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## Form **990-PF**Department of the Treasury

Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter Social Security numbers on this form as it may be made public.
▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2013

Open to Public Inspection

For calendar year 2013 or tax year beginning and ending Name of foundation A Employer identification number AMERICAN COUNCIL OF THE BLIND OF MAINE 01-6013214 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 110 MARGINAL WAY, PO BOX 9715-121 207-872-7594 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here PORTLAND, ME 04104 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here l Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization; X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is in a 60-month termination (from Part II, col (c), line 16) Other (specify) under section 507(b)(1)(B), check here 159790 . (Part I, column (d) must be on cash basis) ▶\$ **Analysis of Revenue and Expenses** Part I (d) Disbursements for charitable purposes (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books ıncome income Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 4602. 4602. Dividends and interest from securities STATEMENT 5a Gross rents b Net rental income or (loss) 102 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 46049. 102 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain 8 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 17523 11 Other income 0 17523.STATEMENT 1752<u>3</u> 22227 4704. 12 Total. Add lines 1 through 11 0 0 0 Compensation of officers, directors, trustees, etc 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees STMT 3 675. 675 0. 0. c Other professional fees STMT 900 0 900 0. CARACTED . 17 Interest 18 Taxes 19 ഗ Depreciation and depletion 20 Occupancy Travel, conferences, and meetings \8<del>:</del>3\27 . 0 8327. 21 0 22 Printing and publications 23 Other expenses 5830 0 931 4769. 24 Total operating and administrative expenses. Add lines 13 through 23 15732 0 2506 13096. 2250 25 Contributions, gifts, grants paid 2250. 26 Total expenses and disbursements. Add lines 24 and 25 17982 2506 15346. 27 Subtract line 26 from line 12: 8 Excess of revenue over expenses and disbursements 4245. 4704 **b** Net investment income (if negative, enter -0-) 15017. C Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

| Cash - non-mitrest-bearing   Galance Sheets   Santan statement in the presentation   Galance Sheets   Gala   | =        |             | 0-PF (2013) AMERICAN COUNCIL OF THE  | BLIND OF MAINE<br>Beginning of year   | End o          | 6013214 Page 2 |
|--|----------|-------------|--|---------------------------------------|----------------|----------------|
| 1 Cash - non-interest-bearing 2 Savings and derporary cash mestiments 3 Accounts receivable ▶ Less allowance for doubtful accounts ▶ 4 Plotiges receivable ▶ Less allowance for doubtful accounts ▶ 5 Grants receivable ▶ Less allowance for doubtful accounts ▶ 6 Receivables due from officers, disclors, trustees, and other disqualified persons 7 Otter were astransments Less allowance for doubtful accounts ▶ 8 Illowations for sell or use of the self-or use of the self-o  | LF       | <u>'art</u> | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only   |                                       |                |                |
| Semoga and temporary cash anvestments    Semoga and temporary cash anvestments   |          | 1           | Cash - non-interest-hearing  |                                       |                |                |
| A Pictoger receivable   Less allowance for doubtful accounts      Pictoger receivable  |          |             | -  |                                       |                |                |
| Less: allowance for doubtful accounts  |          | 1           |  | 40.                                   | 909.           |                |
| Padges receivable   Less allowance for doubtful accounts   |          | "           |  |                                       |                |                |
| Secretables due from officers, directors, trustees, and other disqualified persons   |          | ١.          | <del></del>  |                                       | <del></del> _  |                |
| Section of Control (Control    |          | 4           |  | i                                     |                |                |
| 8 Receivables due from officers, directors, trustees, and other disqualified persons 7 Uther neries of scale or use of scale or use of scale of the  |          | _           |  | <del></del>                           |                |                |
| STMT 8  10 and the state of th  |          | 5           |  |                                       |                | <del></del>    |
| Polar resus allowance for doubtful accounts  |          | 6           | Receivables due from officers, directors, trustees, and other  |                                       |                |                |
| Less: allowance for doubtful accounts  |          |             | disqualified persons   |                                       |                |                |
| Total latestic (describe   10   138546   139019   138546   1390    |          | 7           | Other notes and loans receivable   |                                       |                |                |
| Prepared expenses and deferred charges   |          |             | Less: allowance for doubtful accounts  |                                       |                |                |
| 10   10   10   10   10   10   10   10  | sts      | 8           | Inventories for sale or use  |                                       |                |                |
| 10   10   10   10   10   10   10   10  | SS       | 9           | Prepaid expenses and deferred charges  |                                       |                |                |
| 1 investments - corporate bonds   11 investments - unit outlings, and equipment basis   12 investments - other orthogogo closes   12 investments - other orthogogo closes   13 investments - other orthogogo closes   14 Land, buildings, and equipment basis   16 Total assets (clescribe   16 Total assets (clescribe   16 Total assets (clescribe   17 Total assets (clescribe   18 Grants payable and accrued expenses   18 Grants payable and accrued expenses   18 Grants payable and accrued expenses   18 Grants payable   19 Delibered revenue   10 Deliber    | ⋖        | 10a         | Investments - U.S. and state government obligations  |                                       |                |                |
| 11   levestments - tooler georgenous   |          | b           | Investments - corporate stock STMT 7   | 5403.                                 | 6130.          | 6130.          |
| 12   Investments - other   STMT 8  |          | C           | Investments - corporate bonds  |                                       |                | <del></del>    |
| Investments - other   STMT 8   |          | 11          | investments - land buildings, and equipment basis  |                                       |                |                |
| Investments - other   STMT 8   |          |             | Less accumulated depreciation  |                                       |                |                |
| 13 Investments - other   |          | 12          | ·  |                                       | -              |                |
| 14 Land, buildings, and equipment; basis   |          | 1           |  | 124638                                | 124927.        | 145698.        |
| Less secondulated deprecations    15 Other assests (describle >  |          |             |  | 1240301                               | 121927.        | 143030.        |
| 15 Other assets (describe ▶ 16 Total assets (to be completed by all filters - see the instructions. Also, see gage 1, item 1) 138546. 139019. 159790.  17 Accounts payable and accrued expenses 6 Grants payable 9 Ceans from orders, directors, trustees, and other desqualified persons 2 Mortgages and other notes payable 20 Ceans from orders, directors, trustees, and other desqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe ▶ 24 Unrestricted 24 Unrestricted 25 Temporarily restricted 25 Temporarily restricted 26 Permanently restricted 26 Permanently restricted 27 Total All abilities (and fines 27 through 28 and lines 30 and 31. 24 Unrestricted 28 Permanently restricted 29 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 31 38546. 139019.  1 Total liabilities and net assets/fund balances 31 38546. 139019.  Part III Analysis of Changes in Net Assets or Fund Balances 138546. 29 4245. 30 Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 6 5 3772. 5 Decreases not fundbalances 4 139019. 6 139019.   |          | ' '         |  |                                       |                |                |
| 16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, term 1)   |          | 15          |  | +                                     |                |                |
| mstructions. Also, see page 1, item 1)  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Under labilities (add lines 17 through 22)  21 Mortgages and other disqualified persons  22 Unter labilities (add lines 17 through 22)  23 Total liabilities (add lines 17 through 22)  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Temporarily restricted  28 Pardar nor capala supplies, or land, bidg., and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total net assets or fund balances  1 Total inet assets or fund balances at beginning of year - Part III, column (a), line 30 (rmust agree with end-of-year figure reported on prior year's return)  20 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  3 Experiments of fund balances at end of year (line 4 minus line 5) -Part III, column (b), line 30  6 1 339019.   |          | 1           | · · · · · · · · · · · · · · · · · · ·  |                                       |                |                |
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| 31 Total liabilities and net assets/fund balances   138546.   139019.  | Ö        |             | Part of the second of the seco |                                       |                |                |
| 31 Total liabilities and net assets/fund balances   138546.   139019.  | <u>a</u> | 25          | Temporarily restricted   |                                       |                |                |
| 31 Total liabilities and net assets/fund balances   138546.   139019.  | 8        | 26          |  |                                       |                |                |
| 31 Total liabilities and net assets/fund balances   138546.   139019.  | Į,       |             | Foundations that do not follow SFAS 117, check here  |                                       |                |                |
| 31 Total liabilities and net assets/fund balances   138546.   139019.  | Æ        |             | and complete lines 27 through 31.  |                                       |                |                |
| 31 Total liabilities and net assets/fund balances   138546.   139019.  | 8        | 27          | Capital stock, trust principal, or current funds   | 0.                                    | 0.             |                |
| 31 Total liabilities and net assets/fund balances   138546.   139019.  | set      | 28          | Paid-in or capital surplus, or land, bldg., and equipment fund   | 0.                                    | 0.             |                |
| 31 Total liabilities and net assets/fund balances   138546.   139019.  | As       | 29          | Retained earnings, accumulated income, endowment, or other funds   | 138546.                               | 139019.        |                |
| 31 Total liabilities and net assets/fund balances   138546.   139019.  | É        | 30          |  |                                       |                |                |
| Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 Decreases not included in line 2 (itemize) ▶  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  1 138546.  2 4245.  3 0.  4 142791.  5 3772.  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  6 139019.  | _        |             |  |                                       |                |                |
| Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 Decreases not included in line 2 (itemize) ▶  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  1 138546.  2 4245.  3 0.  4 142791.  5 3772.  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  6 139019.  |          | 31          | Total liabilities and net assets/fund balances   | 138546.                               | 139019.        |                |
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| (must agree with end-of-year figure reported on prior year's return)1138546.2Enter amount from Part I, line 27a24245.3Other increases not included in line 2 (itemize)30.4Add lines 1, 2, and 34142791.5Decreases not included in line 2 (itemize)SEE STATEMENT 653772.6Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 306139019.  | <u> </u> | aπ          | Analysis of Changes in Net Assets of Fund Ba   | alances                               |                |                |
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| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 139019.  |          |             |  | SEE STAT                              |                |                |
|  |          |             | · · · · · · · · · · · · · · · · · · ·  |                                       |                |                |
|  | _        |             |  |                                       |                |                |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions.

|    | n 990-PF (2013) AMERICAN COUNCIL OF THE BLIND OF MAINE   |          | 601.   |        |       | Page 4         |
|----|--|----------|--|--------|-------|----------------|
|    | art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or  | 1948     | - see  | ınstrı | ictio | ns)            |
| 18 | a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.                                |          |  |        |       |                |
|    | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)  | }        | ļ  |        |       |                |
| t  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%                                   | 1        |  |        |       | <u>47.</u>     |
|    | of Part I, line 27b  |          |  |        |       |                |
| 0  | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).                 | ł        | i  |        |       |                |
| 2  | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                | 2        |  |        |       | 0.             |
| 3  | Add lines 1 and 2  | 3        |  |        |       | 47.            |
| 4  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                              | 4        |  |        |       | 0.             |
| 5  | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  | 5        |  |        | -     | 47.            |
| 6  | Credits/Payments:  |          |  |        |       |                |
| a  | 2013 estimated tax payments and 2012 overpayment credited to 2013  | }        |  |        |       |                |
|    | Exempt foreign organizations - tax withheld at source 6b   | 1        |  |        |       |                |
|    | Tax paid with application for extension of time to file (Form 8868)  |          |  |        |       |                |
|    | Backup withholding erroneously withheld  6d  | 1        |  |        |       |                |
|    | Total credits and payments. Add lines 6a through 6d  | 7        |  |        |       | 0.             |
| 8  | Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached  | 8        | <u> </u>                                     |        |       |                |
|    | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  | 9        |  |        | -     | <del>47.</del> |
|    | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  | 10       |  |        |       | <del>4/•</del> |
|    | Enter the amount of line 10 to be: Credited to 2014 estimated tax  | 11       | <u> </u>                                     |        |       |                |
|    | art VII-A Statements Regarding Activities  |          | <u>.                                    </u> | -      |       |                |
|    | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven | n in     |  | T      | Yes   | No             |
| 10 | any political campaign?  | 5 111    |  | 1a     |       | X              |
| h  | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition | 2/3      |  | 1b     |       | X              |
|    | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish                  | •        |  | 10     |       |                |
|    |  | ea or    |  |        |       |                |
|    | distributed by the foundation in connection with the activities  |          |  |        |       | v              |
|    | Did the foundation file Form 1120-POL for this year?   |          |  | 1c     |       | <u>X</u>       |
| 0  | I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:                                     |          |  |        |       |                |
|    | (1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.   | <u>-</u> |  |        |       |                |
| е  | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation              |          |  |        |       |                |
| _  | managers. ► \$0.   |          |  |        |       |                |
| 2  | Has the foundation engaged in any activities that have not previously been reported to the IRS?  |          |  | 2      |       | <u> </u>       |
|    | If "Yes," attach a detailed description of the activities.   |          |  |        |       |                |
| 3  | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,         | or       |  |        |       |                |
|    | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes   |          |  | 3      |       | X              |
|    | Did the foundation have unrelated business gross income of \$1,000 or more during the year?  |          |  | 4a     |       | _X_            |
|    | of "Yes," has it filed a tax return on Form 990-T for this year?   | N        | /A   | 4b     | ļi    |                |
| 5  | Was there a liquidation, termination, dissolution, or substantial contraction during the year?   |          |  | 5      |       | _X_            |
|    | If "Yes," attach the statement required by General Instruction T.  |          |  |        |       |                |
| 6  | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  |          |  |        |       |                |
|    | By language in the governing instrument, or  |          |  |        |       |                |
|    | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state       | e law    |  |        |       |                |
|    | remain in the governing instrument?  |          |  | 6      | X     |                |
| 7  | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part X         | /        |  | 7      | X     |                |
|    |  |          |  |        |       |                |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions)                                       |          |  | -      |       |                |
|    | ME   |          |  |        |       |                |
| b  | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)              |          |  |        |       |                |
|    | of each state as required by General Instruction G? If "No," attach explanation  |          |  | 8b     | X     |                |
| 9  | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call      | endar    |  |        |       |                |
|    | year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV                             |          |  | 9      |       | X              |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses       |          |  | 10     |       | X              |

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|----|--|--------------|-------------|--------|
| Pa | rt VII-A Statements Regarding Activities (continued)   |              |             |        |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of                     |              |             |        |
|    | section 512(b)(13)? If "Yes," attach schedule (see instructions)   | _11          |             | X      |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? |              |             |        |
|    | If "Yes," attach statement (see instructions)  | 12           |             | X      |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                        | 13           | Х           |        |
|    | Website address ► N/A  |              |             |        |
| 14 | The books are in care of ▶ CHERYL PEABODY, TREASURER  Telephone no. ▶ 207-87   | 2-7          | 5 <b>94</b> |        |
|    | Located at ▶ 6 LEE ST, WINSLOW, ME ZIP+4 ▶04   | 901          | -           |        |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here  |              | <b></b>     |        |
|    | and enter the amount of tax-exempt interest received or accrued during the year  | N,           | /A          |        |
| 16 | At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,               |              | Yes         | No     |
|    | securities, or other financial account in a foreign country?   | 16           |             | X      |
|    | See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign                 | -            |             |        |
|    | country  |              |             |        |
| Pa | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required   |              | •           |        |
|    | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  |              | Yes         | No     |
| 1a | During the year did the foundation (either directly or indirectly):  |              |             |        |
|    | (1) Engage in the sale or exchange, or leasing of property with a disqualified person?   |              |             |        |
|    | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  |              | - 1         |        |
|    | a disqualified person?   |              |             |        |
|    | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   |              |             |        |
|    | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   |              |             |        |
|    | (5) Transfer any income or assets to a disqualified person (or make any of either available  |              |             |        |
|    | for the benefit or use of a disqualified person)?  |              |             |        |
|    | (6) Agree to pay money or property to a government official? (Exception. Check "No"  |              |             |        |
|    | If the foundation agreed to make a grant to or to employ the official for a period after   |              |             |        |
|    | termination of government service, if terminating within 90 days.)   |              |             |        |
| ь  | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations                     |              |             |        |
|    | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A   | 1b           |             |        |
|    | Organizations relying on a current notice regarding disaster assistance check here   |              |             |        |
| C  | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected            |              | j           |        |
| _  | before the first day of the tax year beginning in 2013?  | 10           |             | X      |
| 2  | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation           |              |             |        |
|    | defined in section 4942(j)(3) or 4942(j)(5)):  |              |             |        |
| а  | At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning       |              |             |        |
|    | before 2013?   |              |             |        |
|    | If "Yes," list the years   |              |             |        |
| b  | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect      |              |             |        |
|    | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach       |              |             |        |
|    | statement - see instructions.)   | 2b           | 1           |        |
| C  | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.                           |              |             |        |
|    | <b>&gt;</b>  |              |             |        |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time                                  |              |             |        |
|    | during the year?   |              |             |        |
| h  | If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after     |              |             |        |
| •  | May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose       |              |             |        |
|    | of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,         |              |             |        |
|    | Form 4720, to determine if the foundation had excess business holdings in 2013.)  N/A  | 3b           |             |        |
| 42 | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                            | 4a           |             | X      |
|    | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that     | <b>├</b> **- |             |        |
| ,  | had not been removed from jeopardy before the first day of the tax year beginning in 2013?   | 4b           |             | X      |
|    | 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2  |              |             |        |

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| Part VII-B. Statements Regarding Activities for Which                                      | Form 4/20 May Be I                            | Required (contin                      | ued)   |  |                      |
| 5a During the year did the foundation pay or incur any amount to:                          |   |                                       |  | - 1  |                      |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (sectio             | n 4945(e))?                                   | Yo                                    | s X No   |  |                      |
| (2) Influence the outcome of any specific public election (see section 4955); of           | or to carry on, directly or indir             |                                       |  |  |                      |
| any voter registration drive?  |   |                                       | s X No   | İ  |                      |
| (3) Provide a grant to an individual for travel, study, or other similar purposes          | ?   | Y(                                    | es [X] No  | - 1  | ĺ                    |
| (4) Provide a grant to an organization other than a charitable, etc., organization         | n described in section                        |                                       |  |  |                      |
| 509(a)(1), (2), or (3), or section 4940(d)(2)?   |   | Ye                                    | s X No   |  |                      |
| (5) Provide for any purpose other than religious, charitable, scientific, literary,        | or educational purposes, or                   |                                       |  |  |                      |
| the prevention of cruelty to children or animals?  |   | Ye                                    | es 🗶 No  |  |                      |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un      | der the exceptions described                  | ın Regulations                        |  |  |                      |
| section 53.4945 or in a current notice regarding disaster assistance (see instru           | ıctıons)?                                     |                                       | N/A  | 5b   |                      |
| Organizations relying on a current notice regarding disaster assistance check h            | nere  |                                       |  |  |                      |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f          | rom the tax because it mainta                 | ined                                  |  |  |                      |
| expenditure responsibility for the grant?  | N   | I/A 🔲 Yo                              | es 🔲 No  | - 1  |                      |
| If "Yes," attach the statement required by Regulations section 53.494                      | 5-5(d).                                       |                                       |  |  |                      |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to      | pay premiums on                               |                                       |  |  |                      |
| a personal benefit contract?   |   |                                       | es X No  |  |                      |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p | personal benefit contract?                    |                                       |  | 6b   | X                    |
| If "Yes" to 6b, file Form 8870.  |   |                                       |  |  |                      |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s       | shelter transaction?                          | ☐ Ye                                  | es X No  |  |                      |
| b If "Yes," did the foundation receive any proceeds or have any net income attribi         |   | <del></del> ··                        | . –  | 7b   |                      |
| Part VIII Information About Officers, Directors, Trust                                     |   | nagers, Highly                        |  |  |                      |
| Paid Employees, and Contractors  | ,   |                                       | •  |  |                      |
| List all officers, directors, trustees, foundation managers and their                      | compensation.                                 | <del></del>                           |  |  |                      |
|  | (b) Title, and average hours per week devoted | (c) Compensation                      | (d) Contributions to<br>employee benefit plans<br>and deferred<br>compensation | (e) E  | xpense<br>unt, other |
| (a) Name and address   | hours per week devoted to position            | (If not paid,<br>enter -0-)           | and deferred<br>compensation   | accou  | unt, other<br>wances |
|  |   | 1                                     | Companies  |  |                      |
|  | 1   |                                       |  |  |                      |
| SEE STATEMENT 9  | 1   | 0.                                    | 0.   |  | 0.                   |
|  |   |                                       | <u> </u>   | 1  |                      |
|  |   |                                       |  | 1  |                      |
|  | 1   |                                       |  | -  |                      |
|  |   |                                       |  |  |                      |
|  | 1   |                                       |  |  |                      |
|  | 1   |                                       |  |  |                      |
|  |   |                                       |  | <del>                                     </del> |                      |
|  | 1   |                                       |  |  |                      |
|  |   |                                       |  | 1  |                      |
| Compensation of five highest-paid employees (other than those inc                          | luded on line 1). If none                     | enter "NONE "                         |  |  | <del></del>          |
| . Compensation of the highest paid employees (effect than those the                        | (b) Title, and average                        | I I I I I I I I I I I I I I I I I I I | (d) Contributions to   | (e) F  | xpense               |
| (a) Name and address of each employee paid more than \$50,000                              | hours per week                                | (c) Compensation                      | (d) Contributions to<br>employee benefit plans<br>and deferred                 | accou  | ınt, other           |
| MONTE  | devoted to position                           |                                       | compensation   | allo   | wances               |
| NONE   |   |                                       |  |  |                      |
|  |   |                                       |  | ļ  |                      |
|  | 1   |                                       |  |  |                      |
|  |   |                                       |  | <u> </u>   |                      |
|  |   |                                       |  |  |                      |
|  |   |                                       |  | Ь—   |                      |
|  |   |                                       |  |  |                      |
|  |   |                                       |  |  |                      |
|  |   |                                       |  |  | . –                  |
|  |   |                                       |  |  |                      |
| otal number of other employees paid over \$50,000  |   |                                       | <b>▶</b>   | _  | 0                    |
|  |   |                                       | Form   | 990-P  | <b>F</b> (2013)      |

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|---|--------------------------------------|-----------|----------|
| Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)  | ion Managers, Highly                 |           |          |
| 3 Five highest-paid independent contractors for professional services. If none, enter '   | 'NONE."                              |           |          |
| (a) Name and address of each person paid more than \$50,000   | (b) Type of service                  | (c) Comp  | ensation |
| NONE  |                                      |           |          |
|   |                                      |           |          |
|   |                                      |           |          |
|   |                                      |           |          |
| Total number of others receiving over \$50,000 for professional services  |                                      | <u>▶ </u> | 0        |
| Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produt | al information such as the ced, etc. | Expenses  |          |
| SEE STATEMENT 10  |                                      | ]<br>  18 | 066.     |
| 2   |                                      |           |          |
| 3   |                                      |           |          |
| 4   |                                      |           |          |
| Part IX-B Summary of Program-Related Investments  |                                      |           |          |
| Describe the two largest program-related investments made by the foundation during the tax year on lin  | ies i and 2.                         | Amount    |          |
| 1 <u>N/A</u>  |                                      |           |          |
| 2   |                                      |           |          |
| All other program-related investments. See instructions.  3   |                                      |           |          |
| Total. Add lines 1 through 3  |                                      |           | 0.       |

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Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Qualifying distributions, Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

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6

15346

Part.XIII Undistributed Income (see instructions)

|  | (a)<br>Corpus | (b)<br>Years prior to 2012 | (c)<br>2012 | (d)<br>2013 |
|--|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2013 from Part XI,  | · —           | ·                          |             |             |
| line 7   |               |                            |             | 7107.       |
| 2 Undistributed income, if any, as of the end of 2013  | ·             |                            |             |             |
| a Enter amount for 2012 only   |               |                            | 1194.       |             |
| <b>b</b> Total for prior years:  |               |                            |             |             |
| , ,  |               | 0.                         |             |             |
| 3 Excess distributions carryover, if any, to 2013:   | •             |                            |             | <u> </u>    |
| a From 2008  |               |                            |             |             |
| <b>b</b> From 2009   |               |                            |             |             |
| c From 2010  |               |                            |             |             |
| d From 2011  |               |                            |             |             |
| e From 2012  |               |                            |             |             |
| f Total of lines 3a through e  | 0.            |                            |             |             |
| 4 Qualifying distributions for 2013 from   |               |                            |             |             |
| Part XII, line 4: ► \$ 15346.  |               |                            |             |             |
| a Applied to 2012, but not more than line 2a   |               |                            | 1194.       |             |
| <b>b</b> Applied to undistributed income of prior  |               |                            |             |             |
| years (Election required - see instructions)   |               | 0.                         |             |             |
| c Treated as distributions out of corpus   |               |                            |             |             |
| (Election required - see instructions)   | 0.            |                            |             |             |
| d Applied to 2013 distributable amount   | ·             |                            |             | 7107.       |
| e Remaining amount distributed out of corpus   | 7045.         |                            |             |             |
| 5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))   | 0.            |                            |             | 0.          |
| 6 Enter the net total of each column as indicated below:   | •             |                            |             |             |
| & Corpus Add lines 3f, 4c, and 4e Subtract line 5  | 7045.         |                            |             |             |
| <b>b</b> Prior years' undistributed income. Subtract   |               |                            |             |             |
| line 4b from line 2b   |               | 0.                         |             |             |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed |               | 0.                         |             |             |
| d Subtract line 6c from line 6b. Taxable   |               |                            |             |             |
| amount - see instructions  |               | 0.                         |             |             |
| e Undistributed income for 2012. Subtract line   |               |                            |             |             |
| 4a from line 2a. Taxable amount - see instr.   |               |                            | 0.          |             |
| f Undistributed income for 2013. Subtract  |               |                            |             |             |
| lines 4d and 5 from line 1. This amount must   |               |                            |             |             |
| be distributed in 2014   |               |                            |             | 0.          |
| 7 Amounts treated as distributions out of  |               |                            |             |             |
| corpus to satisfy requirements imposed by  |               |                            |             |             |
| section 170(b)(1)(F) or 4942(g)(3)   | 0.            |                            |             | <del></del> |
| 8 Excess distributions carryover from 2008   |               |                            |             |             |
| not applied on line 5 or line 7  | 0.            |                            | <u> </u>    | . <u></u>   |
| 9 Excess distributions carryover to 2014.  |               |                            |             |             |
| Subtract lines 7 and 8 from line 6a  | 7045.         |                            |             |             |
| 0 Analysis of line 9:  |               |                            |             |             |
| a Excess from 2009   |               |                            |             |             |
| <b>b</b> Excess from 2010  |               |                            |             |             |
| c Excess from 2011   |               |                            |             |             |
| d Excess from 2012   |               |                            |             |             |
| e Excess from 2013 7045.   |               |                            |             |             |

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|--|-----------------------------|------------------------------|---------------------------|--|--------------------|
| Part XIV Private Operating F   |                             |                              | -A, question 9)           | <u> N/A</u>                                      |                    |
| 1 a If the foundation has received a ruling                                |                             |                              |                           |  |                    |
| foundation, and the ruling is effective for                                |                             | _                            | ▶ └                       | <u> </u>   |                    |
| <b>b</b> Check box to indicate whether the foun                            |                             | ng foundation described i    |                           | 4942(j)(3) or L 49                               | )42(j)( <u>5</u> ) |
| 2 a Enter the lesser of the adjusted net                                   | Tax year                    | (b) 0010                     | Prior 3 years             | 1 (4) 2010                                       | /-> T-4-1          |
| income from Part I or the minimum  | (a) 2013                    | (b) 2012                     | (c) 2011                  | (d) 2010   | (e) Total          |
| investment return from Part X for  |                             |                              |                           |  |                    |
| each year listed   | -                           |                              | -                         | _  |                    |
| <b>b</b> 85% of line 2a  |                             |                              |                           | _  |                    |
| c Qualifying distributions from Part XII,                                  |                             |                              |                           |  |                    |
| line 4 for each year listed  |                             |                              |                           | <del>                                     </del> |                    |
| d Amounts included in line 2c not  |                             |                              |                           |  |                    |
| used directly for active conduct of  |                             |                              |                           |  |                    |
| exempt activities  |                             |                              | ļ                         | ļ  |                    |
| e Qualifying distributions made directly                                   |                             |                              |                           |  |                    |
| for active conduct of exempt activities.                                   |                             |                              |                           |  |                    |
| Subtract line 2d from line 2c<br>3 Complete 3a, b, or c for the            |                             |                              |                           | <del> </del>                                     |                    |
| 3 Complete 3a, b, or c for the alternative test relied upon:               |                             |                              |                           |  |                    |
| a "Assets" alternative test - enter:                                       |                             |                              |                           |  |                    |
| (1) Value of all assets  |                             |                              |                           |  | _                  |
| (2) Value of assets qualifying   |                             |                              |                           |  |                    |
| under section 4942(j)(3)(B)(i)   |                             |                              |                           |  |                    |
| b "Endowment" alternative test - enter<br>2/3 of minimum investment return |                             |                              |                           |  |                    |
| shown in Part X, line 6 for each year                                      |                             |                              |                           |  |                    |
| listed   |                             |                              |                           |  |                    |
| c "Support" alternative test - enter:                                      |                             |                              |                           |  |                    |
| (1) Total support other than gross   |                             |                              |                           |  |                    |
| investment income (interest,<br>dividends, rents, payments on              |                             |                              | •                         |  |                    |
| securities loans (section  |                             |                              |                           |  |                    |
| 512(a)(5)), or royalties)  |                             |                              |                           |  |                    |
| (2) Support from general public  |                             |                              |                           |  |                    |
| and 5 or more exempt organizations as provided in                          |                             |                              |                           |  |                    |
| section 4942(j)(3)(B)(iii)   |                             |                              |                           |  |                    |
| (3) Largest amount of support from   |                             |                              |                           |  |                    |
| an exempt organization   |                             |                              |                           |  |                    |
| (4) Gross investment income  |                             |                              |                           |  |                    |
| Part XV Supplementary Info   |                             |                              | if the foundation         | had \$5,000 or mo                                | ore in assets      |
| at any time during   | the year-see instr          | ructions.)                   |                           |  |                    |
| 1 Information Regarding Foundation   | on Managers:                |                              |                           |  |                    |
| a List any managers of the foundation wi                                   |                             |                              | ributions received by the | foundation before the clos                       | se of any tax      |
| year (but only if they have contributed i                                  | more than \$5,000). (See s  | ection 507(d)(2).)           |                           |  |                    |
| NONE   |                             |                              |                           |  |                    |
| <b>b</b> List any managers of the foundation wi                            | no own 10% or more of th    | e stock of a corporation (   | or an equally large porti | on of the ownership of a pa                      | artnership or      |
| other entity) of which the foundation ha                                   | as a 10% or greater interes | st.                          |                           |  |                    |
| NONE   |                             |                              |                           |  |                    |
| 2 Information Regarding Contribut  | tion, Grant, Gift, Loan,    | Scholarship, etc., Pr        | ograms:                   | <del> </del>                                     |                    |
| Check here 🕨 🗶 if the foundation   | only makes contributions t  | to preselected charitable (  | organizations and does i  | not accept unsolicited requ                      | ests for funds. If |
| the foundation makes gifts, grants, etc.                                   | (see instructions) to indiv | riduals or organizations u   | nder other conditions, c  | omplete items 2a, b, c, and                      | l d.               |
| a The name, address, and telephone num                                     | nber or e-mail address of t | he person to whom appli      | cations should be addre   | ssed:  |                    |
|  |                             |                              |                           |  |                    |
|  |                             |                              |                           |  |                    |
| <b>b</b> The form in which applications should                             | be submitted and informat   | tion and materials they sh   | ould include:             |  | <u> </u>           |
|  |                             |                              |                           |  |                    |
| c Any submission deadlines:  |                             |                              |                           |  |                    |
|  |                             |                              | <del></del> -             |  |                    |
| d Any restrictions or limitations on award                                 | ls, such as by geographica  | al areas, charitable fields, | kinds of institutions, or | other factors:                                   |                    |
|  |                             |                              |                           |  |                    |

Total

Form 990-PF (2013) AMERICAN COUNCIL OF THE BLIND OF MAINE 01-6013214 Page 12 Part XVI-A **Analysis of Income-Producing Activities** Unrelated business income Excluded by section 512, 513, or 514 Enter gross amounts unless otherwise indicated. (e) (C) Exclu-sion code (a) Business (b) (d) Related or exempt **Amount Amount** function income 1 Program service revenue: code a MISCELLANEOUS INCOME 16413. **b** CONFERENCE INCOME 730. c MEMBERSHIP DUES 380. g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 14 4602. 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 102. 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue: 0. 4602. 17625 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 13 (See worksheet in line 13 instructions to verify calculations. Dort VV/ R Polationship of Activities to the Accomplishment of Evernt

| Part A        | Melationship of Activities to the Accomplishment of Exempt Purposes   |
|---------------|---|
| Line No.<br>▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). |
| 2             | CONFERENCES BENEFITING 100 PLUS VISUALLY IMPAIRED INDIVIDUALS.  |
|               | MISCELLANEOUS EXPENSES RELATED TO BLIND ADVOCACY PROGRAMS   |
| 3             | MEMBERSHIP DUES RECEIVED  |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
| _             |   |
| _             |   |
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|               |   |
|               |   |
| _             |   |
|               |   |
|               |   |

|                   | (a) Name of organization   | (b) Type of organization |                  | (c) Description of relationship |   |  |
|-------------------|--|--------------------------|------------------|---------------------------------|---|--|
|                   | N/A  |                          |                  |                                 | <u> </u>  |  |
|                   |  |                          |                  |                                 |   |  |
|                   |  |                          |                  |                                 | <u>-</u>  |  |
|                   |  |                          |                  |                                 | _   |  |
|                   |  |                          |                  |                                 |   |  |
| Sign Here         | der penalties of perjury, I declare that I have examined this return, including delief, it is true, correct, and complete. Declaration of preparer (other than the control of the control of true of officer or trustee. |                          |                  |                                 | May the IRS discuss this return with the preparer shown below (see instr.)?  X Yes No |  |
| Paid              | Print/Type preparer's name P JAMES NICHOLSON, CPA  | ignature ///             | Date 0-6-/-05/14 | Check if self- employed         | PTIN P00482325  |  |
| Prepare<br>Use On |  | & COMPANY                |                  | Firm's EIN ► 0                  | 1-0511973   |  |
|                   | Firm's address ► 76 SILVER STREET WATERVILLE, ME 04  | 901                      |                  | Phone no. 20                    | 7-872-7077  |  |
|                   |  |                          |                  |                                 | Form <b>990-PF</b> (2013)   |  |

| FORM 990-PF  | DIVIDENDS       | AND INTER                    | REST  | FROM SECU                     | RITIES S                          | TATEMENT 1                    |
|--|-----------------|------------------------------|-------|-------------------------------|-----------------------------------|-------------------------------|
| SOURCE   | GROSS<br>AMOUNT | CAPITAI<br>GAINS<br>DIVIDENI |       | (A)<br>REVENUE<br>PER BOOKS   |                                   |                               |
| AMERIPRISE<br>FINANCIAL                                      | 4602.           |                              | 0.    | 4602                          | . 4602.                           | 4602.                         |
| TO PART I, LINE 4  | 4602.           | :                            | 0.    | 4602                          | 4602.                             | 4602.                         |
| FORM 990-PF  |                 | OTHER :                      | INCO: | ME                            | S                                 | TATEMENT 2                    |
| DESCRIPTION  |                 |                              | RE    |                               | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
| MISCELLANEOUS INCOME<br>CONFERENCE INCOME<br>MEMBERSHIP DUES | E               | _                            |       | 16413.<br>730.<br>380.        | 0.<br>0.<br>0.                    | 16413.<br>730.<br>380.        |
| TOTAL TO FORM 990-P  | F, PART I,      | LINE 11 =                    |       | 17523.                        | 0.                                | 17523.                        |
| FORM 990-PF  |                 | ACCOUNT                      | ING   | FEES                          | S                                 | TATEMENT 3                    |
| DESCRIPTION  |                 | (A)<br>EXPENSES<br>PER BOOKS |       | (B)<br>T INVEST-<br>NT INCOME | (C)<br>ADJUSTED<br>NET INCOME     | (D)<br>CHARITABLE<br>PURPOSES |
| ACCOUNTING   |                 | 675                          |       | 0.                            | 675.                              | 0.                            |
| TO FORM 990-PF, PG   | <br>1, LN 16B   | 675                          |       | 0.                            | 675.                              | 0.                            |

| FORM 990-PF  | OTHER PROFES                         | SIONAL FEES                       | SI                              | CATEMENT 4                     |
|--|--------------------------------------|-----------------------------------|---------------------------------|--------------------------------|
| DESCRIPTION  | (A)<br>EXPENSES<br>PER BOOKS         | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME   | (D)<br>CHARITABLE<br>PURPOSES  |
| PROFESSIONAL FEES  | 900.                                 | 0.                                | 900.                            | 0.                             |
| TO FORM 990-PF, PG 1, LN 16C   | 900.                                 | 0.                                | 900.                            | 0.                             |
| FORM 990-PF  | OTHER E                              | XPENSES                           | Sī                              | CATEMENT 5                     |
| DESCRIPTION  | (A)<br>EXPENSES<br>PER BOOKS         | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME   | (D)<br>CHARITABLE<br>PURPOSES  |
| MISCELLANEOUS EXPENSE POSTAGE AND SHIPPING MEMBERSHIP, DUES, SUBSCRIPTIONS LICENSES TELEPHONE AND INTERNET | 4709.<br>268.<br>190.<br>60.<br>603. | 0.<br>0.<br>0.                    | 0.<br>268.<br>0.<br>60.<br>603. | 4709.<br>0.<br>0.<br>60.<br>0. |
| TO FORM 990-PF, PG 1, LN 23  | 5830.                                | 0.                                | 931.                            | 4769.                          |
| FORM 990-PF OTHER DECREASE DESCRIPTION   | ES IN NET AS                         | SETS OR FUND I                    | BALANCES ST                     | PATEMENT 6  AMOUNT             |
| PRIOR YEAR EXCISE TAX PAID BOOK/FMV VARIANCE ON INVESTM  | ENT EARNINGS                         |                                   |                                 | 84.<br>3688.                   |
| TOTAL TO FORM 990-PF, PART I   | II, LINE 5                           |                                   |                                 | 3772.                          |

| FORM 990-PF              | CORPORATE STOCK   |           | STAT                 | EMENT 7                  |
|--------------------------|---|-----------|----------------------|--------------------------|
| DESCRIPTION              |   | BOOK VALU |                      | MARKET<br>ALUE           |
|                          | ·   | 61        | 30.                  | 6130                     |
| TOTAL TO FORM 990-PF, PA | ART II, LINE 10B  | 61        | 30.                  | 6130                     |
| FORM 990-PF              | OTHER INVESTMENTS   |           | STAT                 | EMENT 8                  |
| DESCRIPTION              | VALUATION<br>METHOD   | BOOK VALU |                      | MARKET<br>ALUE           |
|                          | COST  | 1249      | 27.                  | 145698                   |
| TOTAL TO FORM 990-PF, PA | ART II, LINE 13   | 1249      | 27.                  | 145698                   |
|                          | VIII - LIST OF OFFICERS, DISTEES AND FOUNDATION MANAGEMENT OF TITLE AND AVRG HRS/WK |           | EMPLOYEE<br>BEN PLAN | EMENT S  EXPENSE ACCOUNT |
| MARY ELLEN FROST         | PRESIDENT 4.00  | 0.        | 0.                   | 0.                       |
| CARSON WOOD              | VICE PRESIDENT 4.00   | 0.        | 0.                   | 0.                       |
| NANCY MATULIS            | SECRETARY 4.00  | 0.        | 0.                   | 0.                       |
| CHERYL PEABODY           | TREASURER 4.00  | 0.        | 0.                   | 0.                       |
| BRUCE ARCHER             | BOARD MEMBER 2.00   | 0.        | 0.                   | 0.                       |

| AMERICAN COUNCIL OF THE BLIND O  | F MAINE              |            | 01-6013214 |    |
|--|----------------------|------------|------------|----|
| DAVID PERRY  | BOARD MEMBER<br>2.00 | 0.         | 0.         | 0. |
| JACK BEVERIDGE   | BOARD MEMBER<br>2.00 | 0.         | 0.         | 0. |
| NICOLE PETERS-SUKEFORTH  | BOARD MEMBER 2.00    | 0.         | 0.         | 0. |
| PATRICIA MONAHAM   | BOARD MEMBER<br>2.00 | 0.         | 0.         | 0. |
| GENE MONAHAN   | BOARD MEMBER<br>2.00 | 0.         | 0.         | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6  | , PART VIII          | 0.         | 0.         | 0. |
| FORM 990-PF SUMMARY OF DIR   | ECT CHARITABLE A     | ACTIVITIES | STATEMENT  | 10 |
| ACTIVITY ONE   |                      |            |            |    |
| BLIND ADVOCACY PROGRAMS - PROVIDE NEWSLETTERS STATE, LOCAL, AND NAT CONFERENCES BENEFITING 100 PLUS V INDIVIDUALS. | IONAL INFORMATIO     | ON AND     |            |    |
|  |                      | E          |            |    |

TO FORM 990-PF, PART IX-A, LINE 1

18066.

## Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

| lf you   | u are filing for an Automatic 3-Month Extension, complet            | te only Pa      | rt I and check this box             |                              |   | X         |  |  |
|--|---|-----------------|-------------------------------------|------------------------------|---|-----------|--|--|
| If you   | u are filing for an Additional (Not Automatic) 3-Month Ext          | tension, c      | complete only Part II (on page 2 of | this form).                  |   |           |  |  |
| Do not   | complete Part II unless you have already been granted a             | an automa       | tic 3-month extension on a previous | sty filed Fo                 | rm 8868                                 |           |  |  |
| Electro  | onic filing (e-file). You can electronically file Form 8868 if y    | ou need a       | 3-month automatic extension of tin  | ne to file (6                | months for a corpo                      | oration   |  |  |
|  | d to file Form 990-T), or an additional (not automatic) 3-mor       |                 |                                     |                              |   |           |  |  |
|  | to file any of the forms listed in Part I or Part II with the exc   |                 |                                     |                              |   |           |  |  |
|  | al Benefit Contracts, which must be sent to the IRS in pap          | •               | -                                   |                              |   |           |  |  |
|  | vw irs gov/efile and click on e-file for Chanties & Nonprofits      |                 | ,                                   |                              |   |           |  |  |
| Part   |   |                 | ubmit original (no copies ne        | eded).                       |   |           |  |  |
| A corpo  | pration required to file Form 990-T and requesting an auton         | natic 6-mo      | onth extension - check this box and | complete                     |   |           |  |  |
| Part I o   | nly   |                 |                                     |                              | <b>&gt;</b>                             |           |  |  |
| All othe   | er corporations (including 1120-C filers), partnerships, REM        | ICs, and ti     | rusts must use Form 7004 to reques  | t an exten                   | sion of time                            |           |  |  |
| o file income tax returns.   |   |                 |                                     |                              | Enter filer's identifying number        |           |  |  |
| Гуре о   | ype or Name of exempt organization or other filer, see instructions |                 |                                     |                              | Employer identification number (EIN) or |           |  |  |
| orint  |   |                 |                                     |                              |   |           |  |  |
| lle by the   | AMERICAN COUNCIL OF THE BL  |                 | 01-6013214                          |                              |   |           |  |  |
| due date   |   |                 |                                     | Social security number (SSN) |   | )         |  |  |
| ilıng your<br>eturn Se   |   | 7 <u>15-1</u> 2 | 21                                  |                              |   |           |  |  |
| nstructio  |   | reign add       | ress, see instructions              |                              |   |           |  |  |
|  | PORTLAND, ME 04104  |                 |                                     |                              |   |           |  |  |
|  |   |                 |                                     |                              |   |           |  |  |
| Enter th   | ne Return code for the return that this application is for (file    | a separa        | te application for each return)     |                              |   | 0 4       |  |  |
|  |   |                 |                                     |                              |   |           |  |  |
| Applica  | ation   | Return          | Application                         |                              |   | Return    |  |  |
| s For  |   | Code            | Is For Code                         |                              |   |           |  |  |
| orm 9  | 90 or Form 990-EZ   | 01              | Form 990-T (corporation)            |                              |   | 07        |  |  |
| orm 9  | 90-BL   | 02              | Form 1041-A                         |                              |   | 08        |  |  |
| orm 4  | orm 4720 (individual) 03 Form 4720 (other than individual)          |                 |                                     |                              |   | 09        |  |  |
| orm 9  | 90-PF   | 04              | Form 5227                           |                              |   | 10        |  |  |
| orm 9  | 90-T (sec 401(a) or 408(a) trust)                                   | 05              | Form 6069                           |                              |   | 11        |  |  |
|  | 90-T (trust other than above)                                       | 06              | Form 8870                           |                              |   | 12        |  |  |
|  | CHERYL PEABODY  | TRE             | ASURER                              |                              |   |           |  |  |
| The  | books are in the care of ▶ 6 LEE ST - WINS                          |                 |                                     |                              |   |           |  |  |
| Telephone No ► 207-872-7594 Fax No ►   |   |                 |                                     |                              |   |           |  |  |
|  | e organization does not have an office or place of business         | s in the Un     | ited States, check this box         |                              |   |           |  |  |
|  | s is for a Group Return, enter the organization's four digit (      |                 |                                     | f this is foi                | r the whole group, o                    | heck this |  |  |
| оох 🕨  |   |                 | <del></del>                         |                              |   |           |  |  |
|  | request an automatic 3-month (6 months for a corporation            |                 |                                     |                              |   |           |  |  |
|  | AUGUST 15, 2014 , to file the exempt                                |                 |                                     |                              | The extension                           |           |  |  |
| is for the organization's return for:  |   |                 |                                     |                              |   |           |  |  |
| ► X calendar year 2013 or  |   |                 |                                     |                              |   |           |  |  |
|  | tax year beginning  | , an            | d ending                            |                              |   |           |  |  |
|  |   |                 | <u> </u>                            |                              | _                                       |           |  |  |
| 2 lf   | the tax year entered in line 1 is for less than 12 months, cl       | heck reas       | on. Initial return                  | Final retur                  | n                                       |           |  |  |
|  | Change in accounting period   |                 |                                     |                              |   |           |  |  |
| 3a If  |   |                 |                                     |                              |   |           |  |  |
|  |   |                 |                                     |                              | \$                                      | 0.        |  |  |
| _  | this application is for Forms 990-PF, 990-T, 4720, or 6069          |                 | <del>-</del>                        |                              |   |           |  |  |
|  | stimated tax payments made Include any prior year overp             | -               |                                     | 3b                           | \$                                      | 0.        |  |  |
| _  | salance due. Subtract line 3b from line 3a. Include your pa         |                 | *                                   |                              |   |           |  |  |
|  | y using EFTPS (Electronic Federal Tax Payment System)               | =               | ·                                   | 3c                           | \$                                      | 0.        |  |  |
| Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-FO and Form 8879-FO for payment |   |                 |                                     |                              |   |           |  |  |

instructions.