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Form 990-EZ

Short Form

2014

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- Do not enter social security numbers on this form as it may be made public.
- Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2014 calendar year, or tax year beginning 08-01-2014

, and ending 07-31-2015

B Check if applicable

Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization MAINE TELECOMMUNICATIONS USERS GROUP	D Employer identification number 01-0520454
Number and street (or P O box, if mail is not delivered to street address) PO Box 8549	E Telephone number (207) 370-5327
City or town, state or province, country, and ZIP or foreign postal code Portland, ME 04104	F Group Exemption Number ►

G Accounting Method Cash Accrual Other (specify) ► _____H Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)I Website: ► <http://www.mtug.org>J Tax-exempt status (check only one) - 501(c)(3) 501(c)(6) (Insert no.) 4947(a)(1) or 527K Form of organization Corporation Trust Association Other _____

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 99,535

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	0
	2 Program service revenue including government fees and contracts	2	99,460
	3 Membership dues and assessments	3	0
	4 Investment income	4	75
	5a Gross amount from sale of assets other than inventory	5a	0
	b Less cost or other basis and sales expenses	5b	0
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	0
	b Gross income from fundraising events (not including \$ 0 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	0
	c Less direct expenses from gaming and fundraising events	6c	0
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	0
	7a Gross sales of inventory, less returns and allowances	7a	0
	b Less cost of goods sold	7b	0
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0
	8 Other revenue (describe in Schedule O)	8	0
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ►	9	99,535
Expenses	10 Grants and similar amounts paid (list in Schedule O)	10	2,000
	11 Benefits paid to or for members	11	0
	12 Salaries, other compensation, and employee benefits	12	32,858
	13 Professional fees and other payments to independent contractors	13	750
	14 Occupancy, rent, utilities, and maintenance	14	0
	15 Printing, publications, postage, and shipping	15	6,604
	16 Other expenses (describe in Schedule O)	16	49,981
	17 Total expenses. Add lines 10 through 16 ►	17	92,193
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	7,342
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	102,104
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	3
	21 Net assets or fund balances at end of year Combine lines 18 through 20 ►	21	109,449

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

	Yes	No
33		No
34		No
35a		No
35b		
35c		No
36		No
37a	0	
37b		No
38a		No
38b		
39a		
39b		
40a		
40b		
40c		
40d		
40e		No
41	ME	
42a	Maine Telecommunications Users Group	Telephone no (207) 370-5327
	Located at PO Box 8549 Portland, ME	ZIP + 4 04104
42b		No
42c		No
43	Form 1041	43
44a		No
44b		No
44c		No
44d		
45a		No
45b		No

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O

34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)

35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?

b If "Yes," to line 35a, has the organization filed a **Form 990-T** for the year? If "No," provide an explanation in Schedule O

c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N

37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a 0

b Did the organization file **Form 1120-POL** for this year?

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?

b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b

39 Section 501(c)(7) organizations Enter

a Initiation fees and capital contributions included on line 9 39a

b Gross receipts, included on line 9, for public use of club facilities 39b

40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► , section 4912 ► , section 4955 ►

b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 40b

c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ►

d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization ►

e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 40e

41 List the states with which a copy of this return is filed ► ME

42a The organization's books are in care of ► Maine Telecommunications Users Group Telephone no (207) 370-5327 Located at ► PO Box 8549 Portland, ME ZIP + 4 04104

b 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)? If "Yes," enter the name of the foreign country ►

See the instructions for exceptions and filing requirements for **FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)**

c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country ►

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

44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ

b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ

c Did the organization receive any payments for indoor tanning services during the year?

d If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	<input type="checkbox"/> Yes	<input type="checkbox"/> No
46		No

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI

47 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

	<input type="checkbox"/> Yes	<input type="checkbox"/> No
47		
48		
49a		
49b		

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000 ► _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000. ► _____

52 Did the organization complete Schedule A? **NOTE.** All Section 501(c)(3) organizations must attach a completed Schedule A ► Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		2016-03-15
	Katherine Carpenter Executive Director		Date
	Type or print name and title		

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ►			Firm's EIN ►	
	Firm's address ►			Phone no	

May the IRS discuss this return with the preparer shown above? See instructions ► Yes No

Additional Data

Software ID: 14000267
Software Version: v1.00
EIN: 01-0520454
Name: MAINE TELECOMMUNICATIONS USERS GROUP

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for 501(c)(3) and 501(c)(4) organizations and 4947(a)(1) trusts; optional for others.)
28 Annual Information Technology Summit and Trade Show Provides 15 educational sessions and 59 vendor displays to an audience of 500+ people, as well as a keynote address on an important technology topic (Grants \$ 0) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	28a 0
29 Monthly educational programs (Sept-May), free to the public, about technology topics of importance to IT professionals, businesses, and organization leaders Planned, advertised, found speakers, and hosted 7 webinar events and 4 social networking events that included an educational component 30 to 50 people per event For the webinars, program video is made available on the MTUG website's archives (Grants \$ 0) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	29a 0
30 Outreach in the area of Industry Education and Development programming include running a website and LinkedIn page featuring interesting discussions, job board announcements, a meetings archive and an industry directory (Grants \$ 0) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	30a 0
Outreach in the area of Workforce Development A new programmatic area, MTUG is beginning to reach out to STEM organizations and be a connection between students and young people to careers in IT and technology employers MTUG works with the University of Maine Foundation and local businesses to fund multiple scholarships for technology students each year (Grants \$ 0) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	0

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Katherine Carpenter Executive Director	25	29,844	0	0
Al Bakutis President, Board of Directors	1 5	0	0	0
Linda Ollen Vice President, Board of Directors	1 5	0	0	0
Kevin Heatley Treasurer, Board of Directors	1 5	0	0	0
Scott Buckheit Secretary, Board of Directors (through June)	1 5	0	0	0
Michael Weiss Secretary, Board of Directors (July onward)	1 5	0	0	0
Ron Brown Scholarship Liaison, Board of Directors	1	0	0	0
Mike Begin Member, Board of Directors	1	0	0	0
Joe Bourgault Member, Board of Directors	1	0	0	0
Scott Drummeuy Member, Board of Directors	1	0	0	0
Christopher Falk Member, Board of Directors	1	0	0	0
Tom Farrington Member, Board of Directors	1	0	0	0
John Foley Member, Board of Directors	1	0	0	0
Uli Stewart Member, Board of Directors	1	0	0	0
Curt Sweet Member, Board of Directors	1	0	0	0

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**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.****► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.****2014****Open to Public
Inspection**

Name of the organization

MAINE TELECOMMUNICATIONS USERS GROUP

Employer identification number

01-0520454

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990-EZ, Part I, Line 16	
Form 990-EZ, Part I, Line 20	Description,Amount^Rounding errors,3^Total,3^
Form 990-EZ, Part II, Line 24	Description,EOY Amount^Prepaid Expense Conference Facility Deposit,500^Total,500^
Form 990-EZ, Part II, Line 26	Description,EOY Amount^Late 2014 Conf Receivable accidentally put on 2013 990 but should be 2014,60 Q2 Payroll Taxes filed jul 31 but pmt not debited until Aug 3,4161^Total,4221^