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DLN: 93493227026423

Form 990

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

Inspec<u>tion</u> Internal Revenue Service A For the 2012 calendar year, or tax year beginning 01-01-2012 2012, and ending 12-31-2012 D Employer identification number **B** Check if applicable Federation of State Conservation Leagues Address change Maine Conservation Voters 01-0536008 Doing Business As Name change Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Terminated (207)620-8811 Amended return City or town, state or country, and ZIP + 4 AUGUSTA, ME 04330 Application pending G Gross receipts \$ 333,762 Name and address of principal officer H(a) Is this a group return for LESLIE HARROUN affiliates? ┌ Yes 🗸 No 295 WATER ST SUITE 9 AUGUSTA, ME 04330 **H(b)** Are all affiliates included?

☐ Yes

☐ No If "No," attach a list (see instructions) 501(c)(3) ✓ 501(c) (4) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status **H(c)** Group exemption number ► 8290 Website: ► WWW MLCV ORG L Year of formation 1998 **M** State of legal domicile ME Part I Summary 1 Briefly describe the organization's mission or most significant activities Maine Conservation Voters plays a critical role in turning public support for conservation into new laws to protect our air, land, water and wildlife As a result of successful campaign strategies, a focused policy agenda, and sharp accountability tools, we are building Maines environmental movement into a powerful force MCV programs include an annual Environmental Scorecard on Activities & Governance Maine legislators, a biennial Governor's Report Card, advocacy at the State House and voter engagement 2 Check this box 📂 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . . 19 4 Number of independent voting members of the governing body (Part VI, line 1b) . 19 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) . 5 6 6 **6** Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 34 . **Prior Year Current Year** 156,591 179,047 Contributions and grants (Part VIII, line 1h) . . . 0 9 Program service revenue (Part VIII, line 2g) . . . 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 172,480 143,787 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 329,071 322,834 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 Expenses 215,478 252,253 Professional fundraising fees (Part IX, column (A), line 11e) 0 16a Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright \underline{7,559}$ b Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 17 110,830 85,026 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 326,308 337,279 19 Revenue less expenses Subtract line 18 from line 12 2,763 -14,445 (Assets or defined by **Beginning of Current End of Year** 126,844 119,003 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 7,940 14,544 104,459 22 118,904 Net assets or fund balances Subtract line 21 from line 20 . Signature Block Part II 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 Signature of officer Date Sign Here MAUREEN DROUIN Executive Director Type or print name and title Preparer's signature Print/Type preparer's name Date PTIN Check I If Peter Montano P01200943 self-employed Paid Firm's name F Macpage LLC Firm's EIN 🕨 Preparer Firm's address > 30 Long Creek Dr Phone no (207) 774-5701 **Use Only**

South Portland, ME 04106 May the IRS discuss this return with the preparer shown above? (see instructions)

▼Yes

No

orm	1990 (2	2012)				Page 2
Par	t III	Statement of Program S Check if Schedule O contains				
1	Briefl	y describe the organization's m	ISSION			
vildli envii	ife Asa Tonmen	a result of successful campaigr	ı strategies, a focuse rce MCV programs ir	ed policy agenda, and s nclude an annual Envii	ation into new laws to protect ou sharp accountability tools, we a ronmental Scorecard on Maine l	re building Maines
2		ne organization undertake any s nor Form 990 or 990-EZ? .		ervices during the yea	r which were not listed on	┌ Yes ┌ No
	If "Ye	s," describe these new services	on Schedule O			
3	servic	ne organization cease conductin		nt changes in how it co	onducts, any program	┌ Yes ┌ No
4	Descr expen		service accomplishm 1(c)(4) organizations	s are required to repor	nree largest program services, a t the amount of grants and alloc	
4a	(Code	e) (Expenses s	\$ 247,296	ıncludıng grants of \$) (Revenue \$	322,834)
	a maj which plann well-f and a health reject sessic Score: copies for cit includ peopl organ the gi prosp more togeti	por effort to stop or minimize environm protects Maines special forests, farmling and regulatory tools of the Land Use functioning LURC, which has been in plunytime, Defeating takings legislation, which the protect of the protect o	sental rollbacks including ands and coastal fisheries se Regulation Commission lace for 40 years, develop which would undermine nour huge costs for taxpayed thave passed have been and reported the results for voted on bills to protect bers of other environment of October, MCV released it ment to Maines environm of our government and remental leadership as well is in three important areas ne people. Educating the aders, elected officials an antal issues Endorsing candi	Preventing the legislature is by creating new conservan, the body that oversees of ment in northern Maine we early every current or futures and create a legal and foverturned Holding Maines to the public in our signatust. Maines air, land, and wait tal organizations and elected to be be not all the signal to the impacts of its gulatory process MCV soud as Governor Paul LePage is conserving Maines nature public in the fall of 2012, Md philanthropists MCV also lidates for officeMCV endores.	es carefully crafted environmental prote from abolishing and defunding the Lantion and economic opportunities, Safegi development of Maines northern unorgould become unregulated and open to re law protecting Maines water, air, lan iscal morass for the state Similar taking es elected officials accountableAfter the re educational publication, Maine Environment of the distribution of th	d for Maines Future program, uarding important governance, anized territories. Without a anyone, anything, anywhere d and wildlife, and peoples gs bills have been broadly completion of the legislative ormental Scorecard. The les ession More than 10,000 version served as new tools and This educational report ormies, the health of Maine oad range of individuals and vassigned Governor LePage. Maines future economic le Environment, attended by ons to bring community leaders.
4b	(Code	e) (Expenses s	\$	including grants of \$) (Revenue \$)
	_					
4 c	(Code	e) (Expenses s	\$	ıncludıng grants of \$) (Revenue \$)
4d		er program services (Describe i enses \$	n Schedule O) including grants of	f ¢) (Revenue \$,
4e		l program service expenses ►	247,296) (IVCACIINE à	,
		. F S				

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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^{\bullet}	3	Yes	
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		No
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		No
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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		No
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	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	11c		No
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	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part χ^{*}	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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 and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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		No
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		No
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		No
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	Yes	
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
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		No
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</i> "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	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? <i>If</i> "Yes," complete Schedule L, Part I	25a		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, 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		No
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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
E	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 4			.,,
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
٦	Enter the number of employees reported on Form W-3, Transmittal of Wage and Fax Statements, filed for the calendar year ending with or within the year covered by this return			
	by this return	4		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
[Old the organization have unrelated business gross income of \$1,000 or more during the year?	3a		N
Ι	f "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b		N
c	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
	f "Yes," enter the name of the foreign country 🕨			
1	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
١	Nas the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
[Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
T	f "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
1		5c		L
	Does the organization have annual gross receipts that are normally greater than $$100,\!000$, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
	f "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	vere not tax deductible?	6b	Yes	
	Organizations that may receive deductible contributions under section 170(c). Old the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	f "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Old the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	ile Form 8282?	7c		
Ι	f "Yes," indicate the number of Forms 8282 filed during the year 7d			
		1		
	Old the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	70		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
	f the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	—		
	required?	7g		
	f the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
-	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did	 		
t	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		l N
,	Sponsoring organizations maintaining donor advised funds.			
	Old the organization make any taxable distributions under section 4966?	9a		l N
	Old the organization make a distribution to a donor, donor advisor, or related person?	9b		N
	Section 501(c)(7) organizations. Enter			'
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
(Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		N
	f "Yes," enter the amount of tax-exempt interest received or accrued during the /ear			
•	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	s the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O	13a		N
Е	Enter the amount of reserves the organization is required to maintain by the states n which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Oid the organization receive any payments for indoor tanning services during the tax year?	14a	İ	l N
	f "Yes" has it filed a Form 7.20 to report these payments? If "No " provide an explanation in Schedule 0	14a	 	· · ·

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI .															ে
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Se	ection A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	19)		
	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	19	,		
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management con	d by d	or under the direct	3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	rior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the oi			5		No
6	Did the organization have members or stockholders?	_		6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?	verto		7a		No
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?	ıl by) ı	members, stockholders			No
8	Did the organization contemporaneously document the meetings held or written active year by the following					
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
_	Is there any officer, director, trustee, or key employee listed in Part VII, Section A,				103	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule			´ 9		Νo
				201100	ua Cad	۵ ۱
Se	ection B. Policies (This Section B requests information about policies not			Reven		
	ection B. Policies (This Section B requests information about policies not	requi			ue Cod Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	requi	red by the Internal I	10a		
10a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization	requi	red by the Internal I	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, xempt purposes? erning body before filing	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it	requi	s of such chapters, xempt purposes? erning body before filing	10a 10b		No No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	requi	red by the Internal I	10a 10b		No No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, xempt purposes? erning body before filing	10a 10b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes	No No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	requi	sof such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes	No No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes	No No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	requi	sof such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	requi	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	required in the property of th	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No No No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►MAUREEN DROUIN 295 WATER STREET SUITE 9 AUGUSTA, ME (207)620-8811

Part VII 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 $\,\cdot\,\,$. $\,\cdot\,\,$.

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

- 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, or 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	Name and Title A verage hours per week (list any hours			one bot	not box h ar	chec (, unle n offic rustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) Kate Williams	1 00	, , , , , , , , , , , , , , , , , , ,						0	0	
Director	0 00	X						0	0	(
(2) Adam Lee	1 00	Х						0	0	(
Director	0 00								U	
(3) GEORGE LAPOINTE	1 00	х						0	0	(
Director	0 00			L					0	
(4) JIM WELLEHAN	1 00	×						0	0	(
Director	0 00							Ů	0	
(5) HODDY HILDRETH	1 00	×						0	0	(
Director	0 00							ŭ		
(6) HOWARD LAKE	2 00	x		×				0	0	(
Secretary	0 00			Ĺ						
(7) RALPH POPE	2 00	×		×				0	0	(
Treasurer	0 00	<u> </u>		Ë						
(8) CAROLINE PRYOR	2 00	×		×				0	0	(
Chairwoman	0 00				<u> </u>					
(9) JON LUND	1 00	×						0	0	(
Director	0 00	<u> </u>			<u> </u>					
(10) SHERRY HUBER	1 00	×						0	0	(
Director	0 00	<u> </u>				ļ				
(11) JEFF PIDOT	1 00	l x						0	0	(
Director	0 00									
(12) REBECCA LAMBERT	1 00	x						0	0	(
Director	0 00	<u> </u>								
(13) LESLIE HARROUN	2 00	x		×				0	0	
President	0 00			Ĺ						·
(14) PETER DIDISHEIM	1 00	×						0	0	(
Director	0 00							Ŭ.		
(15) KAREN HEROLD	1 00	l x						0	0	
Director	0 00							Ŭ.		
(16) JENN BURNS GRAY	1 00	×						0	0	
Director	0 00								0	
(17) BROWNIE CARSON	1 00	х						0	0	
Director	0 00	ı ^	l	I	I	I	l l	I "	ı	'

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	note boo	check x, unle n office rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estin amount comper from	nated of other nsation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organi and re organiz	elated
(18) DAN AMORY	1 00	х						0		0	0
Past President	0 00				_						
(19) ROGER BERLE	2 00	х		×				О		0	0
Vice President (20) MAUREEN DROUIN	0 00 20 00				\vdash						
Executive Direc	20 00			Х				63,920		0	8,399
Executive Direct	20 00										
					-						
					-						
				<u> </u>							
				 	-						
					_						
1b Sub-Total			-		_	<u> </u>	<u> </u>				
c Total from continuation sheets to Part	VII, Section A					►					
d Total (add lines 1b and 1c)								63,920			8,399
2 Total number of individuals (including b \$100,000 of reportable compensation f				ed a	bov	e) who	rec	eived more than			
3 Did the organization list any former offi	cer director or	truste	e ke	v ar	anlo	VAA 0	r hic	sheet compensate	d employee	Yes	No
on line 1a? If "Yes," complete Schedule J				. •	ں، <i>ہ</i> ے،	•				3	No
4 For any individual listed on line 1a, is the organization and related organizations (om the		
ındıvıdual		•		•	•	•	•		<u> </u>	4	No
5 Did any person listed on line 1a receive services rendered to the organization?										5	No
Section B. Independent Contracto)rc										
Complete this table for your five highes compensation from the organization. Re	t compensated										
	(A) usiness address	1011 101	tile	Care	iiua	ı year	CIIC		(B) on of services	Compe	:)
2 Total number of independent contractors	(including but i	not lım	ıted 1	to th	nose	listed	ab	ove) who received	more than		

Total revenue Part Part V	/	Statement of Revenue Check if Schedule O contains a response to any question i	n this Part VIII				
Description				(A)	(B) Related or exempt function	(C) Unrelated business	Revenue excluded from tax under sections 512,513,or
Security s s	1a	Federated campaigns 1a					
Security ant	ь	Membership dues 1b 1,760					
Security Gr.	c	Fundraising events 1c 20,250					
179,647 179,	ffs, ⊏A	a	Related organizations 1d				
179,647 179,	. Gi						
179,647 179,	ms, Sin						
179,647 179,	utic ier	f	similar amounts not included above				
179,647 179,	d ji	g					į į
Business Code	no. nd	h	·	179,047			
Total Add lines 2a-2f			P*				
	nue	2a	Business Code				1
	evel						
	ъ. Д	c					
	97 W C						
	35 =						
	<u> </u>	f	All other program service revenue				
	₽	_		2			
and other similar amounts)				0			
Second Continue			and other similar amounts)				
10 10 10 10 10 10 10 10		4					
The property of the property		5		0			
b less mind expenses c Rental income or (loss)		62					
C Rental income or (loss)		b					
d Net rental income or (loss) ▶ 0 (i) Securities (ii) Other (ii) Gioss amount from soles of assets other from soles of assets other with the soles of assets of the soles and sales expenses can be soles and soles expenses can be soles as and soles expenses can be soles as a sole of contributions reported on line 1 c). See Part IV, line 18 ▶ 0 See Part IV, line 18		_	·				
17a Gross amount from sales of assets other than inventory			or (loss)				
To assets other than inventory be less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)		d		0			
from sales of assets other than inventory be Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 88 Gross income from fundraising events (not including \$ 20,250 of contributions reported on line 1c) See Part IV, line 18		72					
than inventory bess cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)		′-	from sales of				
other basis and sales expenses c Gain or (loss) d Net gain or (loss)		١.	than inventory				
The state of the		"	other basis and				
Sa Gross income from fundraising events (not including \$ 20,250 of contributions reported on line 1c) See Part IV, line 18		c					
events (not including \$ 20,250 of contributions reported on line 1c) See Part IV, line 18		d	Net gain or (loss)	0			
9a Gross income from gaming activities See Part IV, line 19	anne	8a	events (not including \$20,250				
9a Gross income from gaming activities See Part IV, line 19	Rev		See Part IV, line 18				
9a Gross income from gaming activities See Part IV, line 19	her	ь	9,030				
See Part IV, line 19	ŏ			-1,278			-1,278
c Net income or (loss) from gaming activities		9a	See Part IV, line 19				
c Net income or (loss) from gaming activities		ь					
returns and allowances . a b Less cost of goods sold . b c Net income or (loss) from sales of inventory . Miscellaneous Revenue Business Code 11a REIMBURSEMENTS b c All other revenue e Total. Add lines 11a-11d				0			
b Less cost of goods sold b c Net income or (loss) from sales of inventory 0 Miscellaneous Revenue Business Code 11a REIMBURSEMENTS 145,065 b c d All other revenue		10a	returns and allowances .				
c Net income or (loss) from sales of inventory		b					
Miscellaneous Revenue Business Code 11a REIMBURSEMENTS b c d All other revenue e Total. Add lines 11a-11d		l		0			
b c d All other revenue e Total. Add lines 11a-11d							
d All other revenue		11a	REIMBURSEMENTS	145,065	145,065		
d All other revenue		ь					
e Total. Add lines 11a-11d		С					
12 Total revenue. See Instructions		d	All other revenue				
12 Total revenue. See Instructions		e	Total. Add lines 11a-11d ▶	145,065			
		12	Total revenue. See Instructions	322,834	145,065		-1,278

Part		Statement of Functional Expenses				
ectio	n 501	1(c)(3) and $501(c)(4)$ organizations must complete all columns All (a)	other organizat	ions must comp	olete column (A)	
	(Check if Schedule O contains a response to any question in this Par	tIX			<u> </u>
		ude amounts reported on lines 6b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1		ts and other assistance to governments and organizations e United States See Part IV, line 21	0			
2		ts and other assistance to individuals in the ed States See Part IV, line 22	0			
3	orgar	ts and other assistance to governments, nizations, and individuals outside the United es See Part IV, lines 15 and 16	0			
4	Bene	fits paid to or for members	0			
5		pensation of current officers, directors, trustees, and employees	72,319	57,855	14,464	
6	(as d	pensation not included above, to disqualified persons efined under section 4958(f)(1)) and persons ribed in section 4958(c)(3)(B)	0			
7	Othe	r salaries and wages	156,208	115,543	34,486	6,179
8		ion plan accruals and contributions (include section 401(k) 403(b) employer contributions)	0			
9		r employee benefits	23,726	18,981	4,745	
10	Payro	oll taxes	0			
11	Fees	for services (non-employees)				
а	Mana	agement	0			
ь		1	0			
С	Acco	ounting	17,360	13,888	3,472	
d	Lobb	ying	15,000		15,000	
e		essional fundraising services See Part IV, line 17	, 0		,	
f		stment management fees	0			
g	O the colun	r (If line 11g amount exceeds 10% of line 25, nn (A) amount, list line 11g expenses on				
		dule O)	1,366	633	159	574
12		ertising and promotion	0			
		e expenses	2,706	2,165	541	
14		mation technology	5,715	4,572	1,143	
15	-	Ities	0			
16		upancy	15,002	12,002	3,000	
17		el	4,956	3,948	987	21
18	state	nents of travel or entertainment expenses for any federal, e, or local public officials	0			
19		erences, conventions, and meetings	0			
20		rest	0			
21		nents to affiliates	0			
22	Depre	eciation, depletion, and amortization	341	273	68	
23	Insur	rance	1,963	1,570	393	
24	misc	r expenses Itemize expenses not covered above (List ellaneous expenses in line 24e If line 24e amount exceeds 10% e 25, column (A) amount, list line 24e expenses on Schedule O)				
а		CELLANEOUS	1,933	1,546	387	
b		& Subscriptions	2,327	1,842	460	25
С		age and Shipping	5,263	3,867	967	429
d		ing and Publications	8,951	7,056	1,764	131
		ther expenses	2,143	1,555	388	200
25		I functional expenses. Add lines 1 through 24e	337,279	247,296	82,424	7,559
26	Joint repor	costs. Complete this line only if the organization rted in column (B) joint costs from a combined ational campaign and fundraising solicitation. Check	331,213	241,230	32,724	7,539

Part X Balance Sheet

		Check if Schedule O contains a response to any question in this Pa	ort X			· ·
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		125,875	1	118,375
	2	Savings and temporary cash investments			2	0
	3	Pledges and grants receivable, net			3	0
	4	Accounts receivable, net			4	0
	5	Loans and other receivables from current and former officers, direct employees, and highest compensated employees. Complete Part Schedule L	ctors, trustees, key II of		_	
ets	6	Loans and other receivables from other disqualified persons (as de 4958(f)(1)), persons described in section 4958(c)(3)(B), and con and sponsoring organizations of section 501(c)(9) voluntary emplorganizations (see instructions) Complete Part II of Schedule L	tributing employers		6	0
Assets	7	Notes and loans receivable, net			7	0
A	8	Inventories for sale or use			8	0
	9				9	0
	10a	Prepaid expenses and deferred charges	10a 4,408		9	
	ь	Less accumulated depreciation	10b 4,268	481	10c	140
	11	Investments—publicly traded securities			11	0
	12	Investments—other securities See Part IV, line 11			12	0
	13	Investments—program-related See Part IV, line 11			13	0
	14	Intangible assets			14	0
	15	Other assets See Part IV, line 11		488	15	488
	16	Total assets. Add lines 1 through 15 (must equal line 34)		126,844	16	119,003
	17	Accounts payable and accrued expenses		7,940		14,544
	18	Grants payable		1,510	18	,
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedu			21	
ies	22				21	
Liabiliti	22	Loans and other payables to current and former officers, directors key employees, highest compensated employees, and disqualified			22	
"Ìa		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties .			24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part X D	of Schedule		25	
	26	Total liabilities. Add lines 17 through 25		7,940	26	14,544
es		Organizations that follow SFAS 117 (ASC 958), check here ▶ $\overline{\wp}$ a lines 27 through 29, and lines 33 and 34.	and complete			
and	27	Unrestricted net assets		118,904	27	96,954
B3	28	Temporarily restricted net assets			28	7,505
<u> </u>	29	Permanently restricted net assets			29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.	► ┌─ and			
	30	Capital stock or trust principal, or current funds			30	
ਬੁੱ <u></u>	31	Paid-in or capital surplus, or land, building or equipment fund			31	
Assets	32	Retained earnings, endowment, accumulated income, or other fund			32	
Net ,	33	Total net assets or fund balances		118,904	33	104,459
Z	34	Total liabilities and net assets/fund balances		126,844	34	119,003
	<u> </u>		<u> </u>	1		rm 990 (2012)

Par	TEXT Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)				
_	Total Tevende (mast equal) are viii, column (77), me 12)	1		3	322,834
2	Total expenses (must equal Part IX, column (A), line 25)				
_	Devenue less someres Cohleret les 2 from les 1	2			337,279
3	Revenue less expenses Subtract line 2 from line 1	3			-14,445
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
		4			18,904
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities				
		6			
7	Investment expenses	_			
	Division named admiret menta	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)				
		9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1	104,459
Par	t XII Financial Statements and Reporting				.,
	Check if Schedule O contains a response to any question in this Part XII				. Г
				Yes	No
	Accounting method used to prepare the Form 990				
1	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	▼ Separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

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DLN: 93493227026423

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Political Campaign and Lobbying Activities

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

◆ S If the	Section 501(c)(3) organizations th	nat have filed Form 5768 (election under nat have NOT filed Form 5768 (election s" to Form 990, Part IV, Line 5 (Pro	under section 50	1(h)) Complete Part II-B Do	not complete Part II-A
N a Fed	me of the organization eration of State Conservation Leagues ne Conservation Voters	inizations complete rait iii		Employer ident 01-0536008	tification number
Par	t I-A Complete if the or	ganization is exempt under s	section 501(c) or is a section 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaign activ	vities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	Complete if the or	ganization is exempt under s	section 501(c)(3)	
1	•	e tax incurred by the organization und	-	<u>/(∪/.</u> ►	\$
2		e tax incurred by organization manage		4955 >	\$
3	·	ection 4955 tax, did it file Form 472			Yes
4a	Was a correction made?		,		☐ Yes ☐ No
b	If "Yes," describe in Part IV				,,
		ganization is exempt under s	section 501(c), except section 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for sec	tion 527 exempt	function activities 🕨	\$
2	Enter the amount of the filing o exempt function activities	rganization's funds contributed to oth	ner organizations	for section 527 ►	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	nd on Form 1120)-POL, line 17b ►	¢
4	Did the filing organization file F	Form 1120-POL for this year?			→ Tyes F No
5	organization made payments famount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	amount paid fror rectly delivered t	n the filing organization's f o a separate political orga	unds Also enter the nization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has Notice filed Form 5768 (election under section 501(h)).	ОТ			7 0	ge S
	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	1)		(b)	
activ		Yes	No	1	Amoun	t
1	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					
а	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?					
е	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	O ther activities?					
j	Total Add lines 1c through 1i					
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?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 505(c)(6).	01(c))(5), (or s		
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 505(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
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).					
	Current year	2a				
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
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 political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference Explanation

DLN: 93493227026423

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

ntema	l Revenue Service	► Attach to For	Inspection					
Name of the organization Federation of State Conservation Leagues				Employer identific	ation number			
	ine Conservation Vo		01-0536008					
Pa		nizations Maintaining Donor Adv zation answered "Yes" to Form 990		unds or Accounts	s. Complete	e if the		
	organi.	Zation answered fes to Form 990	(a) Donor advised funds	(b) Funds and	other accoun	nts		
1	Total number a	at end of year	(a, bonor darroca rando	(5) Famas ama	other decoun			
2		tributions to (during year)						
3	Aggregate gran	nts from (during year)						
4	Aggregate valu	ue at end of year						
5	_	zation inform all donors and donor adviso organization's property, subject to the or	-	nor advised	┌ Yes	┌ No		
6	used only for c conferring imp	zation inform all grantees, donors, and d haritable purposes and not for the benef ermissible private benefit?	it of the donor or donor advisor, or for a	ny other purpose	,	┌ No		
Pa	rt III Conse	ervation Easements. Complete If	the organization answered "Yes" t	to Form 990, Part I	V, line 7.			
2	Preservation Preservation	conservation easements held by the org on of land for public use (e g , recreation of natural habitat on of open space s 2a through 2d if the organization held a	or education) Preservation of an Preservation of a G	certified historic struc	cture			
	easement on t	he last day of the tax year	,					
					e End of the Y	ear_		
a		of conservation easements		2a				
Ь	_	restricted by conservation easements		2b				
C		servation easements on a certified histo	· ·	2c				
d		iservation easements included in (c) acc ure listed in the National Register	juired after 8/1 //06, and not on a	2d				
3		servation easements modified, transferr	' ed, released, extinguished, or terminate'	ed by the organization	during			
		<u>.</u>		· -	_			
4	Number of state		ion accoment is located by					
		tes where property subject to conservat			_			
5	enforcement o	nization have a written policy regarding to fthe conservation easements it holds?		-	☐ Yes	┌ No		
6	Stan and volur	nteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments during the year	•			
	-							
7		enses incurred in monitoring, inspecting	, and enforcing conservation easements	s during the year				
8		 nservation easement reported on line 2(o 70(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 170(h)(4)(B)(ı)	┌ Yes	┌ No		
9	In Part XIII, d balance sheet,	lescribe how the organization reports coi , and include, if applicable, the text of th on's accounting for conservation easeme	e footnote to the organization's financial					
Par		izations Maintaining Collection ete if the organization answered "Y		or Other Similar	Assets.			
1a	works of art, hi	tion elected, as permitted under SFAS 1 istorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or research in further		С		
b	works of art, h	tion elected, as permitted under SFAS 1 istorical treasures, or other similar asse de the following amounts relating to thes	ts held for public exhibition, education,			E		
	(i) Revenues i	included in Form 990, Part VIII, line 1		► \$				
		luded in Form 990, Part X						
2	If the organiza	tion received or held works of art, histor ints required to be reported under SFAS		or financial gain, prov				
а	Revenues incli	uded in Form 990, Part VIII, line 1		► \$				

b Assets included in Form 990, Part X

►\$

Part	•••• Organizations Maintaining Co	llections of Art	<u>, His</u>	tori	<u>cal Tı</u>	<u>easur</u>	<u>es, or O</u>	<u>the</u>	<u>r Similar As</u>	sets	(con	tinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	neck	any of	the follo	wing that a	are a	significant use	ofits		
а	Public exhibition		d	Γ	Loan	or excha	ange progr	ams				
b	Scholarly research		e	Γ	Othe	-						
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	ollections and expla	ın hov	w the	y furthe	er the or	ganızatıon	's ex	empt purpose	ın		
5	During the year, did the organization solicit of	or receive donations	ofar	t, his	torıcal	treasur	es or othe	rsım	ılar			
	assets to be sold to raise funds rather than t									☐ Yes	;	□ No
Par	Part IV, line 9, or reported an an	nount on Form 99	0, Pa	art X	, line	21.				9 90,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	ediary	forc	ontribu	itions or	other ass	ets r	not	┌ Yes	s	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing t	able		_					
							-		Ar	nount		
С	Beginning balance						-	1c				
d	Additions during the year						_	1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?	•						☐ Yes	;	∏ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	n has	been pro	vided in P	art X	(111			Γ
Pai	rt V Endowment Funds. Complete											
	D	(a)Current year	(b)) Prior	year	b (c) Two	years back	(d) 	Three years back	(e) Fοι	ır yea	ars back
1a	Beginning of year balance							\vdash				
b	Contributions							┢			—	
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities											
f	and programs											
g	End of year balance							\vdash				
_	Provide the estimated percentage of the curi	ront year and halan	so /lun	1 .	colum	n (2)) h	old ac	<u> </u>				
2		rent year end barant	.e (IIII	ie ig	, coluii	III (a)) IIE	eiu as					
а	Board designated or quasi-endowment											
b	Permanent endowment 🕨											
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that	are hel	d and ad	ministered	for	the	V.	es	No No
	(i) unrelated organizations								3a	_	==	110
	(ii) related organizations								3a(\dashv	
b	If "Yes" to 3a(II), are the related organizatio								3	ь	Ī	
4	Describe in Part XIII the intended uses of th											
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	0, Pa				10.20	- 41		-	1\ D.	-1
	Description of property				a) Cost (asis (inve	or other estment)	(b) Cost or basis (otl		(c) Accumulat depreciation		1) Bo	ok value
1a	Land											
b	Buildings		•									
c	Leasehold improvements											
d	Equipment		•									
	Other							4,408	1	,268		140
Tota	l. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colu	ımn (B), lıne	10(c).)			🕨			140

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.	
(a) Description of security or category	(b)Book value	(c) Metho	d of valuation
(including name of security)		Cost or end-of	-year market value
(1)Financial derivatives			
(2)Closely-held equity interests Other			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See		<u> </u> 13	
(a) Description of investment type	(b) Book value		d of valuation
	(=, ===================================		-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III			
(a) Descrip			(b) Book value
-			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	7.)		
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of liability	(b) Book value		
Federal income taxes			
reactar meanic taxes			
-			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	İ		

j Par	Reconciliation of Revenue per Audited Financial Statements with Revenue per Retur	<u>n</u>
1	Total revenue, gains, and other support per audited financial statements	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains on investments	
b	Donated services and use of facilities	
c	Recoveries of prior year grants	
d	Other (Describe in Part XIII)	
e	Add lines 2a through 2d	
3	Subtract line 2e from line 1	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b	Other (Describe in Part XIII)	
C	Add lines 4a and 4b	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	
Part	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Ret	urn
1	Total expenses and losses per audited financial statements	
2	A mounts included on line 1 but not on Form 990, Part IX, line 25	
а	Donated services and use of facilities	
b	Prior year adjustments	
C	Other losses	
d	Other (Describe in Part XIII)	
e	Add lines 2a through 2d	
3	Subtract line 2e from line 1	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII)	
C	Add lines 4a and 4b	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	
Part	t XIII Supplemental Information	
Com	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines $1a$ and 4 , Part IV, lines	1b and 2b,

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier Return Reference Explanation

DLN: 93493227026423

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Open to Public Inspection

Employer identification number

	apply ent grants rants s, trustees services? Which the fundrais	ー Yes <mark>ア N</mark> o
a	ent grants rants s, trustees services? which the fundrais	165 / 140
	unt paid to (vi)	
or entity (fundraiser) custody or fundraise	ained by) (d) A mount paid to or retained by) organization
Yes No		
Total	it is exempt from	rogistration or
licensing	ic is exempt nom	registrativii vi
ME		

Sche	dule	G (Form 990 or 990-EZ) 2012				Page 2
Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribut			
			(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through
			REGISTRATIONS (event type)	(event type)	(total number)	col (c))
E.E.	1	Gross receipts	29,90	0		29,900
Revenue	2	Less Contributions	20,25	o		20,250
<u>~</u>	3	Gross income (line 1 minus line 2)	9,65	0		9,650
	4	Cash prizes				
မှာ	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ă	7	Food and beverages .				
Direct	8	Entertainment				
ā	9	Other direct expenses .	10,92	8		10,928
	10	Direct expense summary Add lin	es 4 through 9 ın columr	n (d)		(10,928)
	11	Net income summary Combine li	ne 3, column (d), and line	e 10		-1,278
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii	rganızatıon answered ne 6a.	"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				
þe	3	Non-cash prizes				
Direct Expenses	4	Rent/facility costs				
<u>ā</u>	5	Other direct expenses				
	6	Volunteer labor	┌ Yes	┌ Yes	┌ Yes ┌ No	
	7	Direct expense summary Add lines	s 2 through 5 in column ((d)		
	8	Net gaming income summary Com	bine lines 1 and 7 in col	ımn (d)	🛌	
9 a b	Ist	er the state(s) in which the organiza he organization licensed to operate No," explain	gaming activities in eac	h of these states?		「Yes 「No
10a b		re any of the organization's gaming Yes," explain				· · I Yes I No

Dues	s the organization operate gaming	activities with nonmembers? .			es	No		
12	Is the organization a grantor, be	neficiary or trustee of a trust or a	meml	ber of a partnership or other entity				
	formed to administer charitable	gamıng?			Г	Yes	┌ No	
13	Indicate the percentage of gami	ng activity operated in						
а	The organization's facility .			13a				
b	An outside facility							
14	Enter the name and address of t	he person who prepares the organ	ızatıo	on's gaming/special events books and records				
	Name 🟲							
	Address ►							
15a		ntract with a third party from whon			_	ı	_	
					J	Yes	No	
D				tion 🕨 \$ and the				
	amount of gaming revenue retained by the third party 🟲 \$							
С	If "Yes," enter name and addres	s of the third party						
	Name 🟲							
	Address ▶							
16	Gaming manager information							
	Name ▶							
	Gaming manager compensation	▶ \$						
	Description of services provided	I ▶						
	☐ Director/officer	F Employee		☐ Independent contractor				
17	Mandatory distributions							
а	Is the organization required und	er state law to make charitable dis	strıbu	itions from the gaming proceeds to				
	retain the state gaming license?				Γ	Yes	Γ_{No}	
b	Enter the amount of distributions	s required under state law distribu	ited to	o other exempt organizations or spent				
		t activities during the tax year 🟲						
Par	columns (III) and (v),		15b,	ovide the explanations required by Part , 15c, 16, and 17b, as applicable. Also c ons).				
	Identifier	Return Reference		Explanation				
	I, Line 2b - Fundraiser			Evening for the Environment				

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As Filed Data -

DLN: 93493227026423

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

Supplemental Information to Form 990 or 990-EZ

Open to Public Inspection

Name of the organization Federation of State Conservation Leagues Maine Conservation Voters

Employer identification number

01-0536008

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	Maine Conservation Voters would provide governing documents, policies and financial statements upon request after approval by the Board of Directors
Form 990, Part VI, Line 15a	Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	The board President conducts an annual review of the Executive Director with input from the board of directors. Compensation is based on this review and also uses comparative data from Maine Association of Nonprofit salary surveys and other such salary surveys.
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Maine Conservation Voters (MCV), as well as its officers, directors, delegates and committee members, shall scrupulously avoid any conflict between their respective personal, professional or business interests and the interests of the League in any and all actions taken by them on behalf of the MCV in their respective capacities if any officer, director, delegate or committee member shall have any direct or indirect interest in, or relationship with, any individual or organization which proposes to enter into any transaction with the League, including but not limited to transactions involving, Sale, purchase, lease or rental of any property or other asset, Employment or rendition of services, personal or otherwise, Award of any grant, contract or subcontract, and/or investment or deposit of any funds of the MCV, such person shall give notice of such interest or relationship, disclose all material facts of the transaction and such person's interest in the transaction, and shall thereafter refrain from discussing or voting on the particular transaction in which he has an interest, or otherwise attempting to exert any influence on the MCV or its components to affect a decision to participate or not participate in such transaction
Form 990, Part VI, Line 11b	Form 990, Part VI, Line 11b Form 990 Review Process	The 990 is reviewed by the Executive Director prior to signing and a copy is provided to the Board of Directors
Form 990, Part VI, Line 6	Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	Membership consists of 1 class of non-voting members. Members are individuals who have donated \$5.00 or more to the Maine Conservation Voters.

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

DLN: 93493227026423

OMB No 1545-0047

Open to Public

2012

Schedule R (Form 990) 2012

(f)

01-0536008

SCHEDULE R Related Organizations and Unrelated Partnerships (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

Department of the Treasury Internal Revenue Service

Federation of State Conservation Leagues

Name of the organization

Maine Conservation Voters

Inspection **Employer identification number**

Cat No 50135Y

(c)

► Attach to Form 990. ► See separate instructions.

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(b)

Name, address, and EIN (ii applicable) of dislegation entity	Philiary activity	or foreign country)	Total income	Eliu-ol-year assets		entity		
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the	zations (Complete if he tax year.)	the organization a	inswered "Yes"	to Form 990, P	art IV,	line 34 because i	t had o	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code secti	on Public charity (if section 501	status (c)(3))	(f) Direct controlling entity	Section (13) co	g) 1512(b ontrolle tity?
							Yes	No
(1) Maine Conservation Voters Action Fund	Political action committee	ME	527					No
295 Water Street 9						N/A		
Augusta, ME 04330 01-0536637								
	+							

(a) Name, address, and EIN o related organization	f	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percentae ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo zations treated a	ration s a cor	or Trust (poration or	Complete if t	he organı the tax ye	zatıon ar ar.)	swere	ed "Ye	s" to Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domıcıle (state or foreign country)		(d) Direct controlli entity	(e) Type of enti (C corp, S corp, or trust)	(f) Share of to income	total Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
		,,			,						Yes		No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Yes

$oldsymbol{1}$ During the tax year, did the organization engage in any of the following transactions with one or more relative to the second	elated organizations lis	sted in Parts II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No
b Gift, grant, or capital contribution to related organization(s)				1b		No
c Gift, grant, or capital contribution from related organization(s)				1 c		No
d Loans or loan guarantees to or for related organization(s)				1d		No
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				1g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1i		No
j Lease of facilities, equipment, or other assets to related organization(s)				1j		No
j Ecuse of Idemities, equipment, of other assets to related organization(s)						
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)				11		No
m Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
• Sharing of paid employees with related organization(s)				10		No
P Reimbursement paid to related organization(s) for expenses				1p		No
q Reimbursement paid by related organization(s) for expenses				1q	Yes	
r Other transfer of cash or property to related organization(s)				1r		No
s Other transfer of cash or property from related organization(s)				1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	vered relationships	and transaction thresholds			
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount in	volved	
1) Maine Conservation Voters Action Fund	q	18,310	time tracking			

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Part VI Unrelated Organizations Taxable as a Partnership (Complete if 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																			
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	(e) Are all partners section 501(c)(3) organizations?		section 501(c)(3) organizations?		section 501(c)(3) organizations?		section 501(c)(3) organizations?		(f) Share of	end-of-year	end-of-year allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No							
												1							

Part VII Supplemental Information

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

Identifier Return Reference Explanation

Additional Data Return to Form

Software ID: 12000229

Software Version: 2012v2.0

EIN: 01-0536008

Name: Federation of State Conservation Leagues

Maine Conservation Voters

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