**Return of Organization Exempt From Income Tax** 

2018

Department of the Treasury

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.

Open to Public Inspection

	Internal Revenue Service						
	A	, 20					
	В	Check if	applicable	C Name of organization Maine Beer & Wine Wholesalers Assoc., Inc.		D Employer identification no	
		Address	change	Doing business as		01-6021180	
		Name ch	ange	Number and street (or PO box if mail is not delivered to street address)	Room/suite	E Telephone number	
	$\overline{\Box}$	nitial reti	ım	P O Box 615, 45 Melville St.	3	(207) 623-3800	
	$\bar{\sqcap}$	Final retu	ırn/termınated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts	
	$\overline{}$	Amended		Augusta, ME 04332-0615		s 171,535	
	一		on pending	F Name and address of principal officer Nick Alberding	H(a) is this a group return		
	_		H(b) Are all subordinat				
		Tax-exen	npt status	Same as C above  501(c)(3)	<b></b>	a list (see instructions)	
			► N/A		H(c) Group exemption		
				Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation 1.5	933 M State of leg	•	
		rt I	Summar				
		1	Bnefly descn	be the organization's mission or most significant activities  The purposes are	to incorpora	te as a relief	
10/	/		-	it associati for mutual assistance, and for the protect			
٦٧/	~ <u>s</u>			in general; to raise and maintain the standard of the			
V٨	Æ			e friendship, good-will and business co-operation.			
$\Lambda$	) So So So So So So So So So So So So So	2		ox > if the organization discontinued its operations or disposed of more than 25% of i	ts net assets		
•		3		oting members of the governing body (Part VI, line 1a)	1	12	
	တ္	4	Number of in	dependent voting members of the governing body (Part VI, line 1b)	4		
	Activities &	5	Total number	of individuals employed in calendar year 2018 (Part V, line 2a)	5		
	cţi	6	Total number	of volunteers (estimate if necessary)	6		
	Ā	7a	Total unrelate	ed business revenue from Part VIII, column (C), line 12		0	
		Ь	Net unrelated	business taxable income from Form 990-T, line 38			
					Pnor Year	Current Year	
		8	Contributions	and grants (Part XIII-) ne (In )	173,34	1 171,503	
	ne	9	Program sen	vice revenue (Part Vitt, line 2g)		0	
€:	Revenue	10		ncomex Part VIII, column (A), lines 3(A), and 7d)	2	9 32	
2019	æ	11	Other revenu	e (Faff VIII, FotuBan [A] Inaas a 6d 8c, 9c, 10c, and 11e)		0	
00		12	Total revenue	e - apo lines 8 through 11 (must equal Part VIII, column (A), line 12)	173,37	0 171,535	
8		13	Grants and s	to or for members (Part IX, column (A), lines 1-3)	9,56	750	
¥		14	Benefits paid	to or for members (Part X, column (A) line 4)		0	
MAR	S	15	Salaries, other	er compensation, employee benefits (Part IX, column (A), lines 5-10)	. <u> </u>	0	
	Se	16a	Professional	fundraising fees (Part IX, column (A), line 11e)		0	
Ш	Expenses	þ	Total fundrais	sing expenses (Part IX, column (D), line 25) ▶			
NNED	щ	1	•	ses (Part IX, column (A), lines 11a-11d, 11f-24e)	174,67	4 162,865	
<b>4</b>		18	Total expense	es Add lines 13-17 (must equal Part IX, column (A), line 25)	184,23	5 163,615	
SCA		19	Revenue less	s expenses Subtract line 18 from line 12	(10,86	5) 7,920	
0)	issets or Balances			<u>  E</u>	eginning of Current Year	End of Year	
	sets	20	Total assets (	Part X, line 16)	27,41	4 35,335	
	Net As	21		s (Part X, line 26)	<del></del>	0	
				fund balances Subtract line 21 from line 20	27,41	<u>4</u> <u>35,335</u>	
		rt II		re Block			
	Unde true,	r penalti correct, a	es of perjury, I dec and complete Dec	larg that I have examined this return including accompanying schedules and statements, and to the best of my kno lagation of preparer (other than officer) is based on all information of which preparer has any knowledge	wiedge and belief, it is		
				41/4 + 1/1		1/05/15	
	Sig	The state of the s			1/23/11.		
	_		Signatur	William Fith Treasurer	Da	te	
	Her	е	700		······································		
			· · · · · · · · · · · · · · · · · · ·	onnt name and title	····		
	n-:	J	Print/Type pre		Check f	PTIN	
Paid J. Prater Gilbert Celle Filler 01-22-2019 self-employed						P01216186	
		parei		J. Peter Gilbert, CPA	Firm's EIN		
	USE	Only	Firm's address		Phone no	056 4065	
		=-		Waterville ME 04901  eturn with the preparer shown above? (see instructions)		356-6025 · · · · ⊠ Yes □ No	
	May 1	ine iRS	ז פוהו aiscuss ו	eturn with the preparer shown above? (see instructions)	<b></b>	1⊠ isə □ IAO	

	990 (2018) Maine Beer & Wine Wholesalers			<del> </del>	01-602118	0 Page 2
Pa	t III Statement of Program Service Accord					
	Check if Schedule O contains a response or note to	any line in this Part III			<del> </del>	····
1	Bnefly describe the organization's mission					and
	The purposes are to incorporate as a refor the protection and betterment of i					
	standard of the beverage industry, and					•
	co-operation.					
2	Did the organization undertake any significant program service	es dunng the year whi	ch were not listed on th	e		
	prior Form 990 or 990-EZ?				· · · 🗌 Yes	X No
	If "Yes," describe these new services on Schedule O					
3	Did the organization cease conducting, or make significant ch					
	services?				· · · 📙 Yes	X No
	If "Yes," describe these changes on Schedule O				•	
4	Describe the organization's program service accomplishment					
	expenses Section 501(c)(3) and 501(c)(4) organizations are		imount of grants and a	locations to others	<b>,</b>	
	the total expenses, and revenue, if any, for each program ser	уісе геропеа				
4a	(Code ) (Expenses \$	including grants of	\$	) (Revenue	\$	1
70	(Code) (Expenses #	_ including grants or	Ψ	_ / (1.6.46.106	<u> </u>	
	<u> </u>				<del></del>	
	*******					
			······································		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
	(					
46	(Code 1 ) (Expenses \$	including grants of	·	) (Revenue	\$	
4b	, (2-,5-1000 4	_ including grants of	<b></b>	_ ) (Nevenue	Ψ <u> </u>	
	*					· · · · · · · · · · · · · · · · · · ·
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						<del></del>
4c	(Code ') (Expenses \$	including grants of	\$	\ /Revenue	\$	)
46	(Code) (Expenses \$	_ including grants of	<u> </u>	_ ) (Nevende	Ψ	
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	<u> </u>					<u> </u>
	01 01 01			<del>_</del>		
4d	Other program services (Describe in Schedule O )	¢	) (Revenue \$		1	
40	(Expenses \$ including grants of Total program service expenses ▶	Ψ	) (IZEVELIUE D			
4e EEA	Total program sel vice expenses				Fo	orm <b>990</b> (2018)

Part IV

**Checklist of Required Schedules** 

Page 3

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Χ 1 Χ Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Χ candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Χ election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . . . . . . . . . . . . . . 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, Χ assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 6 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 "Yes." complete Schedule D. Part I X Did the organization receive or hold a conservation easement, including easements to preserve open space, Χ the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 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 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 Χ endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 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 11a Χ b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more Χ of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 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 X d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11d 11e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Χ the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If 12b "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E ...... 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, fundraising, business, investment, and program service activities outside the United States, or aggregate 14b Χ foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or Χ for any foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . . . . . . . . . . . . Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 16 Χ assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 17 Χ Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II ........... Χ Did the organization report more than \$15,000 of gross income from garning activities on Part VIII, line 9a? 19 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a 20 a 20b b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 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 ......

Pa	rt IV Checklist of Required Schedules (continued)	,		
			Yes	No
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		X
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	İ		
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$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	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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	25a		X
b	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?			İ
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or	1		
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	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		;	ļ
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			<u> </u>
_	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			- 11
	complete Sch-2dule N, Part II	32		Х
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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
-	or IV, and Pait V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			<u></u>
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			_ <del></del> -
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
••	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
•	19? <b>Note</b> . All Form 990 filers are required to complete Schedule O	38	Х	i
Part			- 2	
	Check if Schedule O contains a response or note to any line in this Part V			$\Box$
	Control of the contro	<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Form W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
C	reportable gaming (gambling) winnings to prize winners?	1c	Х	l
	reportable garning (garnoling) minings to prize miniers	ــــــــــــــــــــــــــــــــــــــ	۷,	

Form 990 (2018) Maine Beer & Wine Wholesalers Assoc., Inc.

Part V Stakements Regarding Other IRS Filings and Tax Compliance

			Yes	No
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 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1b		
	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		Х
b	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		Χ
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		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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 şolicit any contributions that were not tax deductible as charitable 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			
	and services provided to the payor?	7a		Χ
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			
	required to file Form 8282?	7c		Χ
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?	7e		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.	_		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter		,	
a	Initiation fees and capital contributions included on Part VIII, line 12			,
b ₄	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
١ _	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	against amounts due or received from them )			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
3	Section 501(c)(29) qualified nonprofit health insurance issuers.		ļ	
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	١		
С	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	,	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
-	excess parachute payment(s) during the year	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N			<del></del> -
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, 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 Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 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 12 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Χ 3 Did the organization delegate control over management duties customarily performed by or under the direct Χ supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 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? X 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? X Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Χ 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a . . . . . . . . . . . . . . . Each committee with authority to act on behalf of the governing body? 8b Χ 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) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . 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? 13 . . . . . . . . . . . . . 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 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? 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 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) 18 (3)s only available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Other (explain in Schedule O) Own website 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records 20 Capital Insights (207) 623-3800, P O Box 615, Augusta, ME 04332-0615 Form 990 (2018)

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Maine	Reer	٤	พากค	Wholes	alers	Assoc.	Inc.

01-6021180

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, 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 this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless 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

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

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

Position (B) (D) (E) (F) (do not check more than one Average Name and Title Reportable Reportable Estimated box, unless person is both an hours per officer and a director/trustee) compensation compensation from amount of eek (list any from other hours for organizations compensation related (W-2/1099-MISC) Individual trustee or director organization Institutional trustee from the Key employee lighest compensated (W-2/1099-MISC) organizations organization below dotted and related organizations (1) Michael Barriault Χ 0 0 (2) Amy Barriault X 0 0 (3) Ron Barriault Х 0 0 (4) Chris Black Χ 0 0 0 (5) Tim Longstaff Χ 0 0 O (6) Mike Runser Х O 0 0 (7) Doug Solman Χ 0 0 0 (8) Scott Solman Х 0 0 0 (9) Mike Barriault 0 0 0 (10)Nick Alberding 0 0 (11)Bill Fitch 0 0 (12) (13) (14)\_\_\_\_\_\_

Parl	Walne Beer & Wine VII Section A. Officers, Directors, Trustees,				_			sate	d Employees (cor	ntinued)	100		raye c
	(A) : Name and title	(B) Average hours per week (list any	Average box, unless person is both an officer and a director/trustee)				(D) Reportable compensation from	(E)  Reportable compensation from related		(F) Estimated amount of other			
						organizations (W-2/1099-MISC)	01	mpensati from the ganization	on				
		line)	ustee	trustee		/ee	npensated				1	ganizatio	
	·												
(15)_													
(16)													
(17)_													
<u>(18)</u>													
(19)_							<del></del>						
(20)_													
(21)					ŀ								
(22)_	·												
(23)												_	
(24)													
(25)									*				
1b	Sub-total			• • •	• • •		• • • '	<b>&gt;</b>					
c d	Total from continuation sheets to Part VII, Section Total (add lines 1b and 1c)							•		0	-		0
2	Total number of individuals (including but not limited							re tha		<u> </u>			
	reportable compensation from the organization		<del></del>							0			T
3	Did the organization list any former officer, director,	or trustee, kev	employ	ree.	or h	ahes	st com	pens	ated			Yes	No
	employee on line 1a? If "Yes," complete Schedule J	-				-					3		Х
4	For any individual listed on line 1a, is the sum of rep	-					-						
	organization and related organizations greater than \$ Individual :		-	•							4		X
5	Did any person listed on line 1a receive or accrue or										-		
	for services rendered to the organization? If "Yes," or	omplete Sched	ule J fo	r su	ch p	erso	n				5		Х
	on B. Independent Contractors	<del></del>									-		
1	Complete this table for your five highest compensation from the organization. Report compeyear												
	. (A)								(B)		·	(C)	
	Name and business address						0.40	20	Description of s	1	Com	pensation	
Cap1	cal Insights, P O Box 615, 45 Mel	ville St,	Augi	ıst	a,	ME	043	32_	Executive	Director	1	_107	,85 <u>6</u>
											<u> </u>		
2	Total number of independent contractors (including l				ted a	bov	e) who	)			1		
EEA	received more than \$100,000 of compensation from	tne organizati	on	<u> </u>			_			1	Form	990 (20	018)
· ·												,	•

Stat	tem	ent	of	Re	ve	ทม	e

Check if Schedule O contains a response or note to any line in this Part VIII							<u> [</u>
		{		(A) Total revenue	(B)  Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512-514
	1a	Federated campaigns 1a			1040,100		0.2011
ants	ь	Membership dues · · · · · · · · 1b	<del></del>	7			
ية و	6	Fundraising events 1c	1	1			
ξξ. Ā	ď	Related organizations · · · · · · · · 1d	<del></del>	1			
9. E	e	Government grants (contributions) - 1e	+	-			
Si Si	f	All other contributions, gifts, grants,		-			
the E	'	and similar amounts not included above					
Contnbutions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f \$		-			
కి కి	h			171,503	İ		
	<del>  "</del>	Total: Add lines 14-11	Business Code	171,503			
en	2a		Business Code	-			
ven	Ь		<del></del>				
a,	C						
2	ď						
a S L	٦						
Program Service Revenue	f .	All other program service revenue					
<b>P</b>	,	Total. Add lines 2a-2f					
	3						
	3	Investment income (including dividends, interest, and other similar amounts)		32	32		
	4	Income from investment of tax-exempt bond proc		32	32		
	5	Royalties · · · · · · · · · · · · · · · · · · ·					<del> </del>
	•	(i) Real	(II) Personal				<del>                                     </del>
	6a	Gross rents · · · · · ·	(II) Personal	1			
	ł.	Less rental expenses · · · ·		1			į
	ı	Rental income or (loss)		-			
	I .	Net rental income or (loss)		•		n 3	<u>'</u>
	1		(ii) Other			<del></del>	
	/a	Gross amount from sales of (i) Secunties assets other than inventory	(ii) Other	ĺ			
		Less' cost or other basis		,			
	"	and sales expenses					
	c	Cain or (loss)					
		Net gain or (loss)			^		' -
ě		Gross Income from fundraising				<del> </del>	
Other Revenue		events (not including \$			,		
Şe,		of contributions reported on line 1c)					
늄		See Part IV, line 18 · · · · · · · · a					
돩	ь	Less direct expenses b					
•	l	•					
	l	Gross income from gaming activities					
		See Part IV, line 19 · · · · · · · · a					
	ь	Less direct expenses b			,		
	ı			11		•	
	l	Gross sales of inventory, less					
	.va	returns and allowances a					
	ь	Less' cost of goods sold b					
		Net income or (loss) from sales of inventory · ·		1	* }		_
		Miscellaneous Revenue	Business Code				
	11a				·		
	ь						
	С	:					
	d	All other revenue					
		Total. Add lines 11a-11d					
			<b>&gt;</b> _	171,535	32	0	0

	Section 501(c)(3) and 501(c)(4)	organizations must complete all columns	All other organizations must complete column	1 (A)
--	---------------------------------	---	--	-------

	Check if Schedule O contains a response or note to ar	<del></del>			
Do r	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				'
	and domestic governments See Part IV, line 21	750	750		
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				1
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				<del></del>
5	Compensation of current officers, directors,				
	trustees, and key employees	•			:
6	Compensation not included above, to disqualified				
•	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	Other employee benefits				
10	Payroll taxes · · · · · · · · · · · · · · · · · · ·				
	<del>_</del>			<del></del> -	
11	Fees for services (non-employees)				
a	Management	125,155	125,155		
b	Legal	811	811		
C	Accounting	650	650		
d	Lobbying	16,853	16,853		
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				-
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	763	763		
14	Information technology				
15	Royalties				
16	Occupancy				-
17	Travel · · · · · · · · · · · · · · · · · · ·	10,918	10,918		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,783	2,783		<u> </u>
20	Interest · · · · · · · · · · · · · · · · · · ·	•			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,395	2,395		
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)	y ** 12		•	
а	Telephone	798	798		L
b	Printing and supplies	299	299		<del></del>
					<del></del>
c d	Subscriptions	1,440	1,440		
	All other expenses		-		
e 25	All other expenses	160 65 7	160 61-		
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	163,615	163,615	0	_0
20	organization reported in column (B) joint costs				•
	from a combined educational campaign and				
	fundraising solicitation Check here ▶ ☐ if				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

-		Check if Schedule O contains a response or note to any line in this Part X	(A)		(B)
		Cash - non-interest-bearing	Beginning of year	1	End of year
	1	Cash - non-interest-bearing	27,414	2	35,335
	2	Pledges and grants receivable, net		3	
	3	Accounts receivable, net		4	·
	4			-	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees	-	•	•
		Complete Part II of Schedule L		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	<del>.</del>	6	· · · · · · · · · · · · · · · · · · ·
ষ্ট	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ä	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or		ŀ	
		other basis Complete Part VI of Schedule D 10a		ا نیا	
	b	Less' accumulated depreciation · · · · · · · · · 10b		10c	<del></del>
	11	Investments - publicly traded securities		11	
ï	12	Investments - other securities See Part IV, line 11	<del> </del>	12	
	13	Investments - program-related See Part IV, line 11		13	<del></del>
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	27,414	16	35,335
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	<del> </del>
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	<del></del>
ies	22	Loans and other payables to current and former officers, directors,		İ	
ij		trustees, key employees, highest compensated employees, and			F -
Liabilities		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	}		
		partics, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D		25	<del></del>
	26	Total liabilities. Add lines 17 through 25	0	26	0
,,		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and			
Š		complete lines 27 through 29, and lines 33 and 34.			v
lan	27	Unrestricted net assets		27	
Ba	28	Temporanly restricted net assets		28	
Net Assets or Fund Balances	29	Permanently restricted net assets		29	
E		Organizations that do not follow SFAS 117 (ASC 958), check here			
os		complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
Asi	31	Paid-in or capital surplus, or land, building, or equipment fund		31	<del></del>
ž	32	Retained earnings, endowment, accumulated income, or other funds	_27,414	32	35,335
_	33	Total net assets or fund balances	27,414	33	<u>35,335</u>
	34	Total liabilities and net assets/fund balances	27.414	34	35.335

		L-6021	180	Р	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				$\cdot \square$		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		171,	535		
2	Total expenses (must equal Part IX, column (A), line 25)	2		163,	615		
3	Revenue less expenses Subtract line 2 from line 1	3		7,	920		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		27,	414		
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6	1				
7	Investment expenses	7					
8	Pnor penod adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9			1		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10		35,	335		
Pa	Part 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?	<i></i> .	. 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						
	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				ļ		
	Schedule O		_				
3a	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?	· · · · ·	. 3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the						
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	· · · · ·	. 3b				
EEA	•		Form	990 (2	2018)		

### 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

▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on 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

► Complete if the organization is described below.

Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on 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-B

If the organization answered "Yes," on 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(c)(4), (5), or (6) organizations Complete Part III **Employer identification number** Name of organization 01-6021180 Maine Beer & Wine Wholesalers Assoc., Inc. Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 ...... Enter the amount of any excise tax incurred by organization managers under section 4955 ..... 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No h If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, Did the filing organization file Form 1120-POL for this year? No Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received and funds If none, enter -0promptly and directly delivered to a separate political organization If none, enter -0-(1) (2) (3) (4) (5) (6)

$\overline{}$	dulb C (Form 990 or 990-EZ) 2018 Maine Beer &	Wine Wholes	alers Assoc.,	Inc.	01-6021	
Pa	art II-A Complete if the organization	n is exempt u	naer section 50	r(c)(3) and filed	Form 5/68 (elec	tion under
_	section 501(h)).		(and list in Dark IV and	h official again man		
Α	Check If the filing organization belongs to	_		ch amiliated group men	ibers name,	
_	address, EIN, expenses, and share	<del>-</del>				
<u>B</u>	Check Limits on Limits on Limits	ying Expenditure		· · · · · · · · · · · · · · · · · · ·	(a) Edua	(b) Affiliated
	(The term "expenditures" m				(a) Filing organization's totals	group totals
10					0.902000 totalo	g. c c p 10 m.c
1a b	Total lobbying expenditures to influence public opinion (grass roots lobbying)					
c	, (,, (,, (,,,,					
d						
e	out of other parties of parties of					
f	Lobbying nontaxable amount Enter the amount from					W-1-11-11-11-11-11-11-11-11-11-11-11-11-
	columns					
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	it is:		
	Not over \$500,000		nount on line 1e			
	Over \$500,000 but not over \$1,000,000		s 15% of the excess of	over \$500.000		
	Over \$1,000,000 but not over \$1,500,000		s 10% of the excess of			·`
	Over \$1,500,000 but not over \$17,000,000		s 5% of the excess ov			
	Over \$17,000,000	\$1,000,000				•
g	Grassroots nontaxable amount (enter 25% of line	1f)				
h	Subtract line 1g from line 1a If zero or less, enter	-0				
i	Subtract line 1f from line 1c If zero or less, enter -	0				
J	If there is an amount other than zero on either line	1h or line 1i, did th	e organization file Fo	rm 4720		
	reporting section 4911 tax for this year?			· · · · · · · · · · · · · · · · · · ·		Yes No
		4-Year Averagi	ng Period Under	section 501(h)		
	(Some organizations that made a se			•		below.
	See	the separate in	nstructions for lin	es 2a through 2f.		
	. Lobby	ing Expenditures	During 4-Year Avera	aging Period		<del></del>
	Calendar year (or fiscal year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
	beginning in)			``	''	, ,
						· · · · · · · · · · · · · · · · · · ·
2a	Lobbying nontaxable amount					
						<del></del>
b	Lobbying ceiling amount (150% of line-2a, column (e))	•				
	· · · · · · · · · · · · · · · · · · ·					<del></del>
С	Total lobbying expenditures					•
	ή.					<del></del>
đ	Grassroots nontaxable amount					•
_	Grassroots celling amount					
9	(150% of line 2d, column (e))					
				-		3
f	Grassroots lobbying expenditures		1	1	1	

Schedule C (Form 990 or 990-EZ) 2018

EEA

	dule C (Form 990 or 990-EZ) 2018 Maine Beer & Wine Wholesalers Assoc., Inc.	01-	6021	180	F	age 3
Pa	complete if the organization is exempt under section 501(c)(3) and has NOT file (election under section 501(h)).	eu r	Orm	5/00		
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed		a)		(b)	
des	conption of the lobbying activity	Yes	No	-	\moun	t
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	,		٠,		
a	i l		_			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		-			
C	Mailings to members, legislators, or the public?	-				
d	Publications, or published or broadcast statements?			_		
e f	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?			. –		
g h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
1	Other activities?					
,	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					<del></del>
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					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	• -				
	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	5). c	r 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	Did the organization agree to carry over lobbying and political campaign activity expenditures from the pnor year?			3		
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(					
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR	(b)	Part	III-A,	line 3	, is
	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).		<u>.</u> .			
а	Current year _ · · · · · · · · · · · · · · · · · ·		2a			
b	Carryover from last year	. [	2b			
С	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			
	rt IV Supplemental Information			•		
	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, lines 1	and				
(se	e instructions), and Part II-B, line 1. Also, complete this part for any additional information					
	·			•		
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Schedule C (Form 990 or 990-EZ) 2018

EEA

# 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.

OMB No 1545-0047 **2018** 

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Maine Beer & Wine Wholesalers Assoc., Inc.	01-6021180
01. Officer, directors, etc. family relationship (Part VI, line 2)	
The board and officers are members of family owned businesses and as suc	ch 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 7a)	•
,	
The members of the organization elect the governing body.	
OA Coverning body degrations (Port VI. Line 7h)	
04. Governing body decisions (Part VI, line 7b)	
All decisions of the governing body are approved by the members of the o	organization.
05. Form 990 governing body review (Part VI, line 11)	
The Form 990 is prepared by the staff of the organization in consultation	n with the tax
accountant. A draft is reviewed by the executive committee officers - P	resident / Vice
President / Treasurer.	
•	
06. Form 990 availability to public (Part VI, line 18)	
All governing documents, conflict of interest policy and financial state	ments are avilable
to the public upon request.	
07. Governing documents, etc, available to public (Part VI, line 19)	
All governing documents, conflict of interest policy and financial state	ments are
available to the public upon request.	