

Form 990-EZ

Short 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)

2017

- 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.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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 GROUPD Employer identification number
01-0520454Number and street (or P O box, if mail is not delivered to street address) Room/suite
PO Box 8549E Telephone number
(207) 370-5327City 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: ► www.mtug.orgJ 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 ► \$ 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

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	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	96,483
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
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

Part II Balance Sheets (see the instructions for Part II)

Balance Sheets (see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II

1

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	104,495	22 96,230
23 Land and buildings	0	23 0
24 Other assets (describe in Schedule O)	300	24 300
25 Total assets	104,795	25 96,530
26 Total liabilities (describe in Schedule O)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	104,795	27 96,530

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III . . . D

organization's primary exempt purpose? The purpose is to advance the understand of the IT professional community regarding advances, trends, and legal issues impacting business and organizational technology infrastructure. MTUG provides economic and (3) and 501(c)(4) organizations, optional for others)

social benefits to MTUG members, Maine business, and residents by working with telecommunications providers and legislative and regulatory agencies to enhance the telecommunications infrastructure and services in Maine

benefited, and other relevant information for each program title

See

(Grants \$)

282

29 See Additional Data Table

298

(Grants \$)

30 See Additional Data Table

30a

(Grants \$)

If this amount includes foreign grants, check here . . . ►

(Grants \$) If this amount includes foreign grants, check here . . . ► 31a

32 Total program service expenses (add lines 28a through 31a) ► **32** 53,006

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
See Additional Data Table				

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.

- 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
- 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
- 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
- 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
- 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
- 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
- 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
- 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 40c
- d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization 40d
- 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 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
33		No
34		No
35a		No
35b		
35c		No
36		No
37a		0
37b		No
38a		No
40b		
40c		
40d		
40e		No
42b		No
42c		No
43		
44a		No
44b		No
44c		No
44d		
45a		No
45b		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

	Yes	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

	Yes	No
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	
-----	--

b 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
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

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.)
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 (Grants \$ 0)	29a	39,849

If this amount includes foreign grants, check here . . . ►

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>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)</p> <p>If this amount includes foreign grants, check here . . . ► <input type="checkbox"/></p>	<p>30a 4,500</p>

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

<p>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.</p>	<p>Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)</p>
<p>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)</p> <p>If this amount includes foreign grants, check here . . . ► <input type="checkbox"/></p>	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)	(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

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
Uli Stewart Member, Board of Directors	1	0	0	0

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

MAINE TELECOMMUNICATIONS USERS GROUP

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.

2017**Open to Public
Inspection****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,1,53101^

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^