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#### 990 Form

## **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047 2014

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

**Open to Public** Inspection

<u>A</u> _	For	r the	2014 calend	ar year, or tax year beginning , 2014, and er	nding		, 20
В	Chec	ck if a	pplicable	C Name of organization Maine Beer & Wine Wholesalers Assoc., Inc.			Employer Identification no.
	Addr	ress ci	nange	Doing business as			01-6021180
$\overline{\sqcap}$	Nam	ne cha	nae	Number and street (or PO box if mail is not delivered to street address)	Room/suite		Telephone number
Ħ		al retur	_	P O Box 615			(207) 623-3800
Ħ			n/terminated	City or town, state or province, country, and ZIP or foreign postal code	<u> </u>		<del>'                                    </del>
$\Box$		ended		Augusta, ME 04332-0615		٦	240,665 Gross receipts\$
$\overline{\sqcap}$	Appl	lication	n pending	F Name and address of principal officer Nick Alberding			
	.,			Same as C above	H(a) is this a gr subordinal	oup retu	rn for Yes X No
	Tax-	exemo	ot status X	501(c)(3)		-	es included? Yes No
J	Web	site	► N/A		H(c) Group exe	n," attact	n a list (see instructions)
ĸ	Form	n of or	ganization X	Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation 1.9			
P	art		Summar				
		1	Bnefly descri	be the organization's mission or most significant activities    The purposes are	to incorp	orat	e as a relief
a			-	it associati for mutual assistance, and for the protect			
Activities & Governance				in general; to raise and maintain the standard of the			
r	-			e friendship, good-will and business co-operation.	Deverage 1		cry, and co
×e				ox In the organization discontinued its operations or disposed of more than 25% of	ts net assets	-	
Ğ				oting members of the governing body (Part VI, line 1a)		3	12
oō ⊘				dependent voting members of the governing body (Part VI, line 1b)		4	12
iţie				of individuals employed in calendar year 2014 (Part V, line 2a)		5	0
ξį	İ			of volunteers (estimate if necessary)		6	
ĕ	- [			ed business revenue from Part VIII, column (C), line 12		7a	0
				d business taxable income from Form 990-T, line 34		7b	0
	$\exists$				\ Prior Year		Current Year
		8	Contributions	s and grants (Part VIII, line 1h)		,608	240,615
<u> </u>				vice revenue (Part VIII, line 2g)	3	, 000	240,013
7,5	,   ,		_	ncome (Part VIII, column (A), lines 3, 4, and 7d)		53	50
4. 2015 Revenue				ie (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			30
<u>-</u>	- 1			e - add lines 8 through 11 (must equal Part VIII, column (A), line (2)	223	,661	240,665
7	_			imilar amounts paid (Part IX, column (A), lines 1-3)		, 385	31,048
7	1			to or for members (Part IX, column (A), line 4)		, 303	31,048
٠-٩	1		-	er compensation, employee benefits (Part IX, column (A), lines 5-10)			0
īj ģ	1			fundraising fees (Part IX, column (A), line 11e)			0
ANN WILL Expenses				sing expenses (Part IX, column (D), line 25)			
	1			ses (Part IX, column (A), lines 11a-11d, 11f-24e)	195	,911	215,737
う の			•	es Add lines 13-17 (must equal Part IX, column (A), line 25)		, 296	
(,)			•	s expenses Subtract line 18 from line 12		, 365	
	S				Beginning of Current	<del></del>	End of Year
å	Fund Balances	20	Total assets	(Part X, line 16)		,463	43,343
Ace				s (Part X, line 26)		,	13,313
Ā	Ž 2	22	Net assets of	r fund balances Subtract line 21 from line 20 · · · · · · · · · · · · · · · · · ·	49	, 463	43,343
P	art	_		re Block	<u></u>		10/515
Unde	er per	nalties	of perjury, I decl	are that I have examined this return including accompanying schedules and statements, and to the best of my kn	nowledge and belief, if	is	
true,	corre	ect an	d complete Ded	aration of preparer (other than offuser) is based on all information of which preparer has any knowledge		1	
				Illin TO			, ,
Sig	gn		Signatur	e of officer		Date	
He	re			William Fitch I Censucer			2/4/15
			Type or	onnt name and title	-		
			Print/Type pre	parer's name Preparet signature Oa Date	Check	ıf F	TIN
Pa	id		J Peter	Gilbert 01-26-2015	self-employe	ed	P01216186
Pr	epa	arer		J Peter Gilbert CPA	Firm's EIN		
Us	e C	nly	Firm's addres	<b>L</b>	Phone no		
	_			Belfast ME 04915	20	)7-3	56-6025
Ma	y the	IRS	discuss this	return with the preparer shown above? (see instructions)			· · · X Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2014)

	rt III Statement of Program Service Accomplishments
Pai	<del></del>
1	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
	The purposes are to incorporate as a relief or benefit associati for mutual assistance, and for the protection and betterment of its interest in general; to raise and maintain the
	standard of the beverage industry, and to cultivate friendship, good-will and business
	co-operation.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services? · · · · · · · · · · · · · · · · · · ·
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ including grants of \$ ) (Revenue \$)
4b	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )
4c	(Code) (Expenses \$ including grants of \$ ) (Revenue \$)
4d	Other program services (Describe in Schedule O )
	(Expenses \$ including grants of \$ ) (Revenue \$ )
40	Total program service expenses ▶

Part IV

Checklist of Required Schedules

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 2 X 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Χ 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 Χ 4 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes." complete Schedule C. 5 X 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 Χ Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 complete Schedule D. Part III Χ 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 Χ Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 endowments, permanent endowments, or quasi-endowments? If "Yes." complete Schedule D. Part V 10 X 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII. VIII. IX. or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI Χ 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more 11b Χ c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Χ 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X 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 Χ 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII X 12a 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 14a Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, ь 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 Χ 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Χ Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Χ Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 If "Yes," complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a 20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? b

Part IV Checklist of Required Schedules (continued) No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Χ 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Χ 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 23 Χ Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 24a \$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 25a Χ Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d 24d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Χ 25a 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 Χ Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any 26 current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 26 Χ 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 Χ 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) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Χ A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) C was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M ............... 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 Did the organization have a controlled entity within the meaning of section 512(b)(13)? .......... 35a 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 Χ Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 related organization? If "Yes," complete Schedule R, Part V, line 2 36 Χ Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38 

	990 (2014) Maine Beer & Wine Wholesalers Assoc., Inc. 01-60211	80		age :
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	• • •		Щ.
_			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	L
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return		}	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	X
þ	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	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		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	!		
	organization solicit any contributions that were not tax deductible as chantable contributions?	6a	Х	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	Χ	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			İ
	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	i		
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7е		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		_X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
þ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
Þ	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		L	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		ΙX

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

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section 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 12 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 12 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? 2 Χ 3 Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Х 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a Χ Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No 10a Did the organization have local chapters, branches, or affiliates? 10a Χ b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? . . . . . . . . . . . . . 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a Χ b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Other (explain in Schedule O) Own website Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year 20 State the name, address, and telephone number of the person who possesses the organization's books and records Capital Insights (207) 623-3800, P O Box 615, Augusta, ME 04332-0615

•			
Form 990 (20	Maine Beer & Wine Wholesalers Assoc., Inc.	01-6021180	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Cor	mpensated Employe	es, and
	Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete organization's	this table for all persons required to be listed. Report compensation for the calendar year ending with or wit s tax year	thin the	
• List all	of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of	of amount of	

- compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

  List all of the organization's **current** key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

EEA

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

Check this box if neither the organization nor any related	Organization	l	C1130			Culle	IL UII	licer, director, or tru	stee	
(A) Name and Title	(B)  Average hours per week (list any hours for	box.	unles	Pos eck m ss per	son ı	han one s both a r/trustee	n	(D)  Reportable compensation from the	(E)  Reportable  compensation from  related	(F) Estimated amount of other
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Peter Briggs		Х						0	0	0
(2) Dennis Barriault		Х						0	0	0
(3) Ron Barriault		Х						0	0	0
(4) John Cronin		Х	-					0		0
(5) Scott Solman		Х						0	0	0
(6) Chris Black		Х						0	0	0
(7) Jim Bourgue		Х					:	0	0	0
(8) Jeff Kane		Х						0	0	0
(9) Mike Runser		Х						0		0
(10)Mike Barriault				Х			:	0	0	0
(11)Nick Alberding				Х				0		0
(12)Bill Fitch				Х			-	0	0	0
(13)										
(14)										

Form 990 (2014)

Page 8

Part	VII Section A. Officers, Directors, Trustees,	Key Employ	ees, a	nd H	ligh	est (	Comp	ensa	ted Employees (	continued)			
	. (A) Name and title	(B)  Average hours per week (list any	box, u	unless	s pers	ition ore th	an one both an trustee)		(D) Reportable compensation from	(E)  Reportable compensation from related	1	(F) timated lount of other	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org and	pensation the anization direction the anization direction  on d	
<u>(15)</u>													
<u>(16)</u>													
(17)													
(18)_													
(19)										,		-	
(20)_													
(21)													
(22)									_			·	
(23)													
(24)													
(25)													
1b c	Sub-total	on A · ·						•				<u></u>	
d	Total (add lines 1b and 1c)								0 than \$100,000 of	·	<u> </u>		0_
	reportable compensation from the organization									0	· I	Yes	No
3	Did the organization list any former officer, director,												
4	employee on line 1a? If "Yes," complete Schedule J For any individual listed on line 1a, is the sum of rep	ortable comp	ensatı	on a	nd o	ther	comp	ensa			3		Х
	organization and related organizations greater than individual • • • • • • • • • • • • • • • • • • •										4		Х
5	Did any person listed on line 1a receive or accrue or for services rendered to the organization? If "Yes," or			-			_		on or individual		5		Х
Secti	on B. Independent Contractors											-	
1	Complete this table for your five highest compensation from the organization. Report compensation report compensation report compensation.												
	(A)					-			(B)	1		C)	-
Capit	Name and business address tal Insights, P O Box 615, Augusta	a, ME 043	332-0	061	5				Description of Executive		Comp	100	
							·						
2	Total number of independent contractors (including received more than \$100,000 of compensation from				stec	abo	ove) w	ho		•			

		Check if Schedule O contains a response or n	ote to any line in this	s Part VIII			[
	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns 1a				-	_
<u>2</u>	b	Membership dues · · · · · · · · 1b	_240,615				
S, C	C	Fundraising events 1c					
a E	d	Related organizations 1d				:	
. <u>E</u>	е	Government grants (contributions) 1e					
S. S.	f	All other contributions, gifts, grants,					
ige.		and similar amounts not included above 1f					
Ęŏ	g	Noncash contributions included in lines 1a-1f \$					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f		240,615			
			Business Code		·-		
ם	2a						
9.4	ь						
<b>₽</b>	C						
Ž	d						
Program Service Revenue							
gra	f	All other program service revenue · · · · · · ·					
Ę	1	Total. Add lines 2a-2f					!
	3	Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proc	eeds · · · ▶	50	50		
	5	Royalties	<u></u>				
		(ı) Real	(ii) Personal				
	6a	Gross rents · · · · · · ·	ļ				
	b	Less rental expenses · · · ·					
	C	Rental income or (loss) · · ·					
	d	Net rental income or (loss) · · · · · · · · ·					
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					
		Less: cost or other basis and sales expenses · · · ·					
	1	Gain or (loss)					1
a	1	Net gain or (loss)	· · · · · · · · · · · · · · · · · · ·				
nue	8a	Gross income from fundraising					
Other Reve		events (not including \$					
ř		of contributions reported on line 1c)					
the state	١.	See Part IV, line 18 a					
0	1	Less direct expenses b					
		• • • • • • • • • • • • • • • • • • • •					<del></del>
	ya	Gross income from gaming activities  See Part IV, line 19 a					
			<u></u>			1	1
	1	Less direct expenses · · · · · · b					
		Net income or (loss) from gaming activities · ·	· · · · · · · · · · · · · · · · · · ·				
		Gross sales of inventory, less returns and allowances					
	1	Less cost of goods sold b					1
	<del>  _ c</del>	Net income or (loss) from sales of inventory	1	-			<del> </del>
		Miscellaneous Revenue	Business Code				
	11a						
	þ					_	
	C					<u> </u>	
	1	All other revenue					ļ
	1	Total. Add lines 11a-11d	_				<del>                                     </del>
	12	Total revenue. See instructions	<u></u>	240,665	50	Q	

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) (B) (C) (A) Do not include amounts reported on lines 6b, 7b, Total expenses Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 . . . . . . . . 31,048 31,048 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members . . . . . . 5 Compensation of current officers, directors, trustees, and key employees ..... Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 10 11 Fees for services (non-employees) а 183,723 183,723 b Legal C Accounting . . . . . . . . . . . . . 650 650 d 16,132 16,132 Professional fundraising services See Part IV, line 17 . • f Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 13 645 645 14 15 16 17 7,066 7,066 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 3,755 3,755 20 21 22 Depreciation, depletion, and amortization . . . . . . . 23 2,086 2,086 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 894 894 Telephone h Printing and supplies 636 636 C Miscellaneous 150 150 d е All other expenses Total functional expenses. Add lines 1 through 24e 25 246,785 246,785 0 0 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here following SOP 98-2 (ASC 958-720)

**Balance Sheet** 

Part X

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 Cash - non-interest-bearing 49,463 1 43,343 2 2 3 3 4 4 5 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 7 8 8 9 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D . . . . . 10a Less accumulated depreciation · · · · · · · · · · 10b b 10c 11 11 Investments - other securities See Part IV, line 11 ....... 12 12 13 Investments - program-related See Part IV, line 11 13 14 14 15 15 16 16 49,463 43,343 17 17 18 18 19 19 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors. 22 Liabilities trustees, key employees, highest compensated employees, and disqualified 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 third parties, and other liabilities not included on lines 17-24) Complete Part X 25 26 Total liabilities. Add lines 17 through 25 ........ 26 0 0 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 28 Temporarily restricted net assets ............ 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 🗓 and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 49,463 43,343 33 Total net assets or fund balances .......... 33 49,463 43,343 34 34 49,463 43,343

Forn	1990 (2014) Maine Beer & Wine Wholesalers Assoc., Inc. 01	-6021	180	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				$\cdot \Box$
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	40,6	565
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	46,7	785
3	Revenue less expenses Subtract line 2 from line 1	3		(6,1	120)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		49,4	163
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		43,3	343
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				•
				Yes	No
1	Accounting method used to prepare the Form 990 🔯 Cash 🔲 Accrual 🔲 Other				
	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		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	,	X
_	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			, 1	
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			. !	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
3а	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?		. За		X
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				<del>                                     </del>
~	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. 3b		
EEA	Togain of death of death, explain trily in defined to direct death of death			990 (2	2014)
			. 01111	~~~ (,	-0.7)

#### SCHEDULE C (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

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

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ. ▶ Information about Sch. C (Form 990 or 990-EZ) and its inst. is at www.irs.gov/form990.

**Open to Public** Inspection

OMB No 1545-0047

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then Section 501(a)(A) (5) or (6) organizations. Complete Part III.

	Section 501(c)(4), (5), or (6) organizations	Complete Fait III.			
	e of organization				identification number
	ine Beer & Wine Wholesalers	s Assoc., Inc.	504(-)	01-602:	
Pa		ization is exempt under secti		s a section 527 orga	inization.
1	Provide a description of the organization's				
2	Political expenditures			· · · · · · · • • • <u> </u>	
3	Volunteer hours			· · · · · · · · · · · · · · · · · · ·	
	TIP Complete if the organi	ination is everynt under costi	on E04/o\/2\		
	rt I-B Complete if the organ  Enter the amount of any excise tax incurr	ization is exempt under secti	. , , , ,		
1					
2	Enter the amount of any excise tax incurr				
3	If the organization incurred a section 4959 Was a correction made?				
4a	If "Yes." describe in Part IV				·   Tes       No
b Da		ization is exempt under secti	on 501(c) evo	ent section 501/c//	31
ـــــــا	Enter the amount directly expended by th			ept section 50 f(c)(.	٥١٠.
1	activities			▶ €	
2	Enter the amount of the filing organization				
2	527 exempt function activities			▶ €	
•	Total exempt function expenditures Add I				
3	line 17b · · · · · · · · · · · · · · · · · · ·	illes 1 and 2 Enter here and on Form 11	20-POL,	▶ €	
4	Did the filing organization file Form 1120-	BOL for this year?			· Yes No
5	Enter the names, addresses and employe				
3	organization made payments For each o				
	the amount of political contributions recei	•			
	as a separate segregated fund or a politic		•	•	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate
					political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)		[			
(5)		T			
(6)					

_	dule C (Form 990 or 990-EZ) 2014 Maine Beer & V	Vine Wholesa	lers Assoc.,	Inc.	01-60211	80 Page 2
Pa	art II-A Complete if the organization	is exempt un	der section 501	(c)(3) and filed	d Form 5768 (elec	tion under
	section 501(h)).	Chatad /	and later Dark Manager	L 46.4-4		
A	Check Inf the filing organization belongs to a	*		=	embers	
_	name, address, EIN, expenses, and					
<u>B</u>	Check Inf the filing organization checked box			<del></del>	(a) Films	(ILA ASSILLATION
	(The term "expenditures" me	ing Expenditures			(a) Filing organization's totals	(b) Affiliated group totals
40	Total lobbying expenditures to influence public opin	<del>- ·</del>			Organización o totalo	group touts
1a b	• • •		22yg)			
C						· <del>· · · ·</del>
d			<i>.</i>			
е		nd 1d)				
f	Lobbying nontaxable amount Enter the amount fro	· ·				
	columns	J				
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amount	is:		=
	Not over \$500,000	20% of the am	ount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess or	ver \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess or	ver \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess over	er \$1,500,000		
	Over \$17,000,000	\$1,000,000				
g		•				
h						
i	Subtract line 1f from line 1c If zero or less, enter -0				L	··· ·· ···
j	If there is an amount other than zero on either line		-		,	¬.,
	reporting section 4911 tax for this year?			<del> </del>		Yes          No
	•	4-Year Averagiı	ng Period Under	section 501(h)		
	(Some organizations that made a sec			•		s below.
	See	the separate in	structions for lin	es 2a through 2	f.)	
_	Lobbyi	ng Expenditures	During 4-Year Avera	ging Period		
		4 > 0044	41.0040	4 3 0040	( 1) 0044	4 N T - 4 - 1
	Calendar year (or fiscal year	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) Total
	beginning in)					
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))		•	·		
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					
FFA			· · · · · · · · · · · · · · · · · · ·		Schedule C (Fo	m 990 or 990-EZ) 2014

EEA

	ule C (Form 990 or 990-EZ) 2014 Maine Beer & Wine Wholesalers Assoc., Inc.	01-	6021	180 Page 3
Ра	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	illed F	-orm	5768
	each "Yes," response to lines 1a through 1ı below, provide in Part IV a detailed	_ (	a)	(b)
	cription of the lobbying activity.	Yes	No	Amount
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?		X	
þ	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X	Ш	
C	Media advertisements?	<u></u>	Х	<del></del>
d	Mailings to members, legislators, or the public?	X	-,,	
0	Publications, or published or broadcast statements?	-	X	<del></del>
f g	Grants to other organizations for lobbying purposes?	X	^	16 120
9 h	Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х	16,132
i	Other activities?		X	
j	Total Add lines 1c through 1:			16,132
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		x	
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?			
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	:)(5),	or se	ction
	501(c)(6).			
				Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2
3 Pa	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," C			
	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).			
а	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	
				<del></del>
	ide 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 instructions), and Part II-B, line 1. Also, complete this part for any additional information	nesia	na	
_ (00				
				<del></del>
				·
EEA		Sche	dule C (F	orm 990 or 990-EZ) 2014

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection 2014

Employer Identification number

OMB No 1545-0047

(h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990 01-6021180 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Part IV, line 21, for any recipient that received more than \$5,000. Part IV, line 21, for any recipient that received more than \$5,000. Part IV, line 21, for any recipient that received more than \$5,000. (e) Amount of noncash assistance (d) Amount of cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable General Information on Grants and Assistance Enter total number of other organizations listed in the line 1 table the selection criteria used to award the grants or assistance? Maine Beer & Wine Wholesalers Assoc., In (p) EIN (a) Name and address of organization or government Part Part II (10) Ξ 3 ල € 3 9 3 8 9

Page 2

Schedule (Form 990) (2014) Maine Beer & Wine Wholesalers Assoc., Inc.

[Part III] Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Olympic Support to Julia Clubay		30.848			
7					
4					
9					
9					
7					
Part IV Supplemental Information. Provide the information		required in Part I, lin	ie 2, Part III, colum	required in Part I, line 2, Part III, column (b), and any other additional information	ditional information
' EEA					Schedule I (Form 990) (2014)

## SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

2014

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

Inspection
Employer Identification number

Maine Beer & Wine Wholesalers Assoc., Inc.	01-6021180
01. Officer, directors, etc. family relationship (Part V	I, line 2)
The board and officers are members of family owned businesses and as such may be related.	
Key employees are not related to any board members.	
02. Members or stockholder classes and rights (Part VI, line 6)	
The organization has 12 members (see part VII for a list of members).	
03. Member election for additional members (Part VI, line	e 7a)
The members of the organization elect the governing body.	
	-
04. Governing body decisions (Part VI, line 7b)	
All decisions of the governing body are approved by the members of the ord	ganization.
05. Form 990 governing body review (Part VI, line 11)	
The Form 990 is prepared by the staff of the organization in consultation	with the tax
accountant. A draft is reviewed by the executive committee officers - President / Vice	
President / Treasurer.	
06. Form 990 availability to public (Part VI, line 18)	<del></del>
All governing documents, conflict of interest policy and financial statement	ents are avilable
to the public upon request.	
07. Governing documents, etc, available to public (Part V	7I, line 19)
All governing documents, conflict of interest policy and financial statement	ents are
available to the public upon request.	

#### Form 990 - Schedule C - Part IV - Supplemental Information

- Part II B Line 1b Staff advocate for member interests on alcohol, tax, business and other policy issues. Details on specific legislation is filed with the Maine Ethics Commission reports.
- Part II B Line 1d Maine Beer and Wine Wholesalers Association held a "Responsibility" event and sent out invitations to elected officials. We also write comments on legislative bills as testimony.
- Part II B Line 1g Maine Beer and Wine Wholesalers advocates \ lobbies
  the Maine legislature -- a list of specific issues include: wine tastings,
  special festivals, bottle deposits, recycling issues, alcohol taxes and
  underage drinking.