Form <b>990-7</b>	r   E	Exempt Organization Business Income Tax Retur	'n	OMB No. 1545-0047
	For ca			2020
	T Of Ca	lendar year 2020 or other tax year beginning, and ending, and the latest information.	— · I	LULU
Department of the T Internal Revenue Se	reasury rvice	<ul> <li>Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(</li> </ul>	3).	Open to Public Inspection for 501(c)(3) Organizations Only
A Check b address	ox if changed.	Name of organization ( Check box if name changed and see instructions.)	DEmpl	oyer identification number
<b>B</b> Exempt unde	r section Print	Maine Community Foundation, Inc.	0	1-0391479
X 501(c)(	3 ) or	Number, street, and room or suite no. If a P.O. box, see instructions.	EGroup (see i	exemption number
408(e)	220(e) Type	245 Main Street	`	,
408A	530(a)	City or town, state or province, country, and ZIP or foreign postal code	L_	
529(a)	529S	Ellsworth, ME 04605	<u></u> , F ∟	Check box if
		ok value of all assets at end of year 669,883,900.		an amended return.
			Applical	ole reinsurance entity
_	ng only to			
	. , . ,	ration filing a consolidated return with a 501(c)(2) titleholding corporation		<u></u>
		ed Schedules A (Form 990-T)		1 77
-	•	e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?		Yes X No
		d identifying number of the parent corporation.	/ 2 0 17	\ ((7,07))
		Michele Camarco Telephone number ►	(207	) 667-9735
		d Business Taxable Income		
		ss taxable income computed from all unrelated trades or businesses (see		0
instructio	,		. 1	0.
2 Reserved			. 2	
3 Add lines				0.
		(see instructions for limitation rules)		0.
		taxable income before net operating losses. Subtract line 4 from line 3		
	•	ing loss. See instructions	. 6	
		ss taxable income before specific deduction and section 199A deduction.	_	
	line 6 from line			1,000.
		erally \$1,000, but see instructions for exceptions)		1,000.
		duction. See instructions	9 10	1,000.
	ductions. Add li	nes 8 and 9  able income. Subtract line 10 from line 7. If line 10 is greater than line 7.	.   10	1,000.
		,	. 11	0.
enter zer	x Computat	ion		<u> </u>
		s corporations. Multiply Part I, line 11 by 21% (0.21)	▶ 1	0.
		rates. See instructions for tax computation. Income tax on the amount on	<u> </u>	•
	e 11 from:	Tax rate schedule or Schedule D (Form 1041)	▶ 2	
,	<b>x.</b> See instruction		3	
-	camounts. See			
	e minimum tax		·	
		cility income. See instructions	6	
		h 6 to line 1 or 2 whichever applies	7	0.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2020)

Form 990-T (2020) Page 2 Part III Tax and Payments 1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 1a Other credits (see instructions) General business credit. Attach Form 3800 (see instructions) 1c Credit for prior year minimum tax (attach Form 8801 or 8827) 1d Total credits. Add lines 1a through 1d 1e 0. 2 Subtract line 1e from Part II. line 7 2 Form 8697 3 Other taxes. Check if from: Form 4255 Other (attach statement) 3 Check if includes tax previously deferred under Total tax. Add lines 2 and 3 (see instructions). 4 0. section 1294. Enter tax amount here 0. 5 2020 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4 5 103,668 6a Payments: A 2019 overpayment credited to 2020 2020 estimated tax payments. Check if section 643(g) election applies Tax deposited with Form 8868 6c Foreign organizations: Tax paid or withheld at source (see instructions) d Backup withholding (see instructions) Credit for small employer health insurance premiums (attach Form 8941) f 6f Other credits, adjustments, and payments: Form 2439 \_\_\_\_ Other\_\_\_\_\_ 103,668. Total payments. Add lines 6a through 6g 7 Estimated tax penalty (see instructions). Check if Form 2220 is attached 8 8 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed 9 9 103,668. 10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid 10 Enter the amount of line 10 you want: Credited to 2021 estimated tax 103,668. Refunded ▶ 0. Part IV Statements Regarding Certain Activities and Other Information (see instructions) At any time during the 2020 calendar year, did the organization have an interest in or a signature or other authority No over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country Х During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a Х foreign trust? If "Yes," see instructions for other forms the organization may have to file. 3 Enter the amount of tax-exempt interest received or accrued during the tax year \$\ \bigs \}\_ Did the organization change its method of accounting? (see instructions) X If 4a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," <u>explain in</u> Part V Part V Supplemental Information Provide the explanation required by Part IV, line 4b. Also, provide any other additional information. See instructions. Under penalties of perjury, I declare than have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Peclaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign May the IRS discuss this return with Here Treasurer/CFO Signature of officer instructions)? X Yes No Print/Type preparer's name Preparer's signature Date Check PTIN self- employed Paid Nicholas E. Porto 11/02/21 P01310283 **Preparer** Firm's name ▶ Baker Newman & Noyes 01-0494526 Firm's EIN ▶ **Use Only** P.O. Box 507 Firm's address ▶ Portland, ME 04112 Phone no. (207)879-2100Form 990-T (2020)

023711 02-02-21

Entity

B Employer identification number

01-0391479

OMB No. 1545-0047

## **Unrelated Business Taxable Income** From an Unrelated Trade or Business

Department of the Treasury Internal Revenue Service

Name of the organization

Maine Community Foundation, Inc.

► Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

501(c)(3) Organizations Only

<b>c</b> u	Inrelated business activity code (see instructions) > 52000	0		<b>D</b> Seque	nce:	1 of 1
E D	escribe the unrelated trade or business ▶UBI from qua	1if	ying partnersh	nip in	teres	ts
Par	t I Unrelated Trade or Business Income		(A) Income	(B) Exper	ises	(C) Net
	Gross receipts or sales					
b	Less returns and allowances c Balance ▶	1c				
2	Cost of goods sold (Part III, line 8)	2				
3	Gross profit. Subtract line 2 from line 1c	3				
4 a	Capital gain net income (attach Sch D (Form 1041 or Form					
	1120)) (see instructions)	4a				
	Net gain (loss) (Form 4797) (attach Form 4797) (see instructions)	4b				
	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach	_	66,375.			66,375.
_	statement) Statement 1	5 6	00,373.			00,373.
6	Rent income (Part IV)	7				
7	Unrelated debt-financed income (Part V)	<b>-</b>				
8	Interest, annuities, royalties, and rents from a controlled	8				
9	organization (Part VI)  Investment income of section 501(c)(7), (9), or (17)	-				
3	organizations (Part VII)	9				
10	Exploited exempt activity income (Part VIII)	10				_
11	Advertising income (Part IX)	11				
12	Other income (see instructions; attach statement)	12				
13	<b>Total.</b> Combine lines 3 through 12	13	66,375.			66,375.
	Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business in	com	e 			ns must be
1	Compensation of officers, directors, and trustees (Part X)					
2	Salaries and wages					
3 4	Repairs and maintenance  Bad debts					
5	Interest (attach statement) (see instructions)				··	
6	Taxes and licenses				. 6	_
7	Depreciation (attach Form 4562) (see instructions)				··   •	
8	Less depreciation claimed in Part III and elsewhere on return				8b	
9	Depletion				9	
10	Contributions to deferred compensation plans					
11	Employee benefit programs					
12	Excess exempt expenses (Part VIII)					
13	Excess readership costs (Part IX)					
14	Other deductions (attach statement)					
15	Total deductions. Add lines 1 through 14				15	0.
16	Unrelated business income before net operating loss deduction. S	ubtrac	ct line 15 from Part I, line 13	,		
	column (C)				16	66,375.
17	Deduction for net operating loss (see instructions)				17	66,375.
18	Unrelated business taxable income. Subtract line 17 from line 16	3				
LHA	For Paperwork Reduction Act Notice, see instructions.				Schedul	e A (Form 990-T) 2020

	ule A (Form 990-1) 2020				Page 2
Part		hod of inventory valua		Т.Т	
1	Inventory at beginning of year				
2	Purchases				
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5			• • • • • • • • • • • • • • • • • • •	
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter	·			
<u>9</u>	Do the rules of section 263A (with respect to property				Yes No
Part	, , ,		_		
1	Description of property (property street address, city,	state, ZIP code). Chec	k if a dual-use (see ins	tructions)	
	<u>A</u> —				
	B				
	c				
	D	1			
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				_
4 5	in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through D. En		line 6, column (B)	·····•	0.
Part	V Unrelated Debt-Financed Income (s	ee instructions)			
1	Description of debt-financed property (street address,	city, state, ZIP code).	Check if a dual-use (se	ee instructions)	
	A				
	В 🔲				
	c 🗆				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				_
	financed property (attach statement)				
6	Divide line 4 by line 5		%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D		ırt I, line 7, column (A)	<b>&gt;</b>	0.
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A th	rough D. Enter here an	d on Part I, line 7, colu	ımn (B) 🕨	0.
11	Total dividends-received deductions included in line	.10			0.

												Entity	1
	ule A (Form 990-T) 2020											P	age 3
Part	VI Interest, Annu	uities, Royalties	, and Ren	its fro	m Contro			,		,			
							xempt Contro						
	1. Name of controlle	-	·		unrelated		al of specified		art of colur included			Deductions dir	-
	organization	identifi			ne (loss)	payn	nents made	l	olling orga			connected wit	
		num	iber	(see ins	tructions)			tion's	s gross inc	ome	ind	come in colum	in 5
<u>(1)</u>													
(2)													
(3)													
<u>(4)</u>													
		1			Controlled O		1						
7	7. Taxable Income	8. Net unrelat			tal of specif		10. Part of			11.		ductions direc	tly
		income (loss	′ I	pa	ayments made		that is included controlling organize				connected with		^
		(see instruction	ons)				gross	incom	ne	ın	com	e in column 1	J ——
<u>(1)</u>													
(2)													
(3)													
(4)													
							Add colum					lumns 6 and 1	
							Enter here line 8, c		,			ere and on Pai 8, column (B)	τι,
_						_			` ,			_,,,	^
Totals					(0) (47	<u> </u>	<u> </u>		0.				0.
Part		Income of a Sec	ction 501(	c)(/),	<del>' ' ' '</del>		T .					<del></del>	
	1. Desc	cription of income			2. Amou incon		3. Deduction		4. Set-		'nľ	5. Total deductions 5. and set-asi	
					IIICOII	ie	(attach state		(attach st	ateme	ent)	(add cols 3 ar	
							,				_		
(1)											_		
(2)											_		
(3)											_		
(4)					Add amou	ınte in						Add amount	e in
					column 2.							column 5. E	
					here and o	,						here and on F	
					line 9, colu	`_′						line 9, colum	_
Totals Part				<b>&gt;</b>	The second side	0.	I						0.
	Exploited E	xempt Activity	income, (	Jiner	inan Adv	ertisir	ig income (	see ins	structions)				
1	Description of exploite	·		Fut-		us Davit !	line 10 eather	(A)		,			

Expenses directly connected with production of unrelated business income. Enter here and on Part I,

Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete

Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line

line 10, column (B)

Gross income from activity that is not unrelated business income

Expenses attributable to income entered on line 5

Schedule A	(Form 990-T)	2020

5

4. Enter here and on Part II, line 12

Part	IX Advertising Income					
1	Name(s) of periodical(s). Check box if	reporting two or r	nore periodicals on a	consolidated bas	sis.	
	A					
	В					
	c $\square$					
	D					
Entor	amounts for each periodical listed above	in the correspon	nding column			
Linter	amounts for each periodical listed above			В	С	D
•	Out and and the state of the same	}	Α	<u> </u>		U U
2		L	44 1 (4)	<u> </u>		. 0.
	Add columns A through D. Enter here	and on Part I, line	e 11, column (A)		<b>&gt;</b>	
а		г		1		<u> </u>
3	Direct advertising costs by periodical			<u> </u>		
а	Add columns A through D. Enter here	and on Part I, line	e 11, column (B)		<b>&gt;</b>	0.
		-		,		
4	Advertising gain (loss). Subtract line 3					
	2. For any column in line 4 showing a	gain,				
	complete lines 5 through 8. For any co	olumn in				
	line 4 showing a loss or zero, do not c	omplete				
	lines 5 through 7, and enter zero on lir	ne 8				
5	Readership costs					
6	Circulation income					
7	Excess readership costs. If line 6 is les					
	line 5, subtract line 6 from line 5. If line	5 is less				
	than line 6, enter zero					
8	Excess readership costs allowed as a					
	deduction. For each column showing					
	line 4, enter the lesser of line 4 or line	-				
а	Add line 8, columns A through D. Ente	_	ne line 8a. columns to	otal or zero here a	nd on	
-	Part II, line 13	-				0.
Part	X Compensation of Office	rs. Directors.	and Trustees (s	ee instructions)		
			,	,	3. Percentage	4. Compensation
	1. Name		2. Title		of time devoted	attributable to
					to business	unrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
(4)					70	
Total	I. Enter here and on Part II, line 1					0.
Part						
Fait	Supplemental information	(see instructi	ons)			

Form 990-T (A) Income (Loss) from Partnerships	Statement 1
Description	Net Income or (Loss)
Abrams Capital Partners I - Ordinary Business Income	
(loss)	32,013.
Accolade Partners V, LP - Ordinary Business Income (loss)	739.
Accolade Partners VI, LP - Ordinary Business Income (loss)	2,173.
Commonfund Capital Natural Resource Partners VI - Ordinary	
Business Income (	8,819.
Commonfund Capital Natural Resource Partners VII -	
Ordinary Business Income	-4,388.
Commonfund Capital Natural Resource Partners VIII -	
Ordinary Business Income	45,957.
Commonfund Capital Natural Resource Partners IX - Ordinary	
Business Income (	79,341.
Commonfund Capital Natural Resource Partners X - Ordinary	
Business Income (1	-15,630.
Commonfund Capital Private Equity Partners V - Ordinary	
Business Income (los	-236.
Commonfund Capital Venture Partners VI, LP - Ordinary	
Business Income (loss)	193.
Commonfund Capital Venture Partners VII, LP - Ordinary	
Business Income (loss	-14.
Commonfund Capital Venture Partners VIII, LP - Ordinary	•
Business Income (los	-8.
Commonfund Capital Venture Partners IX, LP - Ordinary	20
Business Income (loss)	38.
Commonfund Capital Venture Partners X, LP - Ordinary	4 202
Business Income (loss)	4,292.
Commonfund Capital Venture Partners XI, LP - Ordinary	0.450
Business Income (loss)	9,452.
Davidson Kempner Institutional Partners, LP - Ordinary	2 402
Business Income (loss	-2,403.
Legacy Venture III, LLC - Ordinary Business Income (loss)	-289. -2,340.
Legacy Venture IV, LLC - Ordinary Business Income (loss) Legacy Venture VI (QP), LLC - Ordinary Business Income	-2,340.
(loss)	-116.
Legacy Venture VIII, LLC - Ordinary Business Income (loss)	-747 <b>.</b>
Metropolitan Real Estate Partners 2008 Distressed Credit	-/4/•
Co-Inve - Ordinary	-59.
Metropolitan Real Estate Partners IV-B, LP - Ordinary	33.
Business Income (loss)	-960.
Metropolitan Real Estate Partners V, LP - Ordinary	J 0 0 •
Business Income (loss)	-141.
Metropolitan Real Estate Partners VI, LP - Ordinary	747.
Business Income (loss)	-7.
Metropolitan Real Estate Partners VII, LP - Ordinary	7 •
Business Income (loss)	453.
Metropolitan Real Estate Partners VIII, LP - Ordinary	±33•
Business Income (loss)	-4,038.
	2,000

Maine Community Foundation, Inc.	01-0391479
Metropolitan Real Estate Partners IX, LP - Ordinary Business Income (loss)	2,837.
Park Street Capital Natural Resource Fund III, LP - Ordinary Business Income Park Street Capital Natural Resource Fund III AIV, LP -	2,954.
Ordinary Business In Park Street Capital Natural Resource Fund IV, LP -	-365.
Ordinary Business Income Park Street Capital Natural Resource Fund V, LP - Ordinary Business Income (	327. 6,546.
Park Street Capital Natural Resource Fund VI, LP - Ordinary Business Income Riva Capital Partners III, LP - Ordinary Business Income	28,849.
(loss) Riva Capital Partners IV, LP - Ordinary Business Income	8,706.
(loss) Superior Mineral Resources LLC - Ordinary Business Income (loss)	45,851. 5.
Thirteen Partners Private Equity 4, LP - Ordinary Business Income (loss)	-115,237.
Accolade Partners VII, LP - Ordinary Business Income (loss) Accolade Partners Growth I, L.P Ordinary Business	-10,589.
Income (loss) Moonrise Venture Partners I LP - Ordinary Business Income (loss)	-24,157. -21.
Riva Capital Partners V, LP - Ordinary Business Income (loss)	-3,839.
State Street MSCI EAFE Index Non-Lending - Ordinary Business Income (loss) Accolade Partners VIII, LP - Ordinary Business Income	19.
(loss) Accolade Partners Blockchain I, LP - Ordinary Business	-5,239.
<pre>Income (loss) Thirteen Partners Private Equity 6, LP - Ordinary Business Income (loss)</pre>	-9,231. -10,430.
Accolade Partners VI-C, LP - Ordinary Business Income (loss)	-2,705.
Total Included on Schedule A, Part I, line 5	66,375.

Form 990-T (A)	Post 2017 NOL Schedule	Statement 2				
Prior Year Post 2017 NOL	NOL Deduction	Carryforward of Post 2017 NOL				
374,441.	66,375.	308,066.				