

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93492351006088

Form 990-EZ

Return of Organization Exempt From Income Tax

OMB No 1545-1150

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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/form990ez.

A For the 2017 calendar year, or tax year beginning 08-01-2017, and ending 07-31-2018

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

Number and street (or P O box, if mail is not delivered to street address)Room/suite

PO Box 8549

City or town, state or province, country, and ZIP or foreign postal code

Portland, ME 04104

D Employer identification number

01-0520454

E Telephone number

(207) 370-5327

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: www.mtug.org

J Tax-exempt status (check only one) - ☐ 501(c)(3) ☒ 501(c)(6) (insert no) ☐ 4947(a)(1) or ☐ 527

K 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. \$ 96,483

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	96,408
	3	Membership dues and assessments		3	0
	4	Investment income		4	75
	5a	Gross amount from sale of assets other than inventory	5a0	5c	0
	b	Less cost or other basis and sales expenses	5b0		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)			
	6	Gaming and fundraising events		6d	0
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a0		
	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)	6b0		
Expenses	c	Less direct expenses from gaming and fundraising events	6c0		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		7c	0
	7a	Gross sales of inventory, less returns and allowances	7a0		
	b	Less cost of goods sold	7b0		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		8	0
	8	Other revenue (describe in Schedule O)			
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			
	10	Grants and similar amounts paid (list in Schedule O)		10	4,500
	11	Benefits paid to or for members		11	0
	12	Salaries, other compensation, and employee benefits		12	38,229
Net Assets or Fund Balances	13	Professional fees and other payments to independent contractors		13	1,389
	14	Occupancy, rent, utilities, and maintenance		14	3,996
	15	Printing, publications, postage, and shipping		15	3,833
	16	Other expenses (describe in Schedule O)		16	53,101
	17	Total expenses. Add lines 10 through 16		17	105,048
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	-8,565
	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	104,795
	20	Other changes in net assets or fund balances (explain in Schedule O)		20	300
	21	Net assets or fund balances at end of year. Combine lines 18 through 20		21	96,530

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form 990-EZ (2017)

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

Check if the organization used Schedule O to respond to any question in this Part IV: ☐

Form **990-EZ** (2017)

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 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	33		No
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)	34		No
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)?	35a		No
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	35b		
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	35c		No
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	36		No
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?	37b		No
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?	38a		No
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		No
41 List the states with which a copy of this return is filed ▶ ME			
42a The organization's books are in care of ▶ Katherine Carpenter 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)?	42b		No
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 ?	42c		No
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 <input type="checkbox"/> 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	44a		No
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	44b		No
c Did the organization receive any payments for indoor tanning services during the year?	44c		No
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	44d		
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		No
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)	45b		No

		Yes	No
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	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 ☐

		Yes	No
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	47	
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	
49b	If "Yes," was the related organization a section 527 organization?	49b	

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		2018-12-16		
	Katherine Carpenter Executive Director		Date		
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: 17005980
Software Version: v1.00
EIN: 01-0520454
Name: MAINE TELECOMMUNICATIONS USERS GROUP

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

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. 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 section 501(c)(3) and 501(c)(4) organizations; optional for others.)
28 Monthly Educational Events - MTUG hosts educational webinar events addressing current technology topics and 4 social networking events that included an educational component for 30 to 50 people per event For the webinars, program video is made available on the MTUG website's archives Does not include staff salaries or other cost pools (Grants \$ 0)	28a If this amount includes foreign grants, check here . . . <input type="checkbox"/>	7,252

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

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. 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 section 501(c)(3) and 501(c)(4) organizations; optional for others.)	
<p>29 Annual Conference and Tradeshow - The MTUG Summit reaches more than 500 technology professionals, primarily local, with 15 educational workshops board-selected by a competitive, public RFP process, more than 50 exhibitors, a keynote speaker on a relevant topic and several networking meal components. Public attendance fees for the event are kept low to encourage attendance. Does not include staff salaries or other cost pools.</p> <p>(Grants \$ 0) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/></p>	29a	39,849

Form 990EZ, Part III - Statement of Program Service Accomplishments	
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. 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 section 501(c)(3) and 501(c)(4) organizations; optional for others.)
30 Outreach for Workforce Development and Scholarship MTUG is reaches 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 Does not include staff salaries or other cost pools (Grants \$ 0) If this amount includes foreign grants, check here . . . <input type="checkbox"/>	30a 4,500

Form 990EZ, Part III - Statement of Program Service Accomplishments		
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. 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 section 501(c)(3) and 501(c)(4) organizations; optional for others.)	
Technology Industry Education and Outreach - MTUG maintains active listings with regional chambers of commerce, participates with regional technology organizations, plus maintains a variety of resources on our website to help technology career hopefuls and professionals find these organizations, discover trending tech topics, and discover new tech industry companies in the region Does not include staff salaries or other cost pools (Grants \$ 0) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		1,405

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

(list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV. ☐

(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	29,983	0	0
Alan Bakutis President, Board of Directors	1 5	0	0	0
Christopher Falk Vice President, Board of Directors	1 5	0	0	0
Austin Brower Treasurer, Board of Directors	1 5	0	0	0
Tonia Ennis Secretary, Board of Directors	1 5	0	0	0
Mike Begin Member, Board of Directors	1	0	0	0
Joe Bourgault Member, Board of Directors	1	0	0	0
Abbie Brown Member, Board of Directors	1	0	0	0
Ron Brown Scholarship Liaison, Board of Directors	1 5	0	0	0
John Foley Member, Board of Directors	1	0	0	0
Brian Foote Member, Board of Directors	1	0	0	0
Kevin Heatley Member, Board of Directors	1	0	0	0
Mark Hopper Member, Board of Directors	1	0	0	0
Kristen Kucera Member, Board of Directors	1	0	0	0
Eugene Slobodzian Member, Board of Directors	1	0	0	0

Check if the organization used Schedule O to respond to any question in this Part IV. ☐

(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
Uli Stewart Member, Board of Directors	1	0	0	0

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. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 .	OMB No 1545-0047
		2017 Open to Public Inspection

Department of the Treasury Internal Revenue Service 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 10	\$4500 - University of Maine Foundation-administered co-sponsored scholarships for 3rd and 4th year IT students in the UMaine System - MTUG portion of donation is \$500, this year across 9 scholarships

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990-EZ, Part I, Line 16	Description, Amount^Advertising expenses, 1826 Conferences conventions meetings, 28534 Insurance nonemployee related, 2861 Membership dues organization, 125 Other expenses, 2320 Outside computer services, 5082 Supplies, 8474 Telephone and telecommunications, 2989 Travel, 890^Total, 53101^

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990-EZ, Part I, Line 20	Description,Amount^Refundable security deposit leased office space,300^Total,300^

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990- EZ, Part II, Line 24	Description, EOY Amount^Refundable security deposit for leased office space, 300^Total, 300^