
9	Other employee benefits				
10	_	9,296.	6,972.	2,324.	
11	Fees for services (non-employees)	, =	,	,/	
	a Management				
	b Legal	14,020.	14,020.		
	c Accounting	6,000.	,	6,000.	
	d Lobbying	9,400.	9,400.	-,	
	Professional fundraising services See Part IV, line 17	- /	<u> </u>		
	Investment management fees		···		
	9 Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				• •
15	Royalties				
16	Occupancy	7,988.		7,988.	
17	Travel				·=
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest	18,646.	18,646.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	157.		157.	·
23	_ `	3,341.		3,341.	
24	.	3,341.		3,341.	4
	FCC INSPECTION PROGRAM	31,000.	31,000.		
1	EDUCATION PROGRAM	29,677.	29,677.		
	FCC REBATE EXPENSE	18,000.	18,000.		
	MEETINGS	13,433.	12,536.	897.	
	All other expenses SEE SCH. O	36,333.	14,460.	21,873.	
25	Total functional expenses Add lines 1 through 24e	337,973.	262,923.	75,050.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation			2,323	
	Check here ► if following				
	SOP 98-2 (ASC 958-720)				

Part X Balance Sheet (**B**) End of year (A) Beginning of year Cash - non-interest-bearing 100. 100 1 2 Savings and temporary cash investments 114,838 81,225. 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 22,043 4 11,471 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 Notes and loans receivable, net 7 Inventories for sale or use 8 300 Prepaid expenses and deferred charges 9 4,250. 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 21,111 **b** Less accumulated depreciation 10b 20,147 349 10 c 964. Investments - publicly traded securities. 617,654. 669,089. 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 Other assets See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 755,284 767,099 16 17 30,059 Accounts payable and accrued expenses 29,103 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 Total liabilities. Add lines 17 through 25. 29,103 26 30,059. Organizations that follow SFAS 117, check here ▶ X and complete lines NET 27 through 29 and lines 33 and 34. 27 Unrestricted net assets 726,181 27 737,040. Temporarily restricted net assets 28 Permanently restricted net assets 29 P Organizations that do not follow SFAS 117, check here and complete FUZD lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33

BAA

34

Total net assets or fund balances

Total liabilities and net assets/fund balances

767,099. Form 990 (2011)

737,040.

726,181

755,284

33

34

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit

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

BAA

Form 990 (2011)

3 a

3b

Х

SCHEDULE⁻C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

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

Department of the Treasury Internal Revenue Service

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then Section 501(c)(4), (5), or (6) organizations Complete Part III Employer identification number Name of organization 01-0338987 MAINE ASSOCIATION OF BROADCASTERS Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures ▶\$ 3 Volunteer hours Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 **►** \$ 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No Yes 4a Was a correction made? Yes No b If 'Yes,' describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? X No Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (a) Name (b) Address (d) Amount paid from filing (e) Amount of political contributions received and organization's funds if none, enter-0promptly and directly delivered to a separate political organization If none enter -0-(1)(2) (3)(4)(5)

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

(6)

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 20				01-033	
Part II-A Complete if section 501		n is exempt under se	ction 501(c)(3) an	d filed Form 5768 (el	ection under
A Check ► If the fili	ing organization bel	ongs to an affiliated group	(and list in Part IV ea	ch affiliated group membe	er's name,
address	, EIN, expenses, an	d share of excess lobbying	expenditures)		
B Check ► I if the fill	ing organization che	cked box A and 'limited co	ontrol' provisions apply	,	
(The term	Limits on Lobby	ying Expenditures ans amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expendit	tures to influence pi	ublic opinion (grass roots lo	obbying).		
b Total lobbying expendit	tures to influence a	legislative body (direct lob)	bying).		
c Total lobbying expendit	tures (add lines 1a	and 1b)			
d Other exempt purpose	expenditures				
e Total exempt purpose e	expenditures (add li	nes 1c and 1d)			
f Lobbying nontaxable ar both columns	mount Enter the an	nount from the following ta	ble ın		
If the amount on line 1e, co	lumn (a) or (b) is	The lobbying nontaxable a	amount is		
Not over \$500,000	(2) 2: (2) 12	20% of the amount on line 1e			
Over \$500,000 but not over \$1	1.000.000	\$100,000 plus 15% of the excess	over \$500,000		
Over \$1,000,000 but not over	• • • • • • • • • • • • • • • • • • • •	\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over	· · · · · · · · · · · · · · · · · · ·	\$225,000 plus 5% of the excess			
Over \$17,000,000	417,000,000	\$1,000,000	0701 \$1,000,000		
g Grassroots nontaxable	amount (enter 25%		<u></u>		
h Subtract line 1g from hi	· ·	•			
i Subtract line 1f from lin					
j If there is an amount of section 4911 tax for this		ther line 1h or line 1i, did t	the organization file Fo	orm 4720 reporting	Yes No
(Som	ne organizations tha columi	4-Year Averaging Period lat made a section 501(h) el ns below. See the instructi	ection do not have to	complete all of the five gh 2f.)	
	Lobi	oying Expenditures During	4-Year Averaging Pe	riod	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))			l		
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))			i		
f Grassroots lobbying expenditures					000 000 57 000
BAA				Schedule C (Form	n 990 or 990-EZ) 2011

(election under section 501(h)). For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity			5768
of the lobbying activity	13	<u> </u>	(b)
	Yes	No	(b) Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			, '
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities?			
j Total Add lines 1c through 1:			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c if 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)			
section 501(c)(6).	c)(ɔ),	or	
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1 X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3 X
Complete if the organization is exempt under section 501(c)(4), section 501(CY5)	or sec	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' Ol answered 'Yes.'	₹ (b) i	Part III	-A, line 3, is
1 Dues, assessments and similar amounts from members		1	19,420.
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year		2a	9,935.
b Carryover from last year	- [2b	
c Total	Ī	2c	9,935.
		3	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic expenditure next year?		4	0.
 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 		4 5	0. 9,935.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic expenditure next year?	cal	5	9,935.

Scredule C (Form 990 or 990 EZ) 2011 MAINE ASSOCIATION OF BROADCASTERS	01-0338987	Page 4
Supplemental Information (continued)	-	
	 -	
	· 	-
	·	
		-
		
		
		-
		- -
		-
		 -
		-
		-

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, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Name of the organization Employer identification number MAINE ASSOCIATION OF BROADCASTERS 01-0338987 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) 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 are the organization's property, subject to the organization's exclusive legal control? No Yes 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? Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV 1 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area 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 a Total number of conservation easements. 2a **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 2d structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 4 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 violations, and enforcement of the conservation easements it holds? Yes No 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 ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? No 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 **b** Assets included in Form 990. Part X ⊳Ś

Schedule D (Form 990) 2011 MAIN							01-033			Page 2
Organizations Mainta	ining Collec	ctions o	of Art, Hist	orical T	reasures, or	r Other S	<u>imilar Ass</u>	ets (continu	ıed)
3 Using the organization's acquisit items (check all that apply)	ion, accession,	and othe	er records, ch	heck any	of the following	that are a	significant u	ise of it	is collec	ction
a Public exhibition			d Loan	or excha	nge programs					
b Scholarly research			e U Other	r						
c Preservation for future gene										
4 Provide a description of the organization Part XIV								se in		
5 During the year, did the organiza assets to be sold to raise funds	ation solicit or r rather than to t	eceive do se mainta	onations of a nined as part	rt, historic of the ord	cal treasures, o nanization's col	or other sim Nection?	ıılar	Yes	. [No
Escrow and Custodia	l Arrangem	ents. Co	omplete if	the orga	anization an	swered "	Yes' to For			
line 9, or reported an	amount on I	Form 99	90, Part X,	, lıne 21					-,	,
1 a Is the organization an agent, truincluded on Form 990, Part X?	stee, custodian	, or other	ıntermediar	y for cont	ributions or oth	ner assets r	not	Yes	. [
b If 'Yes,' explain the arrangement							ı		L	
				_				Amoun	nt	
c Beginning balance						1c				
d Additions during the year						1 d				
 Distributions during the year 						1e				
f Ending balance						1f				
2a Did the organization include an a		n 990, Pa	art X, line 21	7				Yes	. [No
b If 'Yes,' explain the arrangement										
Endowment Funds. Co				1 -						
4-5	(a) Current y	ear	(b) Prior yea	ar ((c) Two years back	(d) Th	ree years back	(e)	Four year	's back
1 a Beginning of year balance.										
b Contributions										
c Net investment earnings, gains, and losses										
d Grants or scholarships										
e Other expenditures for facilities and programs										
f Administrative expenses										
g End of year balance										
2 Provide the estimated percentag		t year end		ne 1g, col	umn (a)) held a	as				
a Board designated or quasi-endown b Permanent endowment ▶	wment -		%							
c Temporarily restricted endowmer		ç	Į.							
The percentages in lines 2a, 2b,		1 oqual 100	o No/.							
-		•								
3a Are there endowment funds not a organization by	in the possessi	on of the	organization	that are	held and admir	nistered for	the	Г	Yes	No
(i) unrelated organizations								3a(i)	103	110
(ii) related organizations								3a(ii)		
b If 'Yes' to 3a(ii), are the related of	organizations lis	sted as re	equired on So	chedule R	2			3b		
4 Describe in Part XIV the intended	-		•							
Land, Buildings, and I	Equipment.	See Fo	rm 990, Pa	art X, Iır	ne 10.					
Description of property			other basis stment)		st or other s (other)	(c) Accu depred		(d) E	Book va	lue
1 a Land										
b Buildings.										
c Leasehold improvements										
d Equipment										
e Other					21,111.	;	20,147.			964.
Total. Add lines 1a through 1e (Colum	nn (d) must equ	ial Form	990, Part X,	column (Ł	3), line 10(c))		>			964.
BAA							Schedu	ıle D (F	orm 99	0) 2011

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(4)
(5)
(6)
(7)
(8)
(9)
(10)
(11)

Total. (Column (b) must equal Form 990, Part X, column (B) line 25)

2 FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Schedule D (Form 990) 2011 MAINE ASSOCIATION OF BROADCAST	ERS	01-0338987_	Page 4
Reconciliation of Change in Net Assets from Form 990 to Audited	Financial Statements	N/A	
1 Total revenue (Form 990, Part VIII, column (A), line 12)			
2 Total expenses (Form 990, Part IX, column (A), line 25)		. <u>.</u>	
3 Excess or (deficit) for the year Subtract line 2 from line 1			
4 Net unrealized gains (losses) on investments			
5 Donated services and use of facilities			
6 Investment expenses			
7 Prior period adjustments			
8 Other (Describe in Part XIV)		-	
9 Total adjustments (net) Add lines 4 through 8			
10 Excess or (deficit) for the year per audited financial statements. Combine	lines 3 and 9		
Reconciliation of Revenue per Audited Financial State		per Return N/A	
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIV)	2d		
e Add lines 2a through 2d.		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
a Investment expenses not included on Form 990, Part VIII, line 7b.	4a		
b Other (Describe in Part XIV)	4b		
c Add lines 4a and 4b	45	40	
	- 12)	4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line			
Reconciliation of Expenses per Audited Financial Sta	tements with Expense	es per Keturn N/A	
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1		
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses			
d Other (Describe in Part XIV)	_ 2d		
e Add lines 2a through 2d.		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b.	4a		
b Other (Describe in Part XIV)	4b		
c Add lines 4a and 4b		4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18)	5	
Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part any additional information	d 9, Part III, lines 1a and 4, XIII, lines 2d and 4b Also c	Part IV, lines 1b and 2b, complete this part to provide	le
·			

Schedule D	(Form 990) 2011	MAINE	ASSOCIATION (tion (continued)	OF BROADCASI	TERS	(01-0338987	Page 5
	Supplementa	l Informa	tion (continued))				
								
							-	
								
			 					

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Vame of the organization

General Information on Grants and Assistance

MAINE ASSOCIATION OF BROADCASTERS

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

OMB No 1545-0047

Employer identification number

01-0338987

Schedule I (Form 990) (2011) 2 F (h) Purpose of grant or assistance POST SECONDARY EDUCATION X Yes Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to (g) Description of non-cash assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) TEEA3901L 06/01/11 Ö (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 10,800 (d) Amount of cash grant 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Part II can be duplicated if additional space is needed 01-0538226 501 (C) (3) Enter total number of other organizations listed in the line 1 table (p) EIN (1) MAINE_BROADCASTERS_FOUNDATION 1 (a) Name and address of organization 69 SEWALL STREET A ____ 1 1 or government AUGUSTA, ME 04330 1111 ı 1 1 1 8 C <u>@</u> €¦ ତ୍ର ତ୍ର ෂ

MAINE ASSOCIATION OF BROADCASTERS (Form 990) (2011)

Page 2

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Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance ~ ന 4 S 9

BAA

Schedule I (Form 990) (2011)

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service
Name of the organization

MAINE ASSOCIATION OF BROADCASTERS

OMB No 1545-0047

:		7770	•
	Related Organizations and Unrelated Partnerships		
of the Treasury anue Service	► Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.		•
organization		Employer identification number	i
ASSOCIATIC	ASSOCIATION OF BROADCASTERS	01-0338987	
Identification	Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.)	•	1

(a) Name, address, and EIN of disregarded entity	(b) Primary activity		(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	Buil
(1)							
<u>(2)</u>							:
	· · · · · · · · · · · · · · · · · · ·		_				
(3)							
Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during		(Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had the tax year.)	n answered 'Ye	s' to Form 990,	Part IV, line 34 b	ecause it had	_
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	tus Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	b)(13) entity?
						Yes	No
(1) MAINE BROADCASTERS FOUNDATION 69 SEWALL STREET 7 AUGUSTA, ME 04330 01-0538226	SCHOLARSHIPS	ME	501 (C) 3	6	N/A		×
(2)							
<u>(3)</u>							
1							
						_	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							

Schedule R (Form 990) 2011

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

Schedule R (Form 990) 2011 MAINE ASSOCIATION OF BROADCASTERS

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.)

(K) Percentage ownership.		•								art IV,	(h) Percentage ownership										n 990) 2011
(i) General or managing partner?	Yes No	-	 							rm 990, Pa	(g) Share of end-of-year assets										Schedule R (Form 990) 2011
Code V-UBI amount in box 20 of Schedule K-1	(Form 1065)									ed 'Yes' to Fo	come Share of as							:			Sche
(h) Disproportionate allocations?	Yes No				-			_		ation answer	Share of total income										
(g) Share of end-of-year assets										if the organizationst the	(e) Type of entity (C corp, S corp, or trust)										
Share of total income										as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, izations treated as a corporation or trust during the tax year.)	Legal domicile Direct (state or foreign controlling entity country)										15/24/11
(e) Predomnant Income (related, unrelated, excluded from tax under	sections 512-514)									orporation or 1 s treated as a	(c) Legal domicile (state or foreign										TEEA5002L 05/24/11
(d) Direct controlling entity										Faxable as a Co	(b) Primary activity										
	country)									nizations inore relate	zation						 		1 1 1 1 1 1 1	1 1 1 1	
(b) Primary activity										Identification of Related Organizations Taxable a	a) N of related organiz		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			 		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 	
(a) Name, address, and EIN of related organization		(1)		(2)		(3)	 		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Identification o	(a) Name, address, and EIN of related organization	(1)			(2)			(3)			ВАА

01-0338987

Schedule R (Form 990) 2011 MAINE ASSOCIATION OF BROADCASTERS

Transactions With Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, 35a, or 36.)	orm 990, Part IV,	line 34, 35, 35a, o	r 36.)		
				Yes	Š
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? a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	ions listed in Parts II	٠٧٠			×
b Giff, grant, or capital contribution to related organization(s)			1 b	×	
c Gift, grant, or capital contribution from related organization(s)			10		×
d Loans or loan guarantees to or for related organization(s)			19		×
e Loans or loan guarantees by related organization(s)			16		×
f Sale of assets to related organization(s)			11		×
g Purchase of assets from related organization(s)			19		×
h Exchange of assets with related organization(s)			1		×
i Lease of facilities, equipment, or other assets to related organization(s)			-		×
j Lease of facilities, equipment, or other assets from related organization(s)			1,		×
k Performance of services or membership or fundraising solicitations for related organization(s)			Ļ		×
 Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lets, or other accepts with related organization(s) 			= -	1	× ×
n Sharing of paid employees with related organization(s)			L L		×
 Reimbursement paid to related organization(s) for expenses 			10		×
p Reimbursement paid by related organization(s) for expenses			1p		×
q Other transfer of cash or property to related organization(s)			10		×
r Other transfer of cash or property from related organization(s)			-		×
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	g covered relationshi	s and transaction thre	splods		
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	(deterr deterr t involv	mining ved
(1) MAINE BROADCASTERS FOUNDATION	В	10,800.	САЅН		
(2)			-		
(3)					
(4)					
(5)					
(9)					
BAA TEEA5003L 05/24/11		Sche	Schedule R (Form 990) 2011	066 w.) 2011

Page 4

Unrelated Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 37.)

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.

Name, address, and EIN of entity Primary activity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(i) General or managing partner?	Percentage ownership
			section 512-514)	Yes No			Yes No		Yes No	
(I)										
(2)										
(3)										
							_			
(4)										
(5)										
								•		
(9)										
<u>ω</u>										
(8)										
									_	
ВАА]]]	TEEA5004L 05/24/11				Sched	Schedule R (Form 990) 2011	90) 2011

	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).
-	
-	
 -	

Schedule R (Form 990) 2011

Page 5

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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.

2011

MAINE ASSOCIATION OF BROADCASTERS	01-0338987
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION	·
ANNUAL_CONVENTION AND AWARDS PROGRAM- A DAY LONG GATHERING FEAT	URING SPEAKERS ON
TOPICS_OF_INTEREST_TO_THE_BROADCASTING_INDUSTRY, FOLLOWED_BY_OU	R ANNUAL NEWS AND
CREATIVE AWARDS PRESENTATION WHEREIN WE HONOR STATIONS FOR VARI	OUS_ASPECTS_OF_THEIR
NEWS_AND_PROGRAMMING	
FCC_INSPECTION_PROGRAM: UNDER AN AGREEMENT WITH THE FEDERAL COM	MUNICATIONS
COMMISSION, THE MAINE ASSOCIATION OF BROADCASTERS CONTRACTS WIT	H AN INDEPENDENT
BROADCAST_ENGINEER_TO_CONDUCT_INSPECTIONS_OF_BROADCAST_STATIONS	TO ENSURE THEIR
COMPLIANCE_WITH_CURRENT_FCC_RULES	
FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAR	EHOLDER
ANY PERSON ENGAGED IN THE OWNERSHIP AND OPERATION OF A LICENSE	FOR AN AM, FM,
TELEVISION_OR_INTERNATIONAL_SHORTWAVE_BROADCAST_FACILITY_IN_THE	STATE OF MAINE (A
'STATION'), OR WHO HOLDS A VALID CONSTRUCTION PERMIT FOR A STAT	ION, SHALL BE
ELIGIBLE TO OBTAIN A REGULAR MEMBERSHIP IN RESPECT OF EACH SUCH	_STATION.
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVE	RNING BODY
MEMBERS OF THE BOARD ARE ELECTED BY THE GENERAL MEMBERSHIP AT T	HE ANNUAL MEETING OF
THE ASSOCIATION	
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
COMPLETED FORM 990 IS CIRCULATED TO THE GOVERNING BODY FOR REVI	EW PRIOR TO FILING.
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEME	ENT OF CONFLICTS
THE ASSOCIATION REVIEWS THE CONFLICT OF INTEREST POLICY WITH BO	TH NEW AND INCUMBENT
BOARD MEMBERS ON AN ANNUAL BASIS.	

Schedule 0 (Form 990 or 990-EZ) 2011	Page 2
Name of the organization MAINE ASSOCIATION OF BROADCASTERS	Employer identification number 01-0338987
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS	S FOR CEO EYEC DIR OR TOR MCI
	-
THE EXECUTIVE DIRECTOR IS EVALUATED ANNUALLY BY THE BOARD OF D	
THIS PROCESS THE EXECUTIVE DIRECTORS COMPENSATION IS ALSO REVI	EWED_AND_APPROVED_FOR
THE FOLLOWING YEAR	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY A	/AILABLE
AVAILABLE FOR INSPECTION AND COPYING AT THE ASSOCIATION'S PLAC	E OF BUSINESS DURING
NORMAL BUSINESS HOURS.	
	

2011

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SCHEDULE O - SUPPLEMENTAL INFORMATION

PAGE 1

MAINE ASSOCIATION OF BROADCASTERS

01-0338987

FORM 990, PART IX, LINE 24E OTHER EXPENSES

	(A) <u>TOTAL</u>	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
BANK & CREDIT CARD CHARGES CONTRIBUTIONS DUES & SUBSCRIPTIONS INVESTMENT FEES LOBBY TAX MISCELLANEOUS EXPENSE PEP PRODUCTION COSTS POSTAGE AND SHIPPING PRINTING AND PUBLICATIONS REPAIRS & MAINTENANCE STRATEGIC CONTINGENCY WEBSITE/DATABASE	1,393. 1,244. 1,657. 2,616. 3,477. 1,702. 10,069. 4,127. 914. 120. 4,952. 4,062. \$ 36,333.	3,477. 10,069. 914.	1,393. 1,244. 1,657. 2,616. 1,702. 4,127. 120. 4,952. 4,062. \$ 21,873.	\$ <u>0.</u>

FORM 990, PART XI, LINE 5 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

NET UNREALIZED GAINS OR LOSSES ON INVESTMENTS

TOTAL \$ -25,211. \$ -25,211.