

Town of Bridgton
Community Development Department

MEMORANDUM

To: Bridgton Selectboard
From: Tori Hill, Deputy Community Development Director
RE: CDAC Recommendations for CDBG Allocations
Date: 2/28/2022

Dear Selectboard,

Attached you'll find the Community Development Advisory Committee's CDBG allocation recommendations. These recommendations are based on an estimated \$200,000 from Cumberland County, as their actuals have not yet been released from HUD. Once the Town of Bridgton receives notice of actual allocations, the CDAC recommends funding the surplus or deficit from their recommended allocations to Bridgton Community Center, Bridgton Food Pantry, Town of Bridgton Recreation Department and Community HELP based on their allocation percentage of \$30,000.

Bridgton Community Center – 40%

Bridgton Food Pantry – 23.33%

Town of Bridgton Recreation Department – 23.33%

Community HELP – 13.33%

Respectfully,
Tori Hill

CDAC MEETING MINUTES 02/22/22

Chair: Ursula Flaherty

Members Present:* Helen Archer, Greg Bullard, Angie Cook, Evan Miller, Kevin Raday

Others Present: Tori Hill, Linda Lacroix, Robert McHatton, Bob Peabody

SELECT BOARD REPORT (Robert McHatton)

- Winter Fest was a great success with much thanks to the Chamber of Commerce for organizing it so well.
- LETT received approval from the Town to proceed with repairs and rehab to trails in Pondicherry Park under a grant.
- Pay Per Bag ordinance was sent to attorney for review, preparatory for its inclusion on the June Warrant.
- Matching funding for a consultant to handle the community input portion of the updated Comprehensive Plan will be pursued privately reducing the CDO budget request by \$10,000.

COMMUNITY DEVELOPMENT BLOCK GRANT

The Committee, with 6 members present, continued its deliberation on the CDBG funding recommendation to the Select Board. Since the last meeting, individual members had completed scoring sheets under criteria provided by the grantor and forwarded them to the CDO for compilation. At the beginning of this meeting, additional input was received from staff pointing to pressures on the coming Town budget for finite resources. While tax increases had been avoided in the last several years, inflation, supply chain constrains, and other events have made that seem unlikely to be maintained this year.

The committee discussed the funding for the Social Service component of the CDBG in terms of demonstrated need, evaluation criteria, previous funding, absence of CDBG-COVID funding, current funding requests, and possible alternative funding. In an ideal situation, it was felt that all the programs would be funded fully. Again, as last year, there are not enough funds to fully fund the Social Service component of the CDBG. The requests totaled \$48,340 while only \$30,000 is estimated to be available. Hence, as last year, difficult judgements have to be made in the Social Service component**.

The following is the CDAC 2022 recommendation for CDBG funding**

CDBG Infrastructure & Facilities \$130,000***

-Elm Street Sidewalk Extension
CDBG

CDBG Social Services \$ 30,000****

-Community Resource Navigator (BCC)

CDBG funds received 2021	\$10,920		
CDBG requested for 2022		\$15,000	
CDBG proposed for 2022			\$12,000
Request funded for 2022	80%		
Change over 2021	+10%		

-Food Pantry

CDBG funds received 2021	\$ 7,500		
CDBG requested for 2022		\$ 9,000	
CDBG proposed for 2022			\$ 7,000
Request funded for 2022	78%		
Change over 2021 CDBG	- 7%		

-Recreation Summer Day Camp

CDBG funds received 2021	\$11,687		
CDBG requested for 2022		\$12,600	
CDBG proposed for 2022			\$ 7,000
Request funded for 2022	56%		
Change over 2021 CDBG	-40%		

-Community HELP (Winter Wear)

CDBG funds received 2021	\$ 0		
CDBG requested for 2022		\$ 8,500	
CDBG proposed for 2022			\$ 4,000
2022 request funded	47%		
Change over 2021	-%		

-Rufus Porter Camp Invention

CDBG funds received 2021	\$ 0		
CDBG requested for 2022		\$ 3,240	

CDBG proposed for 2022			\$	0
2022 request funded	0%			
Change over 2021	-%			
		_____	_____	_____
		\$30,107	\$48,340	\$30,000

* Absent: Beth Cossey, Nelle Ely, Margaret Sanborn (recused)

**The Infrastructure & Facilities component of CDBG is \$130,000.

The Social Service component of the CDBG is limited to a maximum of 30% of the total grant; it can not be more. Community HELP (\$5,000) & Rufus Porter (\$2860) received other funding in 2021 from CDBG-COVID, a program that only existed for one year.

***The amount requested.

**** Estimated amount pending final figures from GPCOG.

CDAC MEETING MINUTES 02/09/22

CHAIR: Ursula Flaherty

Members Present:* Angie Cook, Evan Miller, Kevin Raday

Others Present: Tori Hill, Robert McHatton, Robert Peabody

SELECT BOARD REPORT (Robert McHatton)

The Select Board meeting began with the Chair emphasizing that negotiations with the Town Manager on a new contract were on-going; the current contract expires in June. Under Public Comments, a retired resident (with professional experience negotiating contracts for board approval) voiced his embarrassment with the non-professional manner in which negotiations with the Town Manager have been handled. Specifically, he cited the airing of the details of the contract negotiations in a public session by a member of the Select Board. He stated that is what executive sessions are for.

Community Development Director Linda Lacroix gave an overview of the process of updating the Comprehensive Plan. Details of how to do so are laid out in state statues for towns to follow; roles of all the various players are specifically spelled out therein. Details of the process were included in a packet of information provided to each member of the Select Board. The current Comprehensive Plan was done in 2014 and typically is updated every ten years; the aim is to have a new Comprehensive Plan completed for presentation to the voters in June 2024.

COMMUNITY DEVELOPMENT BLOCK GRANT

The Committee begin discussions on its CDBG funding recommendation to the Select Board for the fiscal year beginning July 1, 2022. The Committee focused on the Social Service Component of the grant where 5 organizations submitted requests totaling \$48,340. It is anticipated that the available funding will be approximately \$30,000, similar to last year. Thus, as last year, the Committee needs to carefully evaluate the requests, apply the scoring system supplied by the grantor, and make difficult judgements about the respective impacts of each proposal on the Bridgton community. As last year, there will not be enough funds to cover all requests.

In an ideal situation where more funding was available, the Committee would fund all the requests as it was determined that they each justified the need, documented the impact on the community, and were deemed worthy of full support. But with available funds expected to cover only 62% of the requests, hard decisions had to be made by the Committee on the recommendations to the Select Board. There simply are not enough funds available to cover all the requests.

The Committee recommends the following funding for CDBG for the fiscal year beginning July 1, 2022:

- Social Service Component (estimated \$30,000 available)
- Community Resource Navigator (BCC). 100% of request \$15,000.
- Food Pantry (Bridgton Food Pantry). 100% of request \$ 9,000.
- Winter Wear (Community HELP). 70% of request \$ 6,000.

This is the full request for the Community Navigator and the Food Pantry; 70% of the request for Winter Wear (the remaining funds); and no CDBG funding for the Recreation Department Summer Day Camp (\$12,600 requested) and the Rufus Porter Museum Camp Invention (\$3,240 requested). To be clear, the Committee found all these programs worthy and would fully fund them if that were an option.

The Committee strongly recommends to the Select Board that the funds in the amount of \$12,600 for the Recreation Department Summer Day Camp be included in the Town budget. The Committee views this as a basic Recreation Department function that should be funded annually by the Town itself.

For the Rufus Porter Camp Invention, the Committee encourages private individuals to make direct contributions to the Museum, as many did last year; each \$270 allows another child to attend this impactful national program.

It was noted that Town budget hearings held by the Select Board are open to public participation. This years hearings are on February 28 and March 1, starting at 9:00 AM and continuing through the day. Details on specific location within the Town Office and on remote participation to follow.

The next CDAC meeting is on February 23; it is imperative that members attend to ensure a quorum is present.

* Absent: Nelle Ely, Helen Archer, Greg Bullard (dental appointment),
Margaret Sanborn (recused)

TOWN OF BRIDGTON

Community Development Block Grant 2022-23 Program Year Recommendations

Applicants	Project	Scorer 1	Scorer 2	Scorer 3	Scorer 4	Scorer 5	Average	Requested	CDAC Recommendations	Final Select Board Recommendations
PUBLIC INFRASTRUCTURE & FACILITIES										
Town of Bridgton	Elm St. Sidewalk	100	95	100	100	100	99.00	\$136,886	\$130,000	
PUBLIC SERVICE										
Bridgton Community Center	Navigator	92	98	95	100	100	97.00	\$15,000	\$12,000	
Bridgton Food Pantry	Food Pantry	100	93	95	96	100	96.80	\$9,000	\$7,000	
Bridgton Recreation	Summer Rec Scholarships	98	88	80	92	100	91.60	\$12,600	\$7,000	
Community Help	Winter Wear	98	93	90	95	100	95.20	\$8,500	\$4,000	
Rufus Porter	Camp Invention	95	88	75	90	100	89.60	\$3,240	\$0	
ADMIN										
Victoria Hill	CDBG Admin-Bridgton	n/a	n/a	n/a	n/a	n/a	n/a	\$0	\$35,000	
Courtney Kemp	CDBG Admin-County	n/a	n/a	n/a	n/a	n/a	n/a	\$0	\$5,000	
Total Available:								\$200,000		
Total for Infrastructure:								\$130,000		
Total for Public Service:								\$30,000		
Total for Administration:								\$40,000		
Overage:								\$0		

These figures are estimates - Cumberland County has not released CDBG allocations yet
 On 2/23/22 the CDAC voted on a contingency plan to recommend to the Selectboard.

TOWN OF BRIDGTON

Community Development Block Grant 2021-22 Program Year Recommendations

LAST YEAR

Applicants	Project	Scorer 1	Scorer 2	Scorer 3	Scorer 4	Scorer 5	Average	Requested	CDAC Recommendations	Final Select Board Recommendations	
PUBLIC INFRASTRUCTURE & FACILITIES											
Town of Bridgton	Highland Beach Sidewalk	100	92	93	100	100	97.00	\$130,000	\$129,199	\$129,199	
PUBLIC SERVICE											
	Project										
Bridgton Community Center	Navigator	98	96	98	100	100	98.40	\$10,920	\$10,920	\$10,920	
Bridgton Food Pantry	Food Pantry	87	98	93	100	100	95.60	\$7,500	\$7,500	\$7,500	
Bridgton Recreation Department	Summer Rec Scholarships	93	90	97	95	100	95.00	\$12,600	\$11,395	\$11,395	
Community Help	Winter Clothing	94	90	90	80	85	87.80	\$5,000	Funded by Others	Funded by Others	
MSAD #61	Backpack	96	90	65	70	75	79.20	\$7,000	\$0	\$0	
ADMIN											
	CDBG Admin-Bridgton	n/a	n/a	n/a	n/a	n/a	n/a	\$0	\$34,753	\$34,753	
	CDBG Admin-County	n/a	n/a	n/a	n/a	n/a	n/a	\$0	\$5,000	\$5,000	
								Total Available:	\$198,767		
								Total for Infrastructure:	\$129,199	\$129,199	\$129,199
								Total for Public Service:	\$29,815	\$29,815	\$29,815
								Total for Administration:	\$39,753	\$39,753	\$39,753
								Overage:	\$0	\$198,767	



**Town of Bridgton
Community Development Block Grant
Public Service Application**

July 1, 2022 – June 30, 2023

APPLICATIONS DUE by 4:00 PM January 11, 2022

COMMUNITY DEVELOPMENT BLOCK GRANT
PROGRAM YEAR 2022-2023

II. SOCIAL SERVICE APPLICATION

COMPLETE APPLICATION CHECKLIST

Please submit each section of the application, including this checklist:

- A. Social Service Cover Page, *limit 1 page*
- B. Social Service Worksheet, *limit 2 pages*
- C. Social Service Narrative, *limit 7 pages*
- D. Budget: Revenues and Expenditures, attached separately, *limit 1 page*
Budget worksheet MUST match budget listed on the Cover Page, Summary page, and in the narrative
Multi-year initiatives must submit 2 budgets, 1 per year, limit 1 page per budget
- E. Social Service Summary, *limit 1 page*
[Complete this section in whole; this information will be provided to the Board of Selectmen at time of recommendation or upon request]

Required documents for non-profit organizations:

- Verification of 501(c)3 Status, *limit 1 page*
- Agency Organizational Chart to show how the proposed program fits into the overall organizational structure; include program staff or positions, *limit 1 page*
- Most Recent Agency Operating Budget Summary, *limit 1 page*
- Most Recent Independent Auditors Report and identified findings or if an Audit is not available the most recent 990 Financial Statement
- Complete list of Board Members

Supporting documents (subject to scoring):

- Project Timeline may be included in narrative or attached separately
- Partnership/Collaboration Memorandum of Agreement, *limit 2 pages*: may be one MOA that is two pages long or two MOAs that are one page each.
- Letter of Support, if there is no MOA; a letter of support may be submitted. *Limit 2 pages: can be one letter that's two pages long or two letters that are one page each.*

Camela Owen Brucker

Signature of the President, CEO, Executive Director or Town Manager

1/10/21
Date

*Town of Bridgton Community Development Block Grant Public Services Application
2022-2023*

A. SOCIAL SERVICE COVER PAGE, limit 1 page

**COMMUNITY DEVELOPMENT BLOCK GRANT
PROGRAM YEAR 2022-2023**

Application Type	<input checked="" type="checkbox"/> Standard Social Service		
Operating Agency	Community H.E.L.P. Inc.		
Program Name	Winter Wear Giveaway 2022		
Mailing Address	295 Highland Road Bridgton, ME 04009		
Address Services are Delivered	214 Main Street Bridgton, ME 04009		
Executive Director	Pamela Brucker	Phone 207-647-5029	Email bruckerw@live.com
Project Director	Laura McCabe	Phone 207-321-1988	Email Ljmccabe_69@yahoo.com
Financial Contact	Laura McCabe	Phone 207-321-1988	Email Ljmccabe_69@yahoo.com
Person who completed the Application	Pamela Brucker Laura McCabe Deborah Hall-Wisse	Phone Same for PB and LM	Email DHW 860-729-7968 Dhall-wisse@comcast.net
Amount of CDBG Funds Requested	\$8,500.00	Total Program Budget \$15,950.00	
DUNS Number	Tax ID EIN 46-4038448		

*Town of Bridgton Community Development Block Grant Public Services Application
2022-2023*

B. SOCIAL SERVICE WORKSHEET, limit 2 pages

1. **HUD National Objective.** Indicate which National Objective this program activity will address; choose one. Refer to National Objective description p. 3 for additional information.

Low and Moderate Income Clientele (LMC): an activity which provides benefits to a specific group of persons of which at least 51% qualifies as LMI Bridgtoners.

Does this activity benefit a population that HUD presumes to be low to moderate income, including *abused children, elderly persons, battered spouses, homeless persons, illiterate adults, severely disabled adults, persons living with AIDS, and migrant farm workers*?

No Yes (please circle appropriate population)

Low and Moderate Income Area Benefit (LMA): an activity *which is available to benefit all the residents of an eligible area/census tract, plus housing authority properties.*

If you choose LMA, please provide a map and outline on the map the area that your program serves.

2. **HUD Program Objectives.** Indicate which HUD program objective this program will address; choose one:

Creating a Suitable Living Environment

Providing Decent Affordable Housing

Creating Economic Opportunity

3. **Primary Goal.** Indicate the primary goal your program or project addresses; choose one. *Refer to the instructions p. 6 for additional information.*

Public Facility Improvements- *Improve accessibility and availability of public infrastructure*

Public Infrastructure Improvements- *Improve the quality of public infrastructure that primarily serves low to moderate income families*

Affordable Housing- *Promote activities that support affordable housing development and the rehabilitation of residential housing.*

Economic Opportunity: *Assist businesses through job creation programs*

Public Services- *Promote programs and activities that improve the quality of life for low and moderate income individuals.*

Community Planning- *Promote long range planning for the benefit of the community as a whole.*

4. **Beneficiaries.**

A. Describe the beneficiaries or clients served by the program.	A. Low-income individuals and families
B. How many will be served by the proposed program? (unduplicated -per year)	B. 300
C. How many are <i>residents of Bridgton</i> ?	C. 300
D. How many are <i>low to moderate income residents of Bridgton</i> ? See income data in the instructions	D. 300

**Town of Bridgton Community Development Block Grant Public Services Application
2022-2023**

E. What percentage of total clients are low to moderate income residents of Bridgton? (To calculate = $D/B * 100$; Must be > 51%)	E. 100%
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5. Units of Service. Describe the type of unit of service provided by the program.

A. Describe the type of unit of service provided by the program.	A. Items given- winterwear
B. How many units of service will be provided by the program?	B. 900-1200
C. What is the cost per unit of service?	C. \$30 - \$32.50
D. Explain the relationship between the cost per unit of service and the total program budget.	D. total budget is cost of items
E. What percentage of the total budget is CDBG?	E.53%

6. Program Objectives and Outcomes. Please list below.

Program Objectives	Outcomes/ Community Impact
Low-income individuals and families will have warm outerwear.	Increase the number of low-income populations receiving outerwear (aiming for 300)
Track percentages of low-income population receiving services	Database of low-income population receiving services compared to Bridgton low income population. This year was 70%.

7. Employees. Program specific, not for the entire organization.

A. How many employees are currently employed in this program?	A. 0
B. How many employees will be employed in this program if it receives CDBG funding?	B. 0
C. How many employees will be employed in this program if it does not receive CDBG funding?	C. 0 – all volunteers

8. Documentation

A. How will the beneficiaries' information be collected and documented?	A. Database of recipients
B. How will the units of service be tracked and documented?	B. Database of items given
C. How will the outcomes be measured, collected, and documented?	C. Project Director and Data Analyst will collect, record and analyze data.

Please limit the Social Service Worksheet to 2 (two) Pages.

Community HELP, Inc.
Application Narrative for Social Services,
Cumberland County Community Development Block Grant
2022 – 2023

1. Project Description:

Community HELP, Inc. is a non-profit organization that has operated in Bridgton for about 10 years helping to provide clothing, shoes, and household items to low-income individuals and families in the Bridgton area. We operate through our Thrift Shoppe at 214 Main Street in Bridgton. We are totally volunteer staffed as we have no paid workers. For the last two years, we have implemented a project called Winter Wear Giveaway. The first year we gave away donated items. This year, with the assistance of the Community Development Block Grant Corona Virus Relief Funds, we were able to enlarge our project to buy new outerwear items and to outfit more individuals. In discussion with the schools and parents, we learned that, when children do not have appropriate winter outerwear, they don't just miss recess. They do not come to school. They do not play outside at home or participate in various outdoor activities. They also have the risk of more illness. The goal of our Winter Wear Giveaway is to outfit as many individuals, mostly children, with jackets, snow pants, boots, hats, mittens/gloves, and socks as possible. The project is run by our volunteers under the leadership of our Senior Project Advisor, Laura McCabe. We currently have 15 people who volunteer on a regular basis in our shop. Starting in the summer, prior to the Giveaway, our Senior Project Coordinator directs the purchase of winter wear. An effort is made to find the lowest prices available. By the time comes to implement the project, we have a stock of jackets, snow pants, boots, hats, mittens, gloves and socks of varying sizes. During the Giveaway, a schedule of two or more open houses is developed. These have varying days and times to accommodate working parents and school aged children. Individual appointments are also available. Parents are required to bring their children in to be fitted, so that no items go to waste. During a visit, a volunteer works with the family to find the items that are needed and to help the parent fill out an information form that lists the individual's name, age, school, items and sizes received (or ordered if we do not have them in stock). The data from these forms are translated into a

spreadsheet by our Data Analyst, Deborah Hall-Wisse. We advertise our project by contacting school administration and social workers who send information sheets to every household. We also use social media to advertise our project daily. We also distribute information sheets to various organizations that may have clientele that can benefit from our program. Included in these are Bridge Crossing, Headstart, Bridgton and Harrison Food Pantries, and the Community Center. We continue to take appointments, past the open houses, and into the winter. Based on an analysis of our data, and comments from care givers and parents, we have expanded our Winter Wear Project for the coming year to put increased emphasis on two areas in addition to the individuals and families we currently have targeted. These include:

Headstart and Preschool: This year we outfitted numerous babies and preschoolers. They mostly came as part of a family with school aged children. We wondered if we were missing preschoolers from families with no children in school. They may not have seen the information sheets or advertising. We also had referrals and requests from preschool parents and teachers. For instance, there is currently no Headstart Program in the MSAD 61, Lake Region area. The closest is the Headstart Program at Oxford. and we have had referrals from them. There is currently an Early Childhood Program at the Lake Region Vocational Center. They have 16 preschoolers enrolled. Finally, there is a chance that MSAD 61 will have a universal preschool run by the school district in the 2022-2023 school year. We would target individuals in all these programs through specific outreach to the directors and teachers.

Middle and High School: This year, about 15 adolescents, mostly from the high school, sought help with obtaining winter wear. Most requested were jackets and boots. We realized that this population of students might not attend an open house- either because of social embarrassment or lack of transportation. With the 2022 project, we will concentrate on reaching these students by working with school administration and staff, and by holding an open house during the day at each school. Students will be able to request needed items at each open house or through their guidance counselors.

2. Need for the Project:

Currently, the economic situation in Bridgton and in Cumberland County is not healthy. According to the most recent U.S. Census data, in Cumberland County, 8.7% of the population lives below the poverty level, while in Bridgton

10.8% of the population lives below the poverty level. (www.uscensusbureau.gov). According to the website www.welfareinfo.org, the population in Bridgton living below the poverty level is 13.3%. Currently, the poverty level in the US is \$ 26,500 for a family of four. The average per capita income in Bridgton is \$32,000. The average household income is \$56,000, which may include extended family members living in the same household (www.uscensusbureau.gov) About 50% of MSAD 61 Lake Region Schools students are eligible for free or reduced lunch. This percentage is lower than previous years because the federal government has provided breakfast and lunch at no cost during this pandemic, so the need for parents for file applications was diminished, Previously, that figure has been closer to 70%. (figures provided by MSAD 61 administration). At the same time, unemployment in November 2021 was at 3.8% up from 2.0% in previous years. The cost of household operations is up 8.4%, and the cost of outerwear is up 5% in one year, (+ 6.7% for males and +3.4% for females), (Consumer Price Index, Bureau of Labor Statistics). Even with our discount shopping, the value cost of outfitting a child in appropriate winter wear is between \$100 and \$150. Most families cannot afford these costs given the current financial information. This year, we distributed 973 items, an increase of almost 100% from the previous year. So many times, we hear from families that they do not know what they would do if we were not doing this project. We also have gotten referrals from teachers. One teacher called to ask of we had a size 4 boots. Her student had come in the day before wearing boots. The next day he had none. When she asked what he had done with the boots he had on the day before, he stated that it was his brother's day to wear them. Clearly, the higher unemployment rate and the increased price of goods has created the "perfect storm" for families trying to outfit their children for winter.

3. Project Management:

Community HELP, Inc. as a nonprofit organization, is managed by a Board of Directors (see attached supporting documents). Along with the board, we have an Executive Director of the Thrift Shoppe, Laura McCabe, who manages all the operations of the shop. Her assistant, Debra Grant, helps her to manage this operation. Laura is also the Senior Project Advisor of the Winter Wear Giveaway. For the last two years, she has done the purchasing, scheduling of appointments and open houses, scheduling of volunteers, ordering, outreach and advertising, and data collection. This year we have added our Data Analyst, Deb Hall-Wisse. Deb translates all data to a spreadsheet that allows us to quickly see then number and

type of items given as well as the gender and ages of the individuals who receive the items. Laura collects all the data and maintains the budget. This will be Laura's third year in directing this project, so she is amply experienced in how to run the Winter Wear Giveaway. The assistant helps to organize the clothing items, the volunteers, and families who arrive for a fitting. To date, through this project, we have developed and nurtured a consistent clientele, who come to us when they have a need for clothing.

4. Readiness to Proceed.

Having successfully completed this project for two years, we have had the opportunity to evaluate the project to determine what is going well and what needs to be updated. This evaluation has determined the need for an increase in the project's scope to an increased emphasis on preschool and secondary schools. Given this expansion, all of the individuals who manage the project and the volunteers will be helpful in doing an open house at the middle and high schools, and at Headstart in Oxford Hills. As stated previously, we have no Headstart Program in MSAD 61. We will continue to hold open houses and appointments as we have previously. The distribution is only one aspect of the project. Record keeping helps us to understand the requests we get for winter wear. Analyzing this data, that is converted to spread sheets by our Data Analyst, has shown us that this year, we need to increase our services to preschool, Headstart, Middle and High School. We have updated our spreadsheets, data collection forms, and project management for the 2022-2023 year (see attached support documents). Likewise, we have continued to keep a list of our contacts for the grant to ensure that we are reaching everyone who needs our services. We have complete control of the project and are fully ready to proceed.

5. Budget for the Project:

In addition to the \$8500.00, we are requesting from the CDBG, the project is supplemented with funds from Community HELP operating budget, in kind volunteer hours, and donations.

1. \$750.00 from Community HELP operating budget. These funds purchased additional outwear for low-income individuals who need it before the grant funds are available and after the funds have been expended.

2. \$4200.00 in In-Kind Services. This amount represents 148 volunteer hours at a value of \$28.34 per hour (Maine Association of Non Profits,

recommended hourly volunteer value for 2021) for set up and break down of shop for each giveaway event, working at open houses and appointments, organizing and storing away items.

3. \$2500.00 donations from the community of winter wear throughout the year.

4. \$8500.00 from Community Development Block Grant to be used to purchase items for Winter Wear Giveaway including new jackets, snow pants, boots, hats, mittens, gloves, and socks.

Total Budget for 2022 Winter Wear Giveaway = \$15,950.00

6. Implementation schedule:

If we are awarded the grant to fund the project for 2022-2023, as soon as the funds become available, we will begin purchasing winter wear. This is generally around the middle to end of March. In August, we will plan our Winter Wear Open House dates for 5 days each in October and November 2022. We also schedule the individual day open houses at the middle and high schools. In August, we will also connect with the schools and other outreach organizations to ensure that information is distributed to the community. By the beginning of December 2022, we will analyze the collected data and prepare the final report which is due by December 31, 2022.

7. Demonstration of Need for CDBG Funds:

Yearly, we ask for donations of winter wear from individuals and groups. While we get many clean, usable items, we frequently get items that have broken zippers, rips, stains, and items such as inner liners missing. Those items are not given during the project but are donated to Salvation Army and/or Goodwill. We also have very dedicated donors who knit and crochet hats and mittens and gloves which enables us to spend less money on those items. We also occasionally get monetary donations which we direct to the project. Those donations amount to about \$750 yearly. Previously, we have applied for discretionary grants. Most grant donors will not allow an application to be submitted within 2-3 years of an award. We received one award from the HAM Foundation that was intended and used for moving (we moved 3 times in the last 3 years). We were rejected for awards from two other organizations. We received a small grant from the United Way of Greater Portland in 2020 to assist us in reopening to provide clothing to families affected by covid. We used those funds to store our clothing until we

could reopen in our current location. The United Way Corona Virus funds are primarily intended to provide food and shelter for those who lost employment during that time. Fortunately for us, they were able to do a fourth round of fund distribution that targeted other essentials. We feel that the CDBG is the most appropriate for our organization and for this project because it is targeted to the Bridgton area, it compliments and expands our ability to service low-income individuals and families because the grant has a social service focus.

8. Partnerships, Collaboration, and Outreach:

We are applying as a single entity. We do not formally partner with any other organizations. We do collaborate with several other organizations who have the same mission as ours or deals with the same clientele. These include, The Bridgton Food Pantry, MSAD 61 Lake Regions School District (including the Lake Region Vocational Center) administrators, social workers, guidance counselors, etc., Bridge Crossing, Headstart Program Oxford, Tri County Counseling, Lake Region Recovery Center, Through These Doors (domestic violence agency), and Bella Point.

D. BUDGET FORM , *limit 1 page*

Complete one program budget spreadsheet for each program application.

Feel free to edit categories under Revenues or Expenditures as relevant to your program or project.

PROGRAM OR PROJECT NAME:

Winter Wear Giveaway 2022

OPERATING AGENCY:

Community H.E.L.P. Inc.

CDBG Program Year (PY): July 1, 2022- June 30, 2023*

REVENUES	Please indicate: Secured or Projected	Revenues TOTAL
CDBG Request 2022-2023	\$8,500.00	\$8,500.00
Other HUD Funds (please list)	0	
a.		
Other Federal Funds (please list)	0	
a.		
b.		
State/ County Funds (please list)	0	
a.		
b.		
City Funds		
Private Funds (Grants, Fundraising, etc, please list)		
a. Donations	\$2,500.00	\$2,500.00
b. Community H.E.L.P. Budget Funds	\$750.00	\$750.00
In Kind Services	\$4,200.00	\$4,200.00
TOTAL PROGRAM or PROJECT REVENUE		

EXPENDITURES	Expenditures CDBG	Expenditures All Other Sources	Expenditures TOTAL
Administration	0	0	0
Employee Salaries	0	0	0
Employee Fringe Benefits	0	0	0
Professional Services/ Consultant	0	0	0
Equipment	0	0	0
Materials/Supplies	\$8,350.00	\$7,450.00	\$15,800.00
Office Space (Program only)	0	0	
Construction costs	0	0	
Insurance	0	0	
Advertising & Public Information	\$150.00	0	\$150.00
Other, please specify			
a.			
b.			
c.			
d.			
e.			
TOTAL PROGRAM or PROJECT EXPENSES	\$8,500.00	\$7,450.00	\$15,950.00

* A second Budget form will need to be submitted for multi-year social service requests.

*Town of Bridgton Community Development Block Grant Public Services Application
2022-2023*

E. SOCIAL SERVICE SUMMARY, limit 1 page,

Application Type	<input checked="" type="checkbox"/> Standard Social Service		
Operating Agency	Community H.E.L.P. Inc.		
Program Name	Winter Wear Giveaway		
Funds Requested	\$8,500.00		
Program Summary			
HUD National Objective <i>Refer to Section II.B.1</i>	<input checked="" type="checkbox"/> Low to Moderate Income Limited Clientele, will this serve a population HUD presumes to be low income? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Low to Moderate Income Area Benefit, if chosen describe service area: Service area:		
HUD Program Objective <i>Refer to Section II.B.2</i>	<input checked="" type="checkbox"/> Creating Suitable Living Environment		
	<input type="checkbox"/> Providing Decent Housing		
	<input type="checkbox"/> Creating Economic Opportunity		
Beneficiaries/ Clients Served - Refer to Section II.B.4			
Client Description	Low-Income Individuals and Families		
Number of Clients Served	300		
Number of LMI Bridgtoners	300		
LMI Bridgton Percentage	100%		
Units of Service - Refer to Section II.B.5			
Type of Unit of Service	Items given (Winter Wear)		
Number of Units Provided	900-1200		
Cost per Unit of Service	\$ 30.00 - \$32.50	\$	
Outcomes - Refer to Section II.B.6			
Low-income individuals and families will have warm winter wear.			
Budget - Refer to Section II.D Budget			
\$8,500.00	CDBG Request (Must match CDBG Request on Cover Page and Budget Worksheet)		
\$15,950.00	Total Program Budget (Must match Total Budget on Cover Page and Budget Worksheet)		
53%	Percentage of CDBG Request of Total Budget [50% or less indicates at least a 1 to 1 match]		
Leveraged Funds – Refer to Section II.D Budget – all columns must be complete, enter a 'zero' if needed.			
\$0	Federal	\$0	Other grants
\$0	State	\$0	Endowment
\$0	County	\$3,250.00	Private Funds
\$0	Town (not CDBG)	\$4,200.00	Gifts in kind

Date: JUL 21 2014

COMMUNITY H E L P INC
C/O PATRICIA WININGER
7 NULTY ST.
BRIDGTON, ME 04009

46-4038448
DIN:
17053065350044
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
February 21, 2014
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

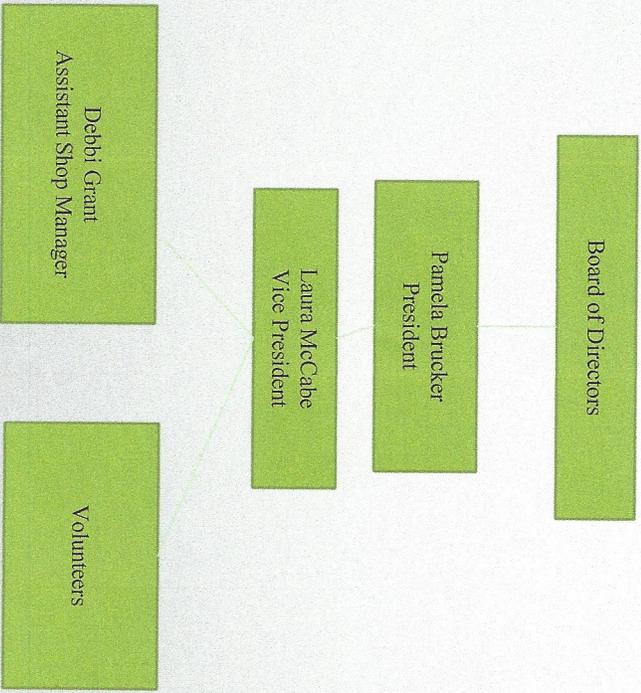
Sincerely,



Director, Exempt Organizations

Letter 947

Community H.E.L.P. Organizational Chart





2022 Annual Budget for Community Help Inc.

\$1,200.00- Utilities towards the cost of running the building(church)

\$1,200.00 – Insurance Policy

\$300.00- Plowing cost split with the Food Pantry (\$600.00 TLT CARPENTRY PLUS)

\$390.00 -6 Months of Internet (Split with Food Pantry (6 months CH pays/6 Months Food Pantry pays)

\$100.00- Licenses

\$480.00 – Phone services

\$1,500.00 Office supplies and Bags for sales

\$750.00 Purchases for items for the 2022 Winter Wear Giveaway

Total for the budget for 2022 - \$5,920.00

Approved:

Sandra McCabe VP

Electronic Notice (e-Postcard)

OMB No. 1545-2085

Department of the Treasury
Internal Revenue Service

for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

2020

Open to Public Inspection

For the 2020 Calendar year, or tax year beginning 2020-01-01 and ending 2020-12-31

- Check if available
- Terminated for Business
- Gross receipts are normally \$50,000 or less

C Name of Organization: COMMUNITY HELP
295 Highland Road,
Bridgton, ME, US, 04009

D Employee Identification
 Number 46-4038448

Website:

F Name of Principal Officer: Maureen A McDevitt
15 Cushman Lane, Bridgton,
ME, US, 04009

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times are 15 minutes.

Note: This image is provided for your records only. Do Not mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.

Need the 2022 version

Maureen

Board Of Directors, Community H.E.L.P

- Pamela Brucker, President
295 Highland Road, Bridgton, ME 04009 (207) 647-5209 bruckerw@live.com
- Laura McCabe, Vice President, Thrift Store Director and Chairperson of the Winterwear Giveaway
36 Alpine Rd, Bridgton, ME 04009 (207) 321-1988 ljmccabe_69@yahoo.com
- Maureen McDevitt, Treasurer
15 Cushman Lane, Bridgton, ME 04009 (207) 461-3090 mmcd1952@gmail.com
- Diane Burnham, Executive Secretary
6 Ballard Street, Bridgton, ME 04009 (207) 595-4152 bobbysgirl4evr.67@gmail.com
- Megan Wallace, Recording Secretary and Member
388 Burnham Road, Bridgton, ME 04009 (540) 820-1769 care4all888@yahoo.com
- Deb Hall-Wisse, Corresponding Secretary and Data Analyst
9 Journey's Path, Bridgton, ME 04009 (860) 729-7968 dhall-wisse@comcast.net
- Debbi Grant, Thrift Store Manager and Member
9 Fowler Street, Bridgton, ME 04009 (207) 595-7389 nagledeb2000@yahoo.com
- Marcy Davis, Member
23 Chadbourne Hill Road, Bridgton, ME 04009 207-461-0135 Marcy_dvs@yahoo.com

MEMORANDUM OF UNDERSTANDING
BETWEEN
THE BRIDGTON COMMUNITY CENTER
AND
COMMUNITY HELP

SECTION 1 PREAMBLE

- (a) The Bridgton Community Center (BCC) is acting as the coordinating 501(c)3 between the Bridgton Food Pantry (BFP) and New England United Methodist Conference (NEUMC). The NEUMC has agreed to allow the BFP to continue at the Methodist Church on Main Street in Bridgton and the Community Help (CH) until July 1, 2021. This agreement is between the BCC and the CH as regards their use of the upstairs of the Main Street Church.
- (b) Non-profit status The Community Help warrants that it is a nonprofit corporation under the laws of Maine and a 501(c)3 corporation under the Internal Revenue Code and Regulations and will remain so during the terms of this .
- (c) Insurance. Community Help agrees to carry and maintain liability insurance covering all Community Help activities.
- (d) Term. This agreement shall commence on the date of execution and conclude June 30, 2021.

SECTION 2 USE OF PREMISES

- (a) Community Help shall have the right to use and have access to the upstairs (ground floor) including right of ingress and egress and the right to utilize common areas incident to using the Premises.
- (b) Community Help shall have the right to use the ground floor in conjunction with the BFP for the duration of the term.
- (c) Community Help shall continue to provide goods to moderate to low income people at reduced prices or no cost. Shall operate up to 4 days per week, three days open to the public and Tuesdays for Bridgton Food Pantry clients exclusively.
- (d) Community Help shall secure Church belongings in a singular location protected from the public.
- (e) Community Help will not make alterations the décor of the Church including attaching fixtures to the walls.

SECTION 3 FINANCIAL ARRANGEMENTS

- (a) Community Help shall have retail sales in accordance with their license and if they chose, they may make donations to the BFP to support costs of the building maintenance.
- (b) It is understood that rental from the former parsonage owned by NEUMC will cover utilities.

SECTION 4 DISPUTES

- (a) In the event there is a dispute between the BFP and CH it will be resolved by the BCC.

_____ Date
President BCC Board of Directors

_____ Date
President CH Board of Director

January 3, 2022

Re: Letter of Support for Community Help

To Whom It May Concern,

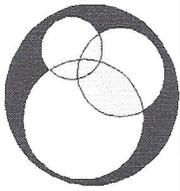
I am writing this letter of support for Community Help, as they have been a resource that has provided a powerful impact on our community. I am a social worker in the Bridgton area and local school district where I am asked for help with resources both inside and outside of my work day. Community Help has helped countless families and individuals in our community. This time of year as the weather gets colder, we have many children and families that are in need of coats, boots, snow pants, hats, and gloves. Community Help has provided these individuals with this needed "gear" which has been more important this year because it has been so difficult for traditional stores to keep these items in stock. Community Help has had an even more important impact this year due to the financial strains that COVID-19 has placed on families. Families that historically have been able to access basic clothing and winter gear have had to turn to resources like Community Help and have greatly benefited from what they are able to provide. Without this resource, many families, children, and adults in our community would not have the necessary basic protection from our cold winters. They have also provided our school nurses with clothing to have when students come to school in dirty or soiled clothing, have accidents during the day, or simply do not have clothes that fit them or are appropriate to the weather. Our school nurse sent out a school email asking teachers to not send students to her office looking for clothing because she didn't have any. I emailed her the contact information for Community Help, and within a day or two she had almost 8 bags of clothing for our students that needed it. I also had a family friend ask where he could donate heating fuel, and when I reached out to Community Help, they were able to point us in the right direction with where that fuel could be used. Over the past several years we have been fortunate to have this resource in our community, which has made an impact in nothing but positive ways. Thank you for listening and have a great day!

Sincerely,



Jaimie Klimek

jaimie.klimek@lakeregionschools.org



NFI North, Inc.

Inspiring and empowering people to reach their full potential and live successfully in their community.

www.nfinorth.com

1-844-NFI-HOPE (834-4673)

Bridge Crossing
Bridge Crossing Academy
15 Wayside Avenue
Bridgton, ME 04009
Telephone: (207) 647-4404

January 3, 2022

Community Help,

We needed you and you were there.

We are so grateful for the 2021 Community Help Inc. Winter Wear Giveaway, which has allowed us to provide 10 children with new winter gear. Bridge Crossing provided the needed sizes, and Community Help generously created individual bags for each child, each packaged with jackets, snow pants, boots, gloves, socks, and hats.

These necessary items cost an average of \$150 per child, and this donation lessens the financial burden on Bridge Crossing and the families we serve.

We would like to thank you again for the 2021 Community Help Inc. Winter Wear Giveaway which provides us with peace of mind by ensuring each child stays warm during the cold winter months here in Maine.

With appreciation,
Bridge Crossing & Bridge Crossing Academy

2022 Community H.E.L.P Winter Wear Giveaway Appendix

- 1 • Volunteers and Mission Statement
- 2 • Collaborating Agencies
- 3 • Budget for the 2022 Winter Wear Giveaway
- 4 • Community H.E.L.P. Winter Wear Giveaway Information Sheet
- 5 • Community H.E.L.P. Donation Form



Back row standing left to right: Tony Thompson, William Brucker, Megan Wallace (Ass't to Secretary/Board Member). Next Row: Laura J. McCabe (Vice President/Executive Director/Board Member), Pamela Owens-Brucker (President/Board Member), Maureen McDevitt (Treasurer/Board Member) Next Row: Sandy Morton, Deb-Hall-Wisse (Data Analyst/Board Member), Debbi Grant (Shop Ass't Manager/Board Member), Anita Williams, Darcy Williams, Next Row Front: Marcy Davis (Board Member) Sterling Burham, Diane Verill-Burham (Secretary/Board Member)

Mission Statement

The Mission of Community H.E.L.P is to assist economically struggling members of the community by providing access to inexpensive items such as clothing, housewares. All of which are donated by people within our wonderful community.

**Community H.E.L.P
(Helping Enrich Lives of People)**



2. Collaborating Agencies

1. Bridgton Food Pantry
2. Bridgton Community Center
3. Lake Region Schools SAD 61
4. Tri County Counseling
5. Lake Region Recovery Center
6. Through These Doors- Domestic Violence Services
7. Bridge Crossing - NFI North
8. Preble Street Homeless Shelter- Portland
9. Jeanette's Closet
10. Maine Needs- Portland
11. Bella Point Nursing Homes
12. Bridgton Hospital

3. Budget for the 2022 Winter Wear Giveaway

\$750.00- Community Help Inc. Funds

\$4,200.00 Community Help Inc. In Kind Donations –
Hours value, set up and giveaway open houses hours, Appointments, tear down of the giveaway and
storing away of items for following year.

\$2,500.00 Value -Donations from community of items of Winter Wear Gear

\$8,500.00 From Grant – Community Development Block grant

TOTAL FOR OUR 2022 Winter Wear Giveaway Project \$15,950.00

Our goal is to ensure no one goes cold from not having warm winter clothing.

4. **Community Help Inc.**
2022 WINTER WEAR GIVEAWAY

Name: _____ Town / School: _____

Jacket: _____ Snow pants: _____

Boots: _____ Hat: _____

Gloves: _____ Socks: _____

Item given: _____ Ordered Items _____

Phone #: _____ Age: _____

Volunteers Signature: _____

How did you hear about the Giveaway ? _____

5.



Community H.E.L.P., Inc.
214 Main Street
Bridgton ME 04009
chevecutiveboard@gmail.com
(207) 647-5000

Date

Name

Address

City, State Zipcode

Dear Name:

Thank you so much for your donation of items to our thrift shop.

With the support of good friends like you, we can continue to fulfill our mission to provide struggling members of our community with access to inexpensive, gently-used clothing, household items, and personal needs.

Please retain this letter for tax purposes, if applicable.

Gratefully yours,

NAME

TITLE

Helping Enrich Lives Program
Community H.E.L.P., Inc. is a 501(c)(3) tax-exempt organization - EIN 46-4038448
Donations are tax deductible to the full extent of the law.

BRIDGTON REC

SUMMER DAY CAMP



PLAY, LEARN, GROW TOGETHER

Town of Bridgton
Department of Recreation
Summer Day Camp Program
Mailing: 3 Chase St. Bridgton, Maine 04009
Service Location: 26 N. High St. Bridgton, ME 04009

Director: Gary Colello
207-647-1126 rec@bridgtonmaine.org

Community Development Block Grant 2022 Application
CDBG Funding Request: \$12,600
Total Summer Day Camp Budget: \$64,370
Tax ID: 01-6000082
 Standard Social Service

SOCIAL SERVICE COVER PAGE, limit 1 page

**COMMUNITY DEVELOPMENT BLOCK GRANT
PROGRAM YEAR 2022-2023**

Application Type	<input checked="" type="checkbox"/> Standard Social Service		
Operating Agency	TOWN OF BRIDGTON		
Program Name	BRIDGTON REC SUMMER DAY CAMP		
Mailing Address	3 CHASE ST BRDIGTON		
Address Services are Delivered	26 N HIGH ST		
Executive Director		Phone	Email
Project Director	GARY COLELLO	Phone 647-1126	Email REC@BRIDGTONMAINE.ORG
Financial Contact	HOLLY HEYMANN	Phone 647-8786	Email
Person who completed the Application	GARY COLELLO	Phone	Email
Amount of CDBG Funds Requested	\$12,600	Total Program Budget \$64,370	
DUNS Number		Tax ID 01-600082	

National Objective this program activity will address:

- Low and Moderate Income Clientele (LMC):** an activity which provides benefits to a specific group of persons of which at least 51% qualifies as LMI Bridgtoners.

Does this activity benefit a population that HUD presumes to be low to moderate income, including *abused children, elderly persons, battered spouses, homeless persons, illiterate adults, severely disabled adults, persons living with AIDS, and migrant farm workers?*

The Summer Day Camp Program will serve low to moderate income children in Bridgton.

HUD Program Objectives. Indicate which HUD program objective this program will address

- Creating Economic Opportunity**

Primary Goal. Indicate the primary goal your program or project addresses

Public Services- *Promote programs and activities that improve the quality of life for low- and moderate-income individuals.*

Beneficiaries.

A. Describe the beneficiaries or clients served by the program.	A. Families with children ages 5-13
B. How many will be served by the proposed program? (unduplicated -per year)	B. Total Participants: 125 children
C. How many are <i>residents of Bridgton?</i>	C. 95% Scholarships- 100%
D. How many are <i>low to moderate income residents of Bridgton?</i> See income data in the instructions	D. No Data / Scholarships based off income
E. What percentage of total clients are low to moderate income residents of Bridgton? (<i>To calculate = D/B * 100; Must be > 51%</i>)	E. Historical data shows 15-25 children per week on scholarships

Units of Service. Describe the type of unit of service provided by the program.

A. Describe the type of unit of service provided by the program.	A. Weekly Scholarships To Attend Day Camp
B. How many units of service will be provided by the program?	B. 18 Weekly Scholarships
C. What is the cost per unit of service?	C. \$100 per week +\$25-30 Enrichment Trips
D. Explain the relationship between the cost per unit of service and the total program budget.	D. Staffing/Equipment/Transportation
E. What percentage of the total budget is CDBG?	E. 0% used as additional scholarship funding

Program Objectives and Outcomes

Objective 1: To provide quality childcare in the summer months while school is out on break. The Day Camp program provides weekly care for 8 weeks in late June, July, and August for all ages 5 to 13.

Objective 2: To provide low-cost summer day programming for all families and scholarship relief for low to moderate income families. Pre-Coronavirus data suggest 63% of children in Bridgton are on free or reduced lunch in the school district. 6 out of 10 children in Bridgton are unlikely to afford full time care during the summer months. With the relief of summer care families can build on a suitable sustainable living environment. Working family members also will have reliable childcare thus creating more opportunity for stable employment and/or better economic opportunity.

Objective 3: To be a supplemental recourse for knowledge and education for children. Our program is dedicated to offering swim lessons, STEM projects, and community service opportunities. Children who participate in our program will continue providing educational opportunity which in turn will improve quality of life moving forward.

Employees. *Program specific, not for the entire organization.*

A. How many employees are currently employed in this program?	A. 8
B. How many employees will be employed in this program if it receives CDBG funding?	B. 8
C. How many employees will be employed in this program if it does not receive CDBG funding?	C. 8

Documentation

How will the beneficiaries' information be collected and documented? How will the units of service be tracked and documented? How will the outcomes be measured, collected, and documented?

The Recreation Department uses Active.com as its registration / online portal. Participants can register for programs, check account information, and receive notifications. Active.com features various reports such as financial, attendance records, and past program usage, sufficient for what is requested by the CDBG program.

Program Description:

The Summer Day Camp program is a Recreation Department summer daycare program for children ages 5 to 15. The program operates in

the summer months at the Bridgton Town Hall and Ice Rink from 8:00 AM to 5:00 PM Monday through Friday. The Teen Camp will be operating in 2021 for the first time however it was funded for 2020 but due to the COVID-19 pandemic the department was unable to operate the 12-15 portion of the program.

Need for the Project:

This program is the only summer daycare in Bridgton that can support multiple elementary and middle school aged children at an affordable rate.

63% of children or 6 out of 10 children in Bridgton qualify for the Free or Reduced Lunch Program. Maine students are eligible for free or reduced breakfasts and lunches if their household income is 130% (free) or 180% (reduced) of the federal poverty guidelines.

Without scholarships most of children who qualify for Summer Day Camp Scholarships will unlikely attend the summer program due to the financial strain to send their child. Most will admit it is easier to stay home with an older sibling, family member, friend, or just stay home alone while members of the family are working.

Project Management:

The Director of Recreation will manage the day-to-day operations of the program. The Director will oversee the administrative requirements of billing, attendance, and scholarship distribution.

Although the Recreation Department is not required to be a certified location the Department follows the STATE OF MAINE DEPARTMENT OF HEALTH AND HUMAN SERVICES Children's Licensing and Investigation Services Child Care Licensing guidelines.

Readiness to Proceed:

This will be the Departments 8th year of operation. There are various local organizations such as the Rotary who have donated funds to go on extra field trips, the Community Center who have let our program cook and bake during the week, and the school department does not charge for use of facilities.

There will be several returning staff members returning to work for the Recreation Department, some for as little as their second year and others approaching twenty years.

Budget for the Project:

The total budget for the Summer Day Camp program is \$64,370.

Staffing:

\$35,620 – 8 Staff Members (CPR, First Aid, Safe Sport Certified)

Transportation / In Program Equipment / Entry Fees for Enrichment Trips

\$20,875

Scholarship Money from Town of Bridgton Recreation budget:

\$7,875 – 84 Total Weekly Scholarships or 12 Full Time Scholarships

An additional \$12,600 would provide an additional 18 Full Time Scholarships or 126 Weekly Scholarships.

If CDBG funds were dedicated to the Summer Program here is what it would look like:

Program Capacity

Teens: 40

Elementary: 80

Scholarships Available Per Week: 30 children/teens

Implementation Schedule:

Registration will open in the coming months. Typically, in January registration is open.

Program begins second half of June 2022 and ends August 2022.

Scholarships will also be eligible for June 2023 since the first weeks of the Summer Day Camp program will start in the last weeks of the fiscal year.

The program operates in the summer months at the Bridgton Town Hall, Ice Rink, School Buildings from 6:00 AM to 6:00 PM Monday through Friday.

Demonstration of Need:

Besides local organizations such as the Rotary, Lions Club, Knights of Columbus, and others alike there have been no other sources of funding this upcoming fiscal year.

Partnership, Collaboration, and Outreach:

Due to the COVID-19 pandemic there are no partnerships in place at this time besides the school and the usage of the school building. However, it is important to note this program has partnered and collaborated with Lake Environmental Association, The Bridgton Library, the Bridgton Community Center, other Recreation Departments, and American Legion Post #67. It is likely once the pandemic has past, we will return to working with local organizations to better the overall participants experience during their summer.

E. SOCIAL SERVICE SUMMARY, limit 1 page,

Application Type	<input checked="" type="checkbox"/> Standard Social Service		
Operating Agency	Town of Bridgton		
Program Name	Recreation Department Summer Day Camp		
Funds Requested	\$12600		
Program Summary			
Summer Day Camp Program run during the summer months for 5 to 15 year old children.			
HUD National Objective <i>Refer to Section II.B.1</i>	<input checked="" type="checkbox"/> Low to Moderate Income Limited Clientele, will this serve a population HUD presumes to be low income? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low to Moderate Income Area Benefit, if chosen describe service area: Service area:		
HUD Program Objective <i>Refer to Section II.B.2</i>	<input type="checkbox"/> Creating Suitable Living Environment <input type="checkbox"/> Providing Decent Housing <input checked="" type="checkbox"/> Creating Economic Opportunity		
Beneficiaries/ Clients Served - Refer to Section II.B.4			
Client Description	Income Qualified Participants		
Number of Clients Served	Serve 96 participants		
Number of LMI Bridgtoners	Scholarships would serve 18 full scholarships per week		
LMI Bridgton Percentage	No Data		
Units of Service - Refer to Section II.B.5			
Type of Unit of Service	Scholarships		
Number of Units Provided	CDBG 18 weekly		
Cost per Unit of Service	\$100	\$	
Outcomes - Refer to Section II.B.6			
Youth + Funding = Opportunity for a fun educational experience with peers.			
Budget - Refer to Section II.D Budget			
\$12600	CDBG Request (Must match CDBG Request on Cover Page and Budget Worksheet)		
\$64370	Total Program Budget (Must match Total Budget on Cover Page and Budget Worksheet)		
19.57%	Percentage of CDBG Request of Total Budget [50% or less indicates at least a 1 to 1 match]		
Leveraged Funds - Refer to Section II.D Budget - all columns must be complete, enter a 'zero' if needed.			
\$0	Federal	\$0	Other grants
\$0	State	\$0	Endowment
\$0	County	\$0	Private Funds
\$64,370	Town (not CDBG)	\$0	Gifts in kind

COMMUNITY DEVELOPMENT BLOCK GRANT
PROGRAM YEAR 2022-2023

II. SOCIAL SERVICE APPLICATION

COMPLETE APPLICATION CHECKLIST

Please submit each section of the application, including this checklist:

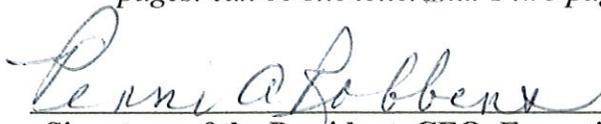
- A. Social Service Cover Page**, *limit 1 page*
- B. Social Service Worksheet**, *limit 2 pages*
- C. Social Service Narrative**, *limit 7 pages*
- D. Budget: Revenues and Expenditures**, attached separately, *limit 1 page*
Budget worksheet MUST match budget listed on the Cover Page, Summary page, and in the narrative
Multi-year initiatives must submit 2 budgets, 1 per year, limit 1 page per budget
- E. Social Service Summary**, *limit 1 page*
[Complete this section in whole; this information will be provided to the Board of Selectmen at time of recommendation or upon request]

Required documents for non-profit organizations:

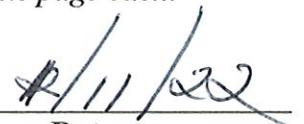
- Verification of 501(c)3 Status**, *limit 1 page*
- Agency Organizational Chart** to show how the proposed program fits into the overall organizational structure; include program staff or positions, *limit 1 page*
- Most Recent Agency Operating Budget Summary**, *limit 1 page*
- Most Recent Independent Auditors Report and identified findings** or *if an Audit is not available* the most recent 990 Financial Statement
- Complete list of Board Members**

Supporting documents (subject to scoring):

- Project Timeline** may be included in narrative or attached separately
- Partnership/Collaboration Memorandum of Agreement**, limit 2 pages: may be one MOA that is two pages long or two MOAs that are one page each.
- Letter of Support**, if there is no MOA; a letter of support may be submitted. *Limit 2 pages: can be one letter that's two pages long or two letters that are one page each.*



Signature of the President, CEO, Executive Director or Town Manager



Date

*Town of Bridgton Community Development Block Grant Public Services Application
2022-2023*

A. SOCIAL SERVICE COVER PAGE, limit 1 page

**COMMUNITY DEVELOPMENT BLOCK GRANT
PROGRAM YEAR 2022-2023**

Application Type	<input checked="" type="checkbox"/> Standard Social Service		
Operating Agency	The Bridgton Food Pantry		
Program Name	The Bridgton Food Pantry		
Mailing Address	PO Box 207 Bridgton, ME 04009		
Address Services are Delivered	214 Main St. Bridgton, ME (Former Bridgton Methodist Church)		
Executive Director	Penni Robbins	Phone 207-318-4467	Email penni Robbins06@gmail.com
Project Director	Penni Robbins	Phone 207-318-4467	Email penni Robbins06@gmail.com
Financial Contact	Karen Hawkins	Phone 207-647-3734	Email barefoot@offthewallemposium.com
Person who completed the Application	Joanne Cohn	Phone 617-306-1956	Email joanne.cohn@comcast.net
Amount of CDBG Funds Requested	\$ 9000	Total Program Budget \$ 38,185	
DUNS Number		Tax ID 84-2851490	

*Town of Bridgton Community Development Block Grant Public Services Application
2022-2023*

B. SOCIAL SERVICE WORKSHEET, limit 2 pages

1. **HUD National Objective.** Indicate which National Objective this program activity will address; choose one. Refer to National Objective description p. 3 for additional information.

- Low and Moderate Income Clientele (LMC):** an activity which provides benefits to a specific group of persons of which at least 51% qualifies as LMI Bridgtoners.

Does this activity benefit a population that HUD presumes to be low to moderate income, including *abused children, elderly persons, battered spouses, homeless persons, illiterate adults, severely disabled adults, persons living with AIDS, and migrant farm workers?*

- No Yes (please circle appropriate population)

- Low and Moderate Income Area Benefit (LMA):** an activity which is available to benefit *all the residents of an eligible area/census tract*, plus housing authority properties.

If you choose LMA, please provide a map and outline on the map the area that your program serves.

2. **HUD Program Objectives.** Indicate which HUD program objective this program will address; choose one:

- Creating a Suitable Living Environment**
- Providing Decent Affordable Housing**
- Creating Economic Opportunity**

3. **Primary Goal.** Indicate the primary goal your program or project addresses; choose one. *Refer to the instructions p. 6 for additional information.*

- Public Facility Improvements-** *Improve accessibility and availability of public infrastructure*
- Public Infrastructure Improvements-** *Improve the quality of public infrastructure that primarily serves low to moderate income families*
- Affordable Housing-** *Promote activities that support affordable housing development and the rehabilitation of residential housing.*
- Economic Opportunity:** *Assist businesses through job creation programs*
- Public Services-** *Promote programs and activities that improve the quality of life for low and moderate income individuals.*
- Community Planning-** *Promote long range planning for the benefit of the community as a whole.*

4. **Beneficiaries.**

A. Describe the beneficiaries or clients served by the program.	Low to moderate income Bridgton residents with food insecurity who need access to free food to support their families.
B. How many will be served by the proposed program? (unduplicated -per year)	Approximately 286 households.
C. How many are <i>residents of Bridgton?</i>	Approximately 270 households.
D. How many are <i>low to moderate income residents of Bridgton?</i> See income data in the instructions	Approximately 270 households; 621 people @ 2.3/ household.

*Town of Bridgton Community Development Block Grant Public Services Application
2022-2023*

E. What percentage of total clients are low to moderate income residents of Bridgton? (<i>To calculate = D/B * 100; Must be > 51%</i>)	94%
	E.

5. **Units of Service.** Describe the type of unit of service provided by the program.

A. Describe the type of unit of service provided by the program.	A. Food expense per Bridgton pantry visit.
B. How many units of service will be provided by the program?	B. 3750
C. What is the cost per unit of service?	C. \$2.40
D. Explain the relationship between the cost per unit of service and the total program budget.	D. \$2.40 is 47% of the total cost per pantry visit.
E. What percentage of the total budget is CDBG?	E. CDBG is 24% of the total budget.

6. **Program Objectives and Outcomes.** Please list below.

Program Objectives	Outcomes/ Community Impact
To provide low and moderate income Bridgton residents with access to nutritious food in a dignified manner.	Will provide 3750 pantry visits to Bridgton residents.
To provide nutrition information to encourage selection of healthy food choices.	Clients will choose fruits and vegetables more often and have a healthier diet.
To provide referrals to other social service organizations as needed, Salvation Army vouchers.	Refer clients in need to the Bridgton Community Center, Community Health; provide S.A. vouchers.

7. **Employees.** Program specific, not for the entire organization.

A. How many employees are currently employed in this program?	A. None
B. How many employees will be employed in this program if it receives CDBG funding?	B. None
C. How many employees will be employed in this program if it does not receive CDBG funding?	C. None

8. **Documentation**

A. How will the beneficiaries' information be collected and documented?	A. All clients will fill out a registration form with required information.
B. How will the units of service be tracked and documented?	B. The Pantry receptionist keeps a log of all client visits. This log is used to create monthly activity reports.
C. How will the outcomes be measured, collected, and documented?	C. The weekly visit log will be used to create monthly activity reports..

Please limit the Social Service Worksheet to 2 (two) Pages.

C. Social Service Narrative

1. Program Description

The Bridgton Food Pantry (“the Pantry”) has been in operation since 1985 at the United Methodist Church at 214 Main St. in Bridgton. When the church stopped operations, the Bridgton Food Pantry re-organized as a separate entity and was granted 501 (c)(3) charity status in 2019. The church has continued to allow the pantry to operate out of the basement, but this arrangement is indefinite given that the church is no longer in operation. In 2021, the church required that the Pantry assume responsibility for insurance and utilities which has added an estimated \$13,225 in expenses.

The Bridgton Food Pantry is an all-volunteer organization that is open to the public every Tuesday of the year from 11am-6 pm. Clients select their own food grocery store style rather than being given a bag of assorted food that they may not want or use.

2. Need for the Project

Statistics for Maine and the town of Bridgton demonstrate the need for a local food pantry that can offer meat, dairy, and fresh fruits and vegetables in addition to shelf-stable food. According to The Good Shepherd Food Bank research, 13.5% of Mainers experienced hunger in 2021, a 9% increase over 2019. For Bridgton, this translates to 730 residents experiencing food insecurity. In fact, Maine is ranked 6th in the nation as having very low food security, meaning that some people have such inadequate access to food that they actually have disrupted eating patterns. According to the 2020 census 10.8% of Bridgton residents live in poverty, 22% do not have health insurance and 24% are over the age of 65—all factors that can potentially contribute to food insecurity.

COVID adds to the already challenging economic picture. Families dependent on low-level jobs in sectors affected by the pandemic have suffered economic losses and the government programs aimed at providing financial support are ending. The unemployment rate in Maine in November, 2021 was 4.8%, higher than the U.S. rate of 4.2%. On top of that, the inflation rate has been over 5% for every month since June, with the November rate hitting 6.8%, the highest since 1982. The cost of food has risen 6% and the cost of gasoline has risen 58%, both of which disproportionately affect lower income people.

This year, the Bridgton Food Pantry has been serving approximately 145 families a week and registering approximately 5 new families every week. The Pantry has the most hours of operation of any food pantry in the surrounding area. The food pantry at St. Joseph’s church is only open one day per month for limited hours.

3. Project Management

The Bridgton Food Pantry has an eight-person board of directors that meets monthly. Penni Robbins has been volunteering in the Pantry since 2007 and has been the (volunteer) Executive Director since 2007. The Pantry is part of the Good Shepherd Food Bank network, an affiliation that is only possible after a certification process assuring that the Pantry adheres to current food safety standards.

The Pantry is staffed by 15 volunteers who have been trained in all aspects of pantry operation with particular emphasis on treating all clients with dignity and respect. Food presentation encourages selection of fresh fruits and vegetables by providing supplemental nutritional information and recipes.

Food is purchased from the Good Shepherd Food Pantry at minimal cost (\$0.08/lb.); Rock Mountain in Poland provides beef and chicken at discounted prices; and both Food City and Hannaford's generously donate food. Individuals donate food and cash throughout the year and this year's "Stuff-the-Truck" event brought in an estimated 1500 lb. of household cleaning supplies and toiletries, items not usually carried in food pantries.

4. Readiness to Proceed

The Pantry has welcomed the additional demand for services since the pandemic and is prepared to continue serving a higher volume of clients as long as necessary.

5. Budget for the Project (See attached budget.)

The Bridgton Food Pantry is currently operating at a deficit of \$10,385 as a result of having to pay insurance and utility costs for the first time. The propane is particularly expensive at \$7200/yr. because the space is not well insulated. Although the Pantry is only open to the public one day a week, food is being delivered and stored at least 3 days a week.

The Bridgton Food Pantry is requesting \$9000 in CDBG funding to pay the food cost for 3750 Bridgton pantry visits. The estimated annual food expense is \$18,000 and the average visit volume is 145 visits/week (7540/yr.). The food cost per visit is therefore estimated at \$2.40/visit. Although we anticipate that Bridgton residents will make 7088 pantry visits next year (94% of total visits), we are requesting funding for just 3750 visits. This is an increase of \$1500 over last year's CDBG funding which and is needed to support the Pantry's steady increase in new clients. Next year may be even more challenging for Bridgton residents if a higher rate of inflation adds to the economic hardship caused by the pandemic. The Pantry will seek grants and private donations to make up for the budget shortfall.

6. Implementation Schedule

The Bridgton Food Pantry is prepared to continue serving local residents from July 1, 2022 until June 30, 2023. The only issue that could affect our ability to provide services is our being asked to leave our current location before we are able to find a more permanent space. The board is actively seeking alternative space and has sufficient reserves to lease space until June 30, 2023 if necessary.

7. Demonstration of Need for CDBG Funds

Recognizing the need for additional funding sources beyond CDBG, the board of directors has begun to do more aggressive fundraising through grant writing and individual solicitations. The Pantry has submitted a Capacity Building Grant application to The Good Shepherd Food Pantry to purchase two air-curtain refrigeration units to display cut vegetables and dairy products (\$9998). If successful, the grant will be awarded in February, 2022. The Pantry did its first direct-mail solicitation to Bridgton residents in early December and has been very pleased with the generous response. So far, the mailing has brought in over \$20,000.

8. Partnerships, Collaboration and Outreach

The Bridgton Food Pantry had partnered with The Good Shepherd Food Bank since 2000 for the provision of low-cost food. Food City and Hannaford's make weekly donations of food to the Pantry. Rock Mountain provides beef and chicken at a discounted rate.

The Salvation Army provides \$3500 in vouchers to assist needy families with critical needs. The Salvation Army also provides free toys during the holidays to the children of Pantry clients. These activities are under the control of the Salvation Army and are not part of the Pantry's budget.

Clients can request vouchers for free clothing from the Community Help thrift store located above the Pantry.

Clients are also referred to the Bridgton Community Center for fuel assistance and social service support through its Navigator program. The Bridgton Community Center, in turn, refers clients with food insecurity to the Pantry.

Although a formal collaboration isn't necessary, St. Joseph's Food Pantry refers clients to the Pantry when they have needs beyond what they are able to support through their monthly pantry hours.

Bridgton Food Pantry
Budget for YE 6/30/2022

Revenue		Total
Cash Donations		
Donations @ pantry	\$ 1,050	
Other (checks, gift cards)	\$ 14,250	
Stuff-a-Truck	\$ 500	\$ 15,800
Bottle redempton	\$ 1,000	\$ 1,000
Grants		
CDBG	\$ 9,000	
Other grants	\$ 2,000	\$ 11,000
Total Revenue		\$ 27,800
Expenses		
Food Purchases		
Good Shepherd	\$ 13,000	
Rock Mountain	\$ 5,000	
Other (Blackies, etc.)	\$ 500	\$ 18,500
Utilities		
CMP	\$ 4,000	
Dead River	\$ 7,200	
Water	\$ 500	\$ 11,700
Telephone/internet	\$ 1,200	\$ 1,200
Postage	\$ 200	\$ 200
Equipment maintenance (refrig.)	\$ 700	\$ 700
Travel (Gas for truck)	\$ 960	\$ 960
Plowing	\$ 600	\$ 600
Insurance (GL, Auto, D&O)	\$ 1,525	\$ 1,525
Office supplies	\$ 300	\$ 300
Pantry supplies (cleaning, misc.)	\$ 500	\$ 500
Other	\$ 2,000	\$ 2,000
Total Expenses		\$ 38,185
Surplus/Deficit		\$ (10,385)

*Town of Bridgton Community Development Block Grant Public Services Application
2022-2023*

E. SOCIAL SERVICE SUMMARY, limit 1 page,

Application Type	<input checked="" type="checkbox"/> Standard Social Service		
Operating Agency	The Bridgton Food Pantry		
Program Name	The Bridgton Food Pantry		
Funds Requested	\$ 9000		
Program Summary			
The Bridgton Food Pantry provides low to moderate income Bridgton residents access to nutritious food at no cost. The Pantry operates 52 weeks a year every Tuesday from 11 am to 6 pm. Signage and recipes encourage clients to make healthy food choices. Referrals are made to other local agencies to provide additional support.			
HUD National Objective <i>Refer to Section II.B.1</i>	<input checked="" type="checkbox"/> Low to Moderate Income Limited Clientele, will this serve a population HUD presumes to be low income? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Low to Moderate Income Area Benefit, if chosen describe service area: Service area:		
HUD Program Objective <i>Refer to Section II.B.2</i>	<input checked="" type="checkbox"/> Creating Suitable Living Environment		
	<input type="checkbox"/> Providing Decent Housing		
	<input type="checkbox"/> Creating Economic Opportunity		
Beneficiaries/ Clients Served - Refer to Section II.B.4			
Client Description	Low to mod. income Bridgtoners.		
Number of Clients Served	286 families		
Number of LMI Bridgtoners	270 Bridgtoners		
LMI Bridgton Percentage	94%		
Units of Service - Refer to Section II.B.5			
Type of Unit of Service	Food cost per Bridgtoner visit.		
Number of Units Provided	3750		
Cost per Unit of Service	\$ 2.40		\$
Outcomes - Refer to Section II.B.6			
186 Bridgtoners will be provided 4500 pantry visits at no cost. Clients will be encouraged to make healthy food selections. When needed, clients will receive Sal. Army vouchers or be referred to other social service agencies for additional support.			
Budget - Refer to Section II.D Budget			
\$ 9000	CDBG Request (Must match CDBG Request on Cover Page and Budget Worksheet)		
\$ 38,185	Total Program Budget (Must match Total Budget on Cover Page and Budget Worksheet)		
24 %	Percentage of CDBG Request of Total Budget [50% or less indicates at least a 1 to 1 match]		
Leveraged Funds - Refer to Section II.D Budget - all columns must be complete, enter a 'zero' if needed.			
\$ 0	Federal	\$ 2,000	Other grants
\$ 0	State	\$ 0	Endowment
\$ 9,000	County	\$ 15,800	Private Funds
\$ 0	Town (not CDBG)	\$ 1,000	Gifts in kind

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date:

SEP 20 2019

BRIDGTON FOOD PANTRY
15 DEPOT STREET
BRIDGTON, ME 04009-0000

Employer Identification Number:
84-2851490
DLN:
26053655001059
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
July 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
July 31, 2019
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

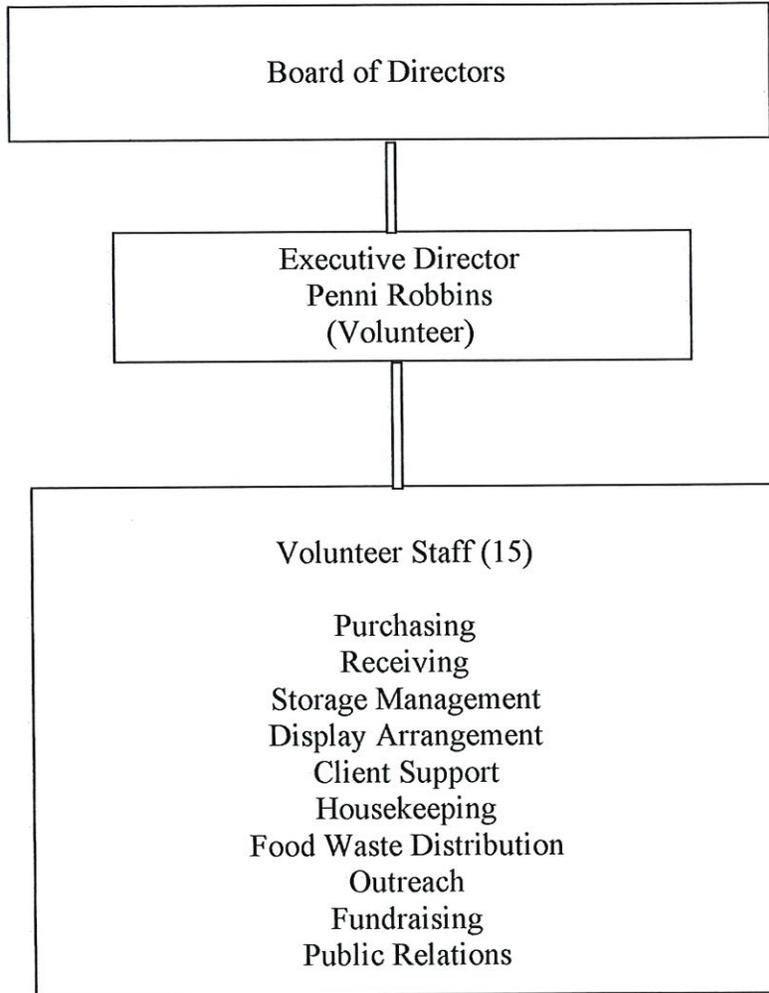
BRIDGTON FOOD PANTRY

Sincerely,

Stephen A. Martin

Director, Exempt Organizations
Rulings and Agreements

The Bridgton Food Pantry Organizational Chart



Huntress & Associates, P.A.

185 Portland Road • Unit 2 • P.O. Box 384 • Bridgton, Maine 04009 • 207.739.7000

January 10, 2022

Bridgton Food Pantry
P.O. Box #207
Bridgton, Maine 04009

Re: 990EZ

Dear Penni:

This letter is to confirm our office is currently working on filing the 2020 Form 990EZ for the Bridgton Food Pantry. Please feel to contact our office if you require any additional documentation from our office.

Regards,


Norm

The Bridgton Food Pantry Board of Directors

Rick Brackett *2021
#8 E Street
Bridgton, ME 04009
Email: aussie-rick@maine.rr.com
Phone: 207-807-5816

Midge (Silvo) Williamson
P.O. Box 68 (230 Maine Street)
Stoneham, ME 04231
Email: stoneham5142013@gmail.com
Phone: 207-928-2806

Joanne Cohn *2021
378 Highland Road
Bridgton, ME 04009
Email: joanne.cohn@comcast.net
Phone; 617-306-1956

Peter DuBrule *2021
P.O. Box 545
Bridgton, ME 04009
Email: pdubrue@gmail.com
Phone 207-583-5969

Karen Hawkins (Secretary/Treasurer)
963 South High Street
Bridgton, ME 04009
Email: barefoot@offthewallemporium.com
Phone: 207-647-3734

Carmen Lone (President) * 2012
114 North High Street
Bridgton, Me 04009
Email: celone280@gmail.com
Phone: 207-647-3116 (w) 207-647-5705 (h)

Tris Tirol
23 Moran Road
Bridgton, ME 04009
Email: ttirol@gmail.com
Phone: 207-420-1074

Roxie Ward
57 Heathersfield Drive
Bridgton, ME 04009
Email: roxie17ward@gmail.com
Phone: 207-693-5517

Revised: October 22, 2021



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/30/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Oberg Insurance & Real Estate Agency Inc 132 Main Street Bridgton ME 04009		CONTACT NAME: Peter Oberg PHONE (A/C, No, Ext): (207) 647-5551 E-MAIL ADDRESS: pete@obergagency.com FAX (A/C, No): (207) 647-5557	
INSURED Bridgton Food Pantry PO BOX 207 Bridgton ME 04009-0207		INSURER(S) AFFORDING COVERAGE INSURER A: Union Mutual Fire Insurance Co INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 25860	

COVERAGES **CERTIFICATE NUMBER:** CL21123001225 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		BOP0199668	11/30/2021	11/30/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Additional Insured \$ 1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER Town of Bridgton 3 Chase Street Suit #1 Bridgton ME 04009	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
-------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------



**Bridgton Community Center
Community Resource Navigator**

**Town of Bridgton
Community Development Block Grant
Public Service Application**

July 1, 2022 – June 30, 2023

APPLICATIONS DUE by 4:00 PM January 11, 2022

COMMUNITY DEVELOPMENT BLOCK GRANT
PROGRAM YEAR 2022-2023

II. SOCIAL SERVICE APPLICATION

COMPLETE APPLICATION CHECKLIST

Please submit each section of the application, including this checklist:

- A. Social Service Cover Page**, *limit 1 page*
- B. Social Service Worksheet**, *limit 2 pages*
- C. Social Service Narrative**, *limit 7 pages*
- D. Budget: Revenues and Expenditures**, attached separately, *limit 1 page*
Budget worksheet MUST match budget listed on the Cover Page, Summary page, and in the narrative
Multi-year initiatives must submit 2 budgets, 1 per year, limit 1 page per budget
- E. Social Service Summary**, *limit 1 page*
[Complete this section in whole; this information will be provided to the Board of Selectmen at time of recommendation or upon request]

Required documents for non-profit organizations:

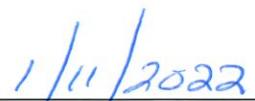
- Verification of 501(c)3 Status**, *limit 1 page*
- Agency Organizational Chart** to show how the proposed program fits into the overall organizational structure; include program staff or positions, *limit 1 page*
- Most Recent Agency Operating Budget Summary**, *limit 1 page*
- Most Recent Independent Auditors Report and identified findings** or *if an Audit is not available* the most recent 990 Financial Statement
- Complete list of Board Members**

Supporting documents (subject to scoring):

- Project Timeline** may be included in narrative or attached separately
- Partnership/Collaboration Memorandum of Agreement**, *limit 2 pages*: may be one MOA that is two pages long or two MOAs that are one page each.
- Letter of Support**, if there is no MOA; a letter of support may be submitted. *Limit 2 pages: can be one letter that's two pages long or two letters that are one page each.*



Signature of the President, CEO, Executive Director or Town Manager



Date

*Town of Bridgton Community Development Block Grant Public Services Application
2022-2023*

A. SOCIAL SERVICE COVER PAGE, limit 1 page

**COMMUNITY DEVELOPMENT BLOCK GRANT
PROGRAM YEAR 2022-2023**

Application Type	<input checked="" type="checkbox"/> Standard Social Service		
Operating Agency	Bridgton Community Center		
Program Name	Community Resource Navigator (CRN)		
Mailing Address	15 Depot Street Bridgton, Maine 04009		
Address Services are Delivered	15 Depot Street Bridgton, Maine 04009		
Executive Director	Carmen E. Lone	Phone (207) 647-3116	Email Carmen.bcc@ne.twcbc.com
Project Director	Catherine Pinkham	Phone (207) 693-2990	Email Cathy.pinkham@yahoo.com
Financial Contact	Carmen E. Lone	Phone (207) 647-3116	Email Carmen.bcc@ne.twcbc.com
Person who completed the Application	Carmen E. Lone	Phone (207) 647-3116	Email Carmen.bcc@ne.twcbc.com
Amount of CDBG Funds Requested	\$15,000	Total Program Budget \$24,040	
DUNS Number	621548051	Tax ID 14-1879353	

**Town of Bridgton Community Development Block Grant Public Services Application
2022-2023**

B. SOCIAL SERVICE WORKSHEET, limit 2 pages

1. **HUD National Objective.** Indicate which National Objective this program activity will address; choose one. Refer to National Objective description p. 3 for additional information.

- Low and Moderate Income Clientele (LMC):** an activity which provides benefits to a specific group of persons of which at least 51% qualifies as LMI Bridgtoners.

Does this activity benefit a population that HUD presumes to be low to moderate income, including *abused children, elderly persons, battered spouses, homeless persons, illiterate adults, severely disabled adults, persons living with AIDS, and migrant farm workers?*

- No Yes (please circle appropriate population)

- Low and Moderate Income Area Benefit (LMA):** an activity *which is available to benefit all the residents of an eligible area/census tract, plus housing authority properties.*

If you choose LMA, please provide a map and outline on the map the area that your program serves.

2. **HUD Program Objectives.** Indicate which HUD program objective this program will address; choose one:

- Creating a Suitable Living Environment**
- Providing Decent Affordable Housing**
- Creating Economic Opportunity**

3. **Primary Goal.** Indicate the primary goal your program or project addresses; choose one. *Refer to the instructions p. 6 for additional information.*

- Public Facility Improvements-** *Improve accessibility and availability of public infrastructure*
- Public Infrastructure Improvements-** *Improve the quality of public infrastructure that primarily serves low to moderate income families*
- Affordable Housing-** *Promote activities that support affordable housing development and the rehabilitation of residential housing.*
- Economic Opportunity:** *Assist businesses through job creation programs*
- Public Services-** *Promote programs and activities that improve the quality of life for low and moderate income individuals.*
- Community Planning-** *Promote long range planning for the benefit of the community as a whole.*

4. **Beneficiaries.**

A. Describe the beneficiaries or clients served by the program.	A.Low/Mod Income, all ages, elderly, veterans, disabled.
B. How many will be served by the proposed program? (unduplicated -per year)	B. 140 Estimated
C. How many are <i>residents of Bridgton?</i>	C. 135 Estimated
D. How many are <i>low to moderate income residents of Bridgton?</i> See income data in the instructions	D. 134 Estimated

**Town of Bridgton Community Development Block Grant Public Services Application
2022-2023**

E. What percentage of total clients are low to moderate income residents of Bridgton? (<i>To calculate = D/B * 100; Must be > 51%</i>)	E. 95%
---------------------------------------------------------------------------------------------------------------------------------------------	--------

5. Units of Service. Describe the type of unit of service provided by the program.

A. Describe the type of unit of service provided by the program.	A. Client/agency contacts
B. How many units of service will be provided by the program?	B. 440 clients (includes duplication)
C. What is the cost per unit of service?	C. 54.63
D. Explain the relationship between the cost per unit of service and the total program budget.	D. Budget is for payroll of CRN
E. What percentage of the total budget is CDBG?	F. 62%

6. Program Objectives and Outcomes. Please list below.

Program Objectives	Outcomes/ Community Impact
To connect people to services (local, county, state & federal) to meet their needs. Including emergency fuel.	Basic needs will be met. Healthier community
Assist with application process. Many lack computer/internet, do not understand the application. Do not have access to documentation	Increase the number of complete applications w/documentation and increase delivered services. Reduce the amount of processing time.
Provide pathway to resolving multiple issues by establishing ongoing relationships.	Move people forward into a more productive life.

7. Employees. *Program specific, not for the entire organization.*

A. How many employees are currently employed in this program?	A. 1
B. How many employees will be employed in this program if it receives CDBG funding?	B. 1
C. How many employees will be employed in this program if it does not receive CDBG funding?	C. 0

8. Documentation

A. How will the beneficiaries' information be collected and documented?	A. Income Verification Forms/CDBG Report. CRN will maintain confidential file for each client documenting ongoing assistance.
B. How will the units of service be tracked and documented?	B. CRN will maintain monthly numbers of client meetings (new and duplicated)
C. How will the outcomes be measured, collected, and documented?	C. Due to time constraints of the position, Numbers of clients and meetings.

Please limit the Social Service Worksheet to 2 (two) Pages.

C. Social Service Narrative -BCC– Community Resource Navigator

1. Program Description

The Community Resource Navigator Program (CRN) is a resource and referral hub within the Bridgton Community Center(BCC) that serves Bridgton’s L/M income people including elderly, disabled, veterans and vulnerable populations. The CRN meets with individuals by appointment at the BCC and by phone, email, zoom (during COVID) to assess and address their needs. This may include immediate emergencies or long-term issues. The CRN will research solutions to their immediate problems including making application to and accessing documentation for local, county, state and federal resources. Much of the CRN’s work is done outside the client visit making the necessary connections. On a longer-term basis, the CRN will work with appropriate clients to develop a short/long range plan to improve their situation.

NEW THIS YEAR – The BCC will add to the CRN’s duties the administration of the BCC Emergency Fuel Program. This program provides 100 gallons of fuel once during the heating season (Nov – March) to Bridgton residents who qualify. There is an application process, and The CRN will make arrangements for delivery. HUD income guidelines are used. We believe that when the CRN does the application process, they will discover needs that may be addressed by the CRN. All funds for the BCC fuel program are private donations raised by the BCC. The CRN will work directly with the BCC director in the administration and availability of these funds. To date 28 households have been assisted by this fund in 2021.

NEW THIS YEAR – Through the generosity of private donations, the CRN has at their disposal a Navigator Discretionary Fund that can be used to address emergencies that are not covered by any other resource. The CRN will work directly with the BCC Director in the administration and availability of these funds. To date 17 households have been assisted by this fund in 2021.

NEW THIS YEAR – The CRN with the BCC Director is working to develop a more collaborative relationship with outside agencies including The Opportunity Alliance and Southern Maine Agency on Aging. This may include training for the CRN to assist OS agencies with pre-qualifying applicants, a direct contact for the CRN and/or satellite service by the agency.

This is **not a new** program. The CRN program was created in 2015 with CDBG funds. This request is an **expansion** of the program. Many issues are not being addressed due to the separation of the BCC Fuel program and the CRN program. Improved relations with outside agencies and increased training for the CRN will increase the effectiveness of programs like LIHEAP, Weatherization, and senior specific programs. Even in this age of the internet, it is still difficult to reach rural Bridgton effectively.

C. Social Service Narrative – BCC- Community Resource Navigator

2. *Need for the Program*

* Bridgton’s population is 5,346 (total households 2,098)

a. Median household income	\$48,319
b. No high school degree (age 25+)	6.2%
c. High school degree or equal (age 25+)	41.7%
d. Labor Force participation (16+)	56.2%
e. Age 55+	35%
f. % Persons below poverty	16.9%

* from “Bridgton Economic and Market Analysis” December 2019 by Maine Center for Business and Economic Research, University of Southern Maine.

The distance from county, state and federal agencies, lack of computer skills, lack of knowledge, fear, embarrassment, lack of transportation, perception of ineligibility and lack of readiness are all barriers to resolving “red tape” issues and ability to receive services.

3. *Project Management*

The CRN project is managed by the Community Resource Navigator who makes appointments, conducts intake and interviews, makes referrals as well as follow up and research. In all cases guidelines and confidentiality policies are followed including HIPPA. The CRN will maintain income verification forms and CDBG monthly reports to be given to the BCC director.

The BCC director will do reporting to the town of Bridgton per CDBG guidelines and will manage all funds through the BCC’s accounting firm Jones and Matthews. All financials are reviewed by the BCC Treasurer and Board of Directors monthly. An “Independent Accountants’ Compilation Report” is don yearly by Jones & Matthews.

4. *Readiness to Proceed*

The CRN is in place at this time and if funded the additional duties can easily be ready before June 2022. We have meet with Opportunity Alliance and are in the process of improving access and application process.

5. *Budget for the Project*

	<i>CDBG</i>	<i>BCC</i>
Facility, internet, telephone, fax, copies		3,000
Computer, staff support, administration utilities		
Payroll taxes & processing fees		3,360
Gross Pay for Navigator (20hrs/wk @ \$17/hr)	<u>15,000</u>	<u>2,680</u>
TOTALS	15,000	9,040

TOTAL PROJECT COST \$24,040

C. Social Service Narrative – BCC – Community Resource Navigator

6. Implementation Schedule

The CRN is already in place until the end of program year 2021-22.

February 15, 2022 – completion of improved process with Opportunity Alliance

Necessary training identified and scheduled

April 15, 2022 – CRN duties for 2022-23 redefined

Fuel assistance program restructured

All applications and documentation reviewed and updated

Reporting procedures defined

May 15, 2022 – All systems and documentation reviewed by BCC Board of Directors

After approval – training session for CRN and Director

June 15, 2022 – Public information campaign

July 1, 2022 – CRN program fully operational

7. Demonstration of need for CDBG funds

The CRN program began with a volunteer. The need has grown and since 2015 this program has been funded with CDBG funds. The Bridgton Community Center's annual budget is around \$160,000. Much of our resources are donations which we have utilized in programming. We have not applied for other grants for this program. However, we are looking into ARPA funding for a multiple year program. The BCC is in competition with 40 local non profits. While we are grateful for the support we receive, we are not everyone's priority. The BCC does receive funding from the taxpayers of Bridgton through a vote at town meeting. This year we have asked for an increase in appropriation for the first time in 10 years. We will not know the results of that until the Board of Selectmen have completed the budget process.

**Town of Bridgton Community Development Block Grant Public Services Application
2022-2023**

E. SOCIAL SERVICE SUMMARY, limit 1 page,

Application Type	<input checked="" type="checkbox"/> Standard Social Service		
Operating Agency	Bridgton Community Center		
Program Name	Community Resource Navigator (CRN)		
Funds Requested	\$ 15,000		
Program Summary			
The CRN will meet with L/M Bridgton residents to connect them to resources that will aid in the resolution of problems. Referrals will come through the BCC from citizens, hospital, churches, agencies. CRN will assist with qualification and application process and administer the BCC emergency fuel program and the Navigator discretionary fund. CRN will work directly with the BCC director and all appropriate agencies.			
HUD National Objective <i>Refer to Section II.B.1</i>	<input checked="" type="checkbox"/> Low to Moderate Income Limited Clientele, will this serve a population HUD presumes to be low income? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Low to Moderate Income Area Benefit, if chosen describe service area: Service area:		
HUD Program Objective <i>Refer to Section II.B.2</i>	<input checked="" type="checkbox"/> Creating Suitable Living Environment		
	<input type="checkbox"/> Providing Decent Housing		
	<input type="checkbox"/> Creating Economic Opportunity		
Beneficiaries/ Clients Served - Refer to Section II.B.4			
Client Description	L/M income, elderly,veterans,disabled,youth		
Number of Clients Served	140		
Number of LMI Bridgtoners	135		
LMI Bridgton Percentage	96%		
Units of Service - Refer to Section II.B.5			
Type of Unit of Service	Client Meeting/resource contact		
Number of Units Provided	440		
Cost per Unit of Service	\$54.63		\$
Outcomes - Refer to Section II.B.6			
The CRN project will improve the lives of L/M Bridgton residents by connecting them to available resources, assisting with budgeting issues; housing, employment, transportation, negotiating payment arrangements; demystifying state and federal applications and communications. Connect them to resources unknown to them.			
Budget - Refer to Section II.D Budget			
\$15,000	CDBG Request (Must match CDBG Request on Cover Page and Budget Worksheet)		
\$24,040	Total Program Budget (Must match Total Budget on Cover Page and Budget Worksheet)		
62%	Percentage of CDBG Request of Total Budget [50% or less indicates at least a 1 to 1 match]		
Leveraged Funds - Refer to Section II.D Budget - all columns must be complete, enter a 'zero' if needed.			
\$0	Federal	\$0	Other grants
\$0	State	\$	Endowment
\$15,000	County	\$6040	Private Funds
\$0	Town (not CDBG)	\$3000	Gifts in kind

BCC – Community Resource Navigator
CDBG Program Year 2022-2023

APPENDIX A

1. Verification of 501(c)3 Status
2. Agency Organizational Chart
3. Most recent agency operating budget
4. Most recent independent auditors report and identified findings
5. Complete list of Board Members

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **OCT 23 2006**

BRIDGTON COMMUNITY CENTER
15 DEPOT ST
BRIDGTON, ME 04008-0000

Employer Identification Number:
14-1879353
DLN:
17053266702006
Contact Person: ERIC J BERTELSEN ID# 31323
Contact Telephone Number:
(877) 829-5500
Public Charity Status:
170(b)(1)(A)(vi)

Dear Applicant:

Our letter dated May 2003, stated you would be exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code, and you would be treated as a public charity, rather than as a private foundation, during an advance ruling period.

Based on the information you submitted, you are classified as a public charity under the Code section listed in the heading of this letter. Since your exempt status was not under consideration, you continue to be classified as an organization exempt from Federal income tax under section 501(c)(3) of the Code.

Publication 557, Tax-Exempt Status for Your Organization, provides detailed information about your rights and responsibilities as an exempt organization. You may request a copy by calling the toll-free number for forms, (800) 829-3676. Information is also available on our Internet Web Site at www.irs.gov.

If you have general questions about exempt organizations, please call our toll-free number shown in the heading.

Please keep this letter in your permanent records.

Sincerely yours,

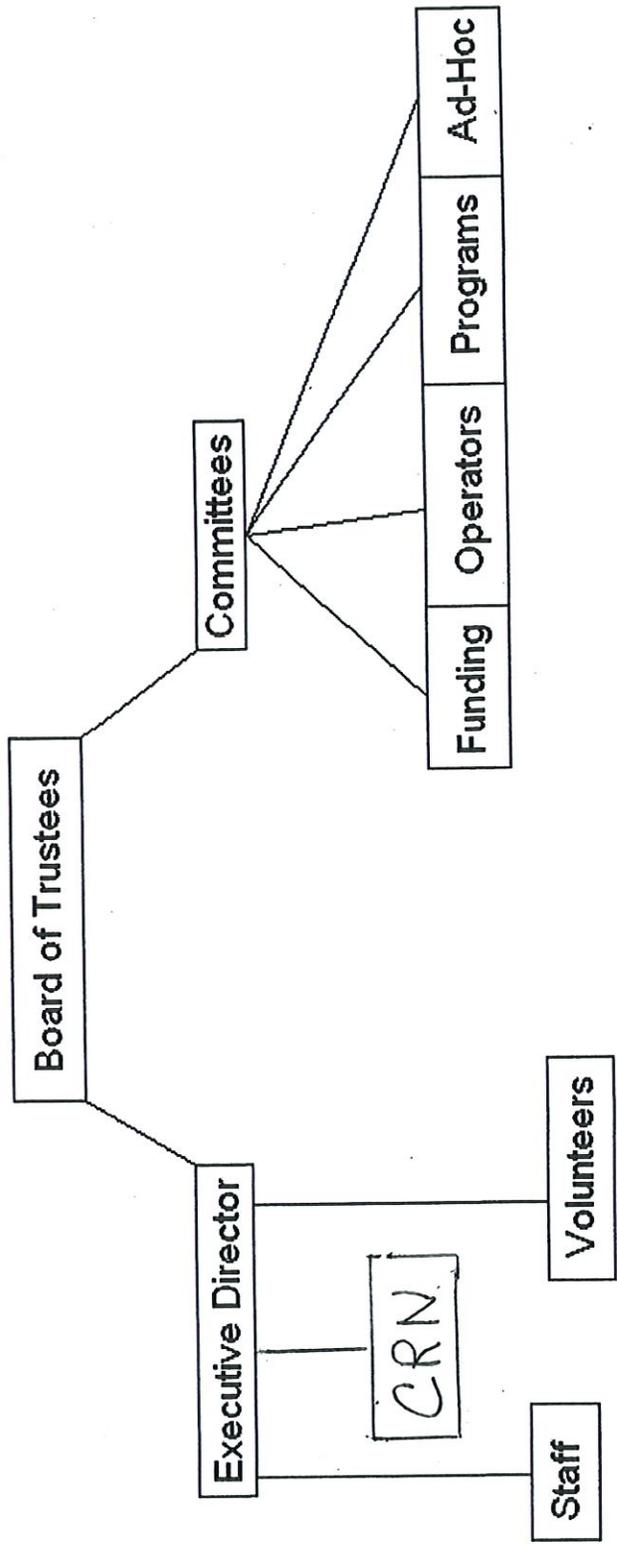


Lois G. Lerner
Director, Exempt Organizations
Rulings and Agreements

Letter 1050 (DO/CG)

-1-

Bridgton Community Center Organization Chart



1 2 1

Bridgton Community Center – approved budget 2021-2022 (abridged for CDBG grant)

INCOME

Donations	17,300	
Fundraising	30,000	
Program Fees	5,000	
Room Rental	7,000	
Grants	11,920	
Town Appropriation	76,523	
BCC Emergency Fuel Program	8,000	
McKeen Endowment	420	
Interest Income	6	
TOTAL INCOME		\$156,169

EXPENSES

Advertising	400	
Automobile Expense	1,000	
Technology	3,500	
Dues/memberships/fees/licenses	650	
Fundraising	4,000	
Insurance	4,400	
Office Supplies	3,300	
Employee Expense	94,848	
Postage & printing	950	
Professional services	13,900	
Program Expense	10,400	
BCC Emergency Fuel Program	8,000	
Subscriptions	100	
Supplies	500	
Utilities	10,600	
TOTAL EXPENSE		\$156,548

BRIDGTON COMMUNITY CENTER
STATEMENT OF FINANCIAL POSITION
AS OF JUNE 30, 2021

ASSETS

Cash and Cash Equivalents	\$ 55,013
Property and Equipment, net (Note 3)	<u>7,623</u>
Total Assets	\$ <u>62,636</u>

LIABILITIES AND NET ASSETS

Liabilities:	
Due to American Legion	\$ <u>1,197</u>
Total Liabilities	\$ 1,197
Net Assets	
Without Donor Restrictions	39,032
With Donor Restrictions	<u>22,407</u>
Total Net Assets	<u>61,439</u>
Total Liabilities and Net Assets	\$ <u>62,636</u>

See accompanying notes and accountants' compilation report.

- 4 -

BRIDGTON COMMUNITY CENTER
STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2021

	<u>Without Donor Restrictions</u>	<u>With Donor Restrictions</u>	<u>Total</u>
REVENUES AND OTHER SUPPORT			
Contributions			
General Public	\$ 39,456	\$ 120,326	\$ 159,782
Municipal	76,523	-0-	76,523
Interest Income	1	-0-	1
Other Income	384	-0-	384
Net Assets Released from Restrictions	<u>105,968</u>	<u>(105,968)</u>	<u>-0-</u>
Total Revenues and Other Support	222,332	14,358	236,690
EXPENSES			
Program Services	202,270	-0-	202,270
Supporting Services	<u>15,720</u>	<u>-0-</u>	<u>15,720</u>
Total Expenses	<u>217,990</u>	<u>-0-</u>	<u>217,990</u>
Changes in Net Assets From Operations	4,342	14,358	18,700
Net Assets, Beginning of Year	<u>34,690</u>	<u>8,049</u>	<u>42,739</u>
Net Assets, End of Year	\$ <u>39,032</u>	\$ <u>22,407</u>	\$ <u>61,439</u>

See accompanying notes and accountants' compilation report.

BRIDGTON COMMUNITY CENTER
 SCHEDULE OF FUNCTIONAL EXPENSES
 FOR THE YEAR ENDED JUNE 30, 2021

	<u>Supporting Services</u>	<u>Program Services</u>	<u>Total</u>
Payroll	\$ 6,968	\$ 62,715	\$ 69,683
Program Services	-0-	97,893	97,893
Supplies	51	461	512
Insurance	1,000	4,345	5,345
Repairs	6	50	56
Garden/Grounds Expense	1,619	-0-	1,619
Electricity	453	4,075	4,528
Water	63	562	625
Heating Fuel	170	1,533	1,703
Gas	-0-	710	710
Telephone	194	1,748	1,942
Postage	45	401	446
Seniors Lunch Expense	-0-	4,962	4,962
Depreciation	2	-0-	2
Cleaning	689	6,205	6,894
Advertising	-0-	250	250
Professional Services	-0-	1,825	1,825
Computer Expense	2,420	-0-	2,420
Office Supplies	318	2,865	3,183
Health Insurance	445	4,005	4,450
Payroll Taxes	559	5,030	5,589
Dues and Subscriptions	558	-0-	558
Vehicle Expense	-0-	757	757
Printing/Reproduction	29	257	286
Miscellaneous	<u>131</u>	<u>1,621</u>	<u>1,752</u>
 Total Expenses	 <u>\$ 15,720</u>	 <u>\$ 202,270</u>	 <u>\$ 217,990</u>

See accompanying notes and accountants' compilation report.

BRIDGTON COMMUNITY CENTER
STATEMENT OF CASH FLOWS-INDIRECT METHOD
YEAR ENDED JUNE 30, 2021

CASH FLOWS FROM OPERATING ACTIVITIES	
Change in Net Assets	\$ 18,700
Adjustments to Reconcile Change in Net Assets to Net Cash Provided by Operating Activities:	
Depreciation	2
Increase in Due to Food Pantry	(<u>2,430</u>)
 Net Cash Provided by Operating Activities	 \$ 16,272
 Cash and Cash Equivalents, Beginning of Year	 <u>38,741</u>
Cash and Cash Equivalents, End of Year	<u>\$ 55,013</u>

See accompanying notes and accountants' compilation report.

BRIDGTON COMMUNITY CENTER
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2021

Note 1 - Description of the Organization

Bridgton Community Center is located in the town of Bridgton, Maine. The function of the Organization is to create and provide a supporting environment for recreation, leisure, the arts, health, and community services, to promote public well-being and to enhance the quality of life for all generations in the community. The Organization is supported primarily through contributions from the town along with grants and other donations.

Note 2 - Summary of Significant Accounting Policies

Promises to Give - Contributions are recognized when the donor makes a promise to give to the Organization that is, in substance, unconditional. Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the fiscal year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in temporary or permanently restricted net assets depending on the nature of the restrictions. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets. All obligations have been received by the Organization prior to the issuance of these financial statements, therefore, no allowance for doubtful accounts has been recorded.

Contributed Services - The Organization receives donated services from a variety of unpaid volunteers. No amounts have been recognized in the accompanying statement of activities because the criteria for recognition of such volunteer effort under SFAS No 116 have not been satisfied.

Estimates - The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

See accountants' compilation report.

Note 2 - Summary of Significant Accounting Policies (continued)

Property and Equipment - Donations of property and equipment are recorded as support at their estimated fair value. Such donations are reported as unrestricted support unless the donor has restricted the donated asset to a specific purpose. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used to acquire property and equipment are reported as restricted support. Absent donor stipulations regarding how long those donated assets must be maintained, the Organization reports expirations of donor restrictions when donated or acquired assets are placed in service as instructed by the donor. The Organization reclassifies temporarily restricted net assets to unrestricted net assets at that time. Property and equipment are depreciated using the straight-line method.

Financial Statement Presentation - Under Statement of Financial Accounting Standards (SFAS) No. 117, *Financial Statements of Not-For-Profit Organizations*, the Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Contributions - Under SFAS No. 116, *Accounting for Contributions Received and Contributions Made*, contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted net assets depending on the absence or existence and nature of any donor restrictions.

Income Taxes - The Organization is a not-for-profit organization and has been recognized as exempt from income taxes by the Internal Revenue Service under 501(c)(3) of the Internal Revenue Code.

Cash and Cash Equivalents - For purposes of the statements of cash flows, the Organization considers all highly liquid investments available for current use with an initial maturity of three months or less to be cash equivalents.

See accountants' compilation report.

Note 3 - Property and Equipment, Net

Property and Equipment, net consisted of the following at June 30, 2021:

Van	\$ 10,588
Computers	10,640
Furniture and Fixtures	<u>37,804</u>
Total Fixed Assets	59,032
Less: Accumulated Depreciation	<u>(51,409)</u>
Property and Equipment, net	\$ <u>7,623</u>

Note 4 - SUBSEQUENT EVENTS

Bridgton Community Center has evaluated subsequent events through December 1, 2021, which is the date the financial statements were available to be issued. Bridgton Community Center is not aware of any material subsequent events.

See accountants' compilation report.



June 24, 2020

THE BOARD OF DIRECTORS OF THE BRIDGTON COMMUNITY CENTER

<u>NAME AND ADDRESS</u>	<u>EXP</u>	<u>PHONE NO.</u>	<u>E-MAIL ADDRESS</u>
Lowell, Roger 253 Chadbourne Hill Road Bridgton, ME 04009	2023	207-647-5197 207-303-2990	roglowell@gmail.com
Skillin-Smith, Kelley. Treas 85 Mockingbird Lane PO Box 480 Bridgton, ME 04009	2022	207-632-0813	kskillinsmith@maine.rr.com
Tarr, Philip, President 310 Del Chadbourne Road Bridgton, ME 04009	2022	207-647-9574	pndt9489@myfairpoint.net
Sullivan, Marcia, Secretary 35 Summit Drive Bridgton, ME 04009	2021	207-647-4068 978-502-6723	msullivan27@roadrunner.com
Carmen E. Lone Executive Director 114 N High Street Bridgton, ME 04009		207-647-3116	carmen.bcc@ne.twcbc.com

Rev 06/24/2020

15 Depot Street, Bridgton, Maine 04009
Telephone 207-647-3116 Fax 207-647-3115
Email info.bridgtoncommunitycenter@gmail.com
Website www.bridgtoncommunitycenter.org

**Town of Bridgton Community Development Block Grant Public Services Application
2022-2023**

E. SOCIAL SERVICE SUMMARY, limit 1 page,

Application Type	<input checked="" type="checkbox"/> Standard Social Service		
Operating Agency	THE RUFUS PORTER MUSEUM OF ART & INGENUITY		
Program Name	CAMP INVENTION SCHOLARSHIP FUNDS		
Funds Requested	\$ 3240.00		
Program Summary			
THE MUSEUM SEEKS SCHOLARSHIP MONIES FOR 12 LOW-MIDDLE INCOME CHILDREN FROM BRIDGTON TO ATTEND CAMP INVENTION, JULY 11-16, 2022			
HUD National Objective <i>Refer to Section II.B.1</i>	<input checked="" type="checkbox"/> Low to Moderate Income Limited Clientele, will this serve a population HUD presumes to be low income? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Low to Moderate Income Area Benefit, if chosen describe service area: Service area: BRIDGTON, ME / STEVENS BROOK ELEM SLHOO		
HUD Program Objective <i>Refer to Section II.B.2</i>	<input checked="" type="checkbox"/> Creating Suitable Living Environment		
	<input type="checkbox"/> Providing Decent Housing		
	<input type="checkbox"/> Creating Economic Opportunity		
Beneficiaries/ Clients Served - Refer to Section II.B.4			
Client Description	CHILDREN ENTERING KINDERGARTEN THROUGH GRADE 6.		
Number of Clients Served	12		
Number of LMI Bridgtoners	12		
LMI Bridgton Percentage	100%		
Units of Service - Refer to Section II.B.5			
Type of Unit of Service	SCHOLARSHIP FOR CAMP TUITION		
Number of Units Provided	12		
Cost per Unit of Service	\$ 270.00	\$	
Outcomes - Refer to Section II.B.6			
TWELVE LOW-MIDDLE INCOME BRIDGTON ELEMENTARY SCHOOL CHILDREN WILL BENEFIT FROM THE NATIONALLY RECOGNIZED STEM CURRICULUM DESIGNED BY THE NATIONAL INVENTORS HALL OF FAME. CHILDREN WILL COLLABORATE, COMBINE ART AND SCIENCE TO BUILD & DESIGN PROJECTS, AND WILL LEARN PERSEVERANCE IS KEY TO IT ALL.			
Budget - Refer to Section II.D Budget			
\$	CDBG Request (Must match CDBG Request on Cover Page and Budget Worksheet)		
\$	Total Program Budget (Must match Total Budget on Cover Page and Budget Worksheet)		
%	Percentage of CDBG Request of Total Budget [50% or less indicates at least a 1 to 1 match]		
Leveraged Funds - Refer to Section II.D Budget - all columns must be complete, enter a 'zero' if needed.			
\$ 0	Federal	\$ 5000.00	Other grants BEING APPLIED FOR
\$ 0	State	\$ 0	Endowment
\$ 0	County	\$ 5,920	Private Funds DONATED TUITIONS
\$ 0	Town (not CDBG)	\$ 0	Gifts in kind

COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM YEAR 2022-2023

II. SOCIAL SERVICE APPLICATION

COMPLETE APPLICATION CHECKLIST Please submit each section of the application, including this checklist:

A. Social Service Cover Page, *limit 1 page*

B. Social Service Worksheet, *limit 2 pages*

C. Social Service Narrative, *limit 7 pages*

D. Budget: Revenues and Expenditures, attached separately, *limit 1 page*

Budget worksheet MUST match budget listed on the Cover Page, Summary page, and in the narrative

Multi-year initiatives must submit 2 budgets, 1 per year, limit 1 page per budget

E. Social Service Summary, *limit 1 page* [Complete this section in whole; this information will be provided to the Board of Selectmen at time of recommendation or upon request]

Required documents for non-profit organizations:

Verification of 501(c)3 Status, *limit 1 page*

Agency Organizational Chart to show how the proposed program fits into the overall organizational structure; include program staff or positions, *limit 1 page*

Most Recent Agency Operating Budget Summary, *limit 1 page*

Most Recent Independent Auditors Report and identified findings or if an Audit is not available the most recent 990 Financial Statement

Complete list of Board Members Supporting documents (subject to scoring):

Project Timeline -- in Collaboration Support/Agreement letter.

Partnership/Collaboration Memorandum of Agreement, *limit 2 pages*: may be one MOA that is two pages long or two MOAs that are one page each.

w/ MEMORANDUM
OF AGREEMENT

- Letter of Support**, if there is no MOA; a letter of support may be submitted. *Limit 2 pages: can be one letter that's two pages long or two letters that are one page each.* **Signature of the President, CEO, Executive Director or Town Manager**
Date Please find all signatures on this document.

*Town of Bridgton Community Development Block Grant Public Services Application
2022-2023*

**A. SOCIAL SERVICE COVER PAGE, limit 1 page COMMUNITY
DEVELOPMENT BLOCK GRANT**

PROGRAM YEAR 2022-2023

Application Type	<input checked="" type="checkbox"/> Standard Social Service		
Operating Agency	The Rufus Porter Museum of Art and Ingenuity		
Program Name	Camp Invention Scholarship Program		
Mailing Address	121 Main Street, Bridgton, Maine 04009		
Address Services are Delivered	Scholarships sent to 121 Main Street, Bridgton, ME. Camp Invention held at Stevens Brook Elementary School, Bridgton, ME		
Executive Director	Karla Leandri Rider	207-647-2828 dir@rufusportermuseum.org	
Project Director	Margaret Lindsey, Camp Invention Scholarship Coordinator	860-301-3004 margaret.lindsey@trincoll.edu	
Financial contact	Karla Leandri Rider	See above	
Person who completed	Margaret Lindsey	See above	

the Application			
Amount of CDBG Funds Requested	\$3,240	Total Scholarship Budget \$	for 2021: \$10,920
DUNS Number for RPM: 602580792		Tax ID for RPM:	74-3175428

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*Town of Bridgton Community Development Block Grant Public Services Application
2022-2023*

B. SOCIAL SERVICE WORKSHEET, limit 2 pages

1. HUD National Objective. Indicate which National Objective this program activity will address; choose one. Refer to National Objective description p. 3 for additional information.

Low and Moderate Income Clientele (LMC): an activity which provides benefit to a specific group of persons of which at least 51% qualifies as LMI Bridgtoners. Does this activity benefit a population that HUD presumes to be low to moderate income, including *abused children, elderly persons, battered spouses, homeless persons, illiterate adults, severely disabled adults, persons living with AIDS, and migrant farm workers*? No Yes (please circle appropriate population)

Children who participate could have parents who fall into any of the above categories; children who participate could be abused or be migrant farm workers. The criteria for scholarship is that they be living in Bridgton, ME during camp time and that their families are of low-moderate income.

Low and Moderate Income Area Benefit (LMA): an activity which is available to benefit all the residents of an eligible area/census tract, plus housing authority properties. *If you choose LMA, please provide a map and outline on the map the area that your program serves.*

2. **HUD Program Objectives.** Indicate which HUD program objective this program will address; choose one:

**Creating a Suitable Living Environment
Providing Decent Affordable Housing**

NOTE: Creating Economic Opportunity (this program also allows parents to work)

PRIMARY GOAL:

- Public Facility Improvements-** *Improve accessibility and availability of public infrastructure*
 - Public Infrastructure Improvements-** *Improve the quality of public infrastructure that primarily serves low to moderate income families*
 - Affordable Housing-** *Promote activities that support affordable housing development and the rehabilitation of residential housing.*
 - Economic Opportunity:** *Assist businesses through job creation programs*
 - Public Services-** *Promote programs and activities that improve the quality of life for low and moderate income individuals.*
 - Community Planning-** *Promote long range planning for the benefit of the community as a whole.*
4. **Beneficiaries.**

A. Describe the beneficiaries or clients served by the program.	Low-middle income children grades k-6 living in Bridgton, Maine.
B. How many will be served by the proposed program? (unduplicated -per year)	12
C. How many are <i>residents of Bridgton?</i>	100%
D. How many are <i>low to moderate income residents of Bridgton?</i> See income data in the instructions	100%

<p>E. What percentage of total clients are low to moderate income residents of Bridgton? (<i>To calculate = D/B * 100; Must be > 51%</i>)</p>	<p>2021 CI participants: 55% were on full scholarship and were low-middle income residents of Bridgton, ME. We hope to do the same or better in 2022.</p>
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5.

*Town of Bridgton Community Development Block Grant Public Services Application
2022-2023*

Units of Service. Describe the type of unit of service provided by the program.

A.

<p>A. Describe the type of unit of service provided by the program.</p>	<p>Camp Invention Tuition scholarships</p>
<p>B. How many units of service will be provided by the program?</p>	<p>12 scholarships</p>
<p>C. What is the cost per unit of service?</p>	<p>\$270 = one tuition</p>
<p>D. Explain the relationship between the cost per unit of service and the total program budget.</p>	<p>One unit = one tuition = 100% correlation. All services for the Camp are donated except for tuition.</p>
<p>E. What percentage of the total SCHOLARSHIP budget is CDBG?</p>	<p>12 out of c. 40-42 scholarships.= c. 30%</p>

6.

Program Objectives and Outcomes. Please list below.

<p>Program Objectives</p> <p>In partnership with the National Inventors Hall of Fame, Stevens Brook Elementary School hosts the nationally acclaimed Camp Invention Program to children entering kindergarten through 6th grade. This weeklong summer program provides opportunities for open-ended, hands-on exploration of science, technology, engineering, (STEM) and collaboration. Children think creatively and work together to invent their own solutions to real-world challenges.</p>	<p>Two years of comparison of test scores at SBES has shown improvement or no loss of reading skills in children who have participated in Camp Invention. This is remarkable, especially during the Pandemic. Teachers and administrators have gathered parent comments at the end of camp that indicate children have learned, even in the short week, ways of thinking that have changed their world view and will improve their overall school experience.</p> <p>Outcomes/ Community Impact</p>

7.

Employees. *Program specific, not for the entire organization.*

<p>A. How many employees are currently employed in this program? 2. 1 account manager employed by Camp Invention; 1 teacher at SBES who is the Camp Director.</p>
<p>B. How many employees will be employed in this program if it receives CDBG funding? 6 (if 60-90 campers in total); 5 (if 40-60 campers in total).</p>
<p>C. How many employees will be employed in this program if it does not receive CDBG funding? 5 (Most likely, camper enrollment will only reach 40-60 campers without CDBG scholarships.)</p>

8. Documentation

Please limit the Social Service Worksheet to 2 (two) Pages.

<p>A. <u>How will the beneficiaries' information be collected and documented?</u> This information is collected via an electronic scholarship application/ registration system accessible to the Camp Director, the Camp Invention Account Manager, and the Executive Director of the RPM. The SBES Camp Director will assess children's family income level and will input all data into the Camp Invention Scholarship system.</p>	
<p>B. <u>How will the units of service be tracked and documented?</u> Camp Invention offers 32.5 hours of enrichment over a 5 day period. Teaching staff follows a curriculum designed annually by award-winning inventors using materials provided by The National Inventors Hall of Fame. Parents complete an end-of week questionnaire concerning each child's experience.</p>	
<p>B. <u>How will the outcomes be measured, collected, and documented?</u> As stated above, here in Bridgton the teaching staff compares reading test scores of participating CI children from the previous spring to the following fall. Camp Invention also completes learning outcomes studies at several of its 1500 programs across the country. The CI curriculum supports the national STEM (Science, Technology, Engineering, Math) educational guidelines.</p>	

Social Service Narrative

1. Program Description:

Camp Invention 2022 will be held at Stevens Brook Elementary School from July 11- July 16. This summer's theme will be "EXPLORE: Four new adventures in hands on invention education. Children will rotate through a variety of activities each day; have fun collaborating with friends; and will think invent their own solutions to real-world challenges.

During this high energy program young innovators will:

- 1) Dive into cutting-edge ocean research as they adopt their own robotic fish, design and patent aquatic plants, and take their fish friend home in a mini-tank.
- 2) Discover real space exploration technology when they create Spacepacks and AstroArm devices, mine an asteroid and observe erupting ice volcanoes.
- 3) Combine science and art to build their own robotic artist engage in design thinking, make spin art and learn how inventions can change the way people create.
- 4) Experiment with the fun of physics, engineering and gaming as they design, build and test his or her own mega marble arcades.

2. Need for the Project: All Bridgton children can benefit from solid yet fun educational experiences during the summer. This is especially true during these pandemic times when daycare and group activities may be limited for working parents. Any child living in Bridgton who is of the appropriate age group is welcome to attend Camp Invention. Sadly, however, not all families can afford the tuition, especially for multiple siblings. Camp Invention has tried to pay particular attention when giving scholarships to families sending more than one child to the camp. We would like to continue this practice. It is also our contention that a week of summer isolation for an elementary school child can undo months of schoolroom classes. For this reason, we compare the reading scores of those participants who stay within the Bridgton system. After two years of comparison, we have found 1) no drop in reading scores, and 2) improvements that have put students into the top of their reading age group.

3. Project Management: **Allison Sands**, On-site Camp Director, SBES teacher; **Karla Leandri Rider**, Executive Director, The Rufus Porter Museum; **Alex Oesch**, Account Manager, K-12 Educational Programs for ME, MA, NH, VT, off-site with the National Inventors Hall of Fame; Margaret Lindsey, Camp Invention Scholarship Coordinator for the RPM.

4. Readiness to Proceed: 2022 will be the 5th summer that Camp Invention has been held at Stevens Brook School. Camp Invention itself has been in operation since 1990 and will enjoy its 32nd season this summer.

Two of the 5 Bridgton summers have been influenced by the COVID 19 pandemic—2020 was a virtual summer in which every single piece of material

2.

was mailed to all participants by the NIHF and monitoring was done by zoom and video; 2021 was an in-person summer with the highest Camp Invention at Bridgton enrollment (76) to date. Nevertheless, as will be the case for 2022, The NIHF established their “Peace of Mind Promise” in 2021 that allowed parents up to the last two weeks before camp to choose if they preferred an in-home experience for their child(ren). As it happened, all parents in 2021 opted for an in-person camp experience, and no incidence of infection occurred.

5. Budget for the Project:

We are asking for 12 scholarships for 12 students. Each scholarship “costs” \$270. The total amount requested is \$3240.00. 100% of the amount requested will be spent on tuition scholarship.

The rest of the program is supported by in-kind contributions from the National Inventors Hall of Fame (which does not give out its monetary support figures as it runs over 1500 Camp Inventions across the country—four in Maine); The Rufus Porter Museum, the Lake Region School System that allows the use of facilities. The NIHF pays the staff, provides all curricular and public relations materials including tee shirts, supports additional scholarships, and provides year-round administrative support. Other scholarship monies have been received from private donors, the Agnes Lindsey Foundation, the George Ramlose Foundation, and—in 2021—CDBG Covid monies for child care.

6. Implementation Schedule:

We will begin to gather enrollments by February 1, 2022. All curriculum materials will be completed and mailed either to families or to SBES well before camp time of July 11. Additional staff will be hired by June 30. Tuition MAY be paid at any time, but in the case of funds not available until July 1, children may be registered and scholarships assigned, but Camp Invention requires no payment before July 11.

7. Demonstration of Need for CDBG funds: Every year, The Rufus Porter Museum must seek out scholarship monies if children of low-middle income families in the Bridgton area will be able to attend the camp. As 52% of Stevens Brook Elementary School students are on free or reduced breakfast and lunch, there are many children who qualify for tuition scholarships and who would not be able to attend camp without the scholarship. The breakfast and lunch program for Stevens Brook is also continued during the summer and is available to Camp Invention students who qualify. The Museum feels strongly that as many low-middle income families with appropriately aged children should have the opportunity to attend this nationally recognized educational experience. CDBG funds will directly support Bridgton children going to Camp Invention.

8. Partnerships, Collaboration, and Outreach: Camp Invention at Bridgton is a collaboration between the National Inventors Hall of Fame, Stevens Brook Elementary School, and The Rufus Porter Museum of Art and Invention. See above for management specifics. The Rufus Porter Museum also displays Camp Invention

3.

public relations materials and photographs on its website, FaceBook page, and Instagram site, and in the newspapers, in addition to putting display materials in the Museum itself.

BUDGET: REVENUES AND EXPENDITURES See also BUDGET page.

The only revenues and expenditures involved in this tuition request are those connected to 12 tuitions paid, one on one, via the Museum's Camp Invention Scholarship budget line item, to The National Inventor's Hall of Fame.

The rest of the program is supported by The National Inventors Hall of Fame; The Rufus Porter Museum, and the Lake Region Schools. The NIHF pays the staff, provides all curricular and public relations materials, supports scholarships for teachers' children, and provides year-round administrative support. Other scholarship monies have been received by The Museum from: private donors, the Agnes Lindsey Foundation, the George Ramlose Foundation, and—in 2021—CDBG Covid monies for child care.

CDBG Funding Request for Camp Invention

Budget for the Project:

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for the Project:

*The Rufus Porter Museum;

*The Lake Region School System that allows the use of facilities.

The NIHF pays the staff, provides all curricular and public relations materials including tee shirts, supports additional scholarships, and provides year-round administrative support.

Other scholarship monies have been and will be received from private donors such as:

*The Agnes Lindsey Foundation,

*The George Ramlose Foundation,

*and—in 2021—CDBG Covid monies for child care.

Official Timeline for Camp Invention 2022

February 1: Begin enrollment

February –July 10: Assess scholarship eligibility

June: Curricular materials and teacher guides mailed either to SBES or directly to enrolled students (if camp is virtual or a parent has elected in-home participation.)

July 1: available scholarships confirmed and given out.

July 11: All tuitions paid. Tuition may be paid at any time, but Tuition is not officially due until the first day of camp.

July 11-16: Camp Days

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July 11-16: Camp Days

INTERNAL REVENUE SERVICE
P.O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: OCT 02 2006

RUFUS PORTER MUSEUM INC
C/O ROBERT L KIMBALL
PO BOX 98 19 MAIN ST
HARRISON, ME 04040

Employer Identification Number:
74-3175428
EIN:
17053346028005
Contact Person:
LISA M VAN DER SLUYS ID# 95264
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
June 30
Public Charity Status:
509(a)(1)
Form 990 Required:
Yes
Effective Date of Exemption:
June 7, 2005
Contribution Deductibility:
Yes
Advance Ruling Ending Date:
June 30, 2009

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. During your advance ruling period, you will be treated as a public charity. Your advance ruling period begins with the effective date of your exemption and ends with advance ruling ending date shown in the heading of the letter.

Shortly before the end of your advance ruling period, we will send you Form 8734, Support Schedule for Advance Ruling Period. You will have 90 days after the end of your advance ruling period to return the completed form. We will then notify you, in writing, about your public charity status.

Please see enclosed Information for Exempt Organizations Under Section 501(c)(3) for some helpful information about your responsibilities as an exempt organization.

If you distribute funds to other organizations, your records must show whether they are exempt under section 501(c)(3). In cases where the recipient organization is not exempt under section 501(c)(3), you must have evidence the funds will be used for section 501(c)(3) purposes.

Letter 1045 (DO/CG)

If you distribute funds to individuals, you should keep case histories showing the recipient's name and address; the purpose of the award; the manner of selection; and the relationship of the recipient to any of your officers, directors, trustees, members, or major contributors.

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

Lois G. Lerner
Director, Exempt Organizations
Rulings and Agreements

Enclosures: Information for Organizations Exempt Under Section 501(c)(3)
Statute Extension

Letter 1045 (DO/CG)

Organization Chart for The Rufus Porter Museum of Art and Ingenuity

Board of Trustees (see below)

Executive Director, Karla Leandri Rider

Community Engagement Coordinator, currently hiring

Dorothy Sanborn Summer Intern (paid)

Volunteer Docent/Administrative Staff

(includes Margaret Lindsey, Camp Invention Scholarship Coordinator)

Camp Invention Teaching Staff

(Allison Sands, head teacher)

Board of Trustees

President, Therese Johnson

Vice-President, Beth Cossey

Secretary, Dianne Barth

Treasurer, Deb Fitts

Board Member, Roy Gedat

Board Member, Pro Tem, Judith Graham

Board Member, Dave Johnson

Board Member, Peg Puza

Rufus Porter Museum of Art and Ingenuity, Inc.
 2022 Budget Overview
 Budget APPROVED 12/15/2021
 January - December 2022

Revenue	Amount	Notes & Comments
Admission	\$5,200.00	
Membership Revenue	\$12,500.00	Annual Membership Fees (Individual and Business)
Camp Invention Scholarship Fund	\$1,500.00	Restricted private donations (does not include potential grant funding)
Collections Fund	\$1,200.00	Restricted
Dorothy W. Sanborn Internship Fund	\$4,500.00	Restricted
Annual Fund	\$35,000.00	Donations & Contributions
Circle of Friends	\$40,000.00	Includes ongoing gifts from Patrons and Supporters
General	\$4,000.00	Unrestricted donations (not through a specific appeal/campaign)
Interest Income	\$1,800.00	
Business Sponsorship	\$4,000.00	
Major Fundraiser	\$8,000.00	Barn Tour net income
Small Fundraisers	\$4,000.00	
Museum Store	\$7,150.00	After expenses (\$7850)
Total Revenue	\$128,850.00	

Expenditures

Salaries & Benefits	\$85,526.10	Includes FT Executive Director, PT Community Engagement Coordinator, Summer Interns, Taxes & Benefits.
Collections	\$1,500.00	
Exhibits	\$500.00	
Fund Raising Events	\$3,200.00	
Camp Invention Scholarships	\$1,500.00	
Repair & Maintenance	\$4,400.00	
Security	\$1,650.00	
Utilities	\$5,600.00	
Insurances	\$4,200.00	
Mileage Reimbursement	\$100.00	
Office Equipment	\$700.00	
Advertisement	\$2,100.00	
Publications & Printing	\$500.00	
Dues/Subscriptions	\$1,150.00	
Newsletter Printing and Mailing	\$1,000.00	
Office Supplies	\$1,500.00	
Phone/Internet	\$1,500.00	
Postage	\$400.00	
Legal & Accounting	\$5,100.00	
Professional Development	\$1,000.00	
Software/Web/Equipment	\$2,650.00	
Volunteer Expenses	\$500.00	
Member Discounts	\$250.00	
Total Expenditures	\$126,526.10	
Profit/(Loss)	\$2,323.90	

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2020 calendar year, or tax year beginning , 2020, and ending ,	
B Check if applicable:	C
<input type="checkbox"/> Address change	RUFUS PORTER MUSEUM OF ART AND INGENUITY PO BOX 544 BRIDGTON, ME 04009
<input type="checkbox"/> Name change	
<input type="checkbox"/> Initial return	
<input type="checkbox"/> Final return/terminated	
<input type="checkbox"/> Amended return	
<input type="checkbox"/> Application pending	D Employer identification number 74-3175428
	E Telephone number
	G Gross receipts \$ 130,600.
	F Name and address of principal officer: DEB FITTS
	Same As C Above
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
J Website: www.rufusportermuseum.org	H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	L Year of formation: 2005 M State of legal domicile: ME
	H(c) Group exemption number ▶

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: Celebrate the life and times of a remarkably creative American genius who worked throughout Maine, New England and beyond.		
Activities & Governance	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	9
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	3
	6	Total number of volunteers (estimate if necessary)	6	20
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	86,167.	113,415.
	9	Program service revenue (Part VIII, line 2g)	11,072.	8,329.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	716.	1,093.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	7,372.	3,036.
	12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	105,327.	125,873.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	53,362.	55,911.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	60,492.	62,873.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	113,854.	118,784.
	19	Revenue less expenses. Subtract line 18 from line 12	-8,527.	7,089.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	616,587.	631,631.
	21	Total liabilities (Part X, line 26)	471.	8,426.
	22	Net assets or fund balances. Subtract line 21 from line 20	616,116.	623,205.

Part II Signature Block

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		Date	1/27/21
	DEB FITTS		Treasurer
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	BRUCE JONES		1/27/21
	Firm's name ▶ Jones & Matthews, P.A.	Check <input type="checkbox"/> if self-employed	PTIN P00542954
	Firm's address ▶ 472 Portland Rd. Ste. 201 Bridgton, ME 04009	Firm's EIN ▶ 01-0398436	Phone no. 207-647-3668

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III. []

1 Briefly describe the organization's mission:

Celebrate the life and times of a remarkably creative American genius who worked throughout Maine, New England and beyond.

2 Did the organization undertake any significant program services during the year which were not listed on the 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 changes in how it conducts, any program services?... [] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 118,784. including grants of \$) (Revenue \$)

Through displaying exhibits in the museum to educate the local communities in the works of Rufus Porter.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 118,784.

Part IV Checklist of Required Schedules

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

Part 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? <i>If 'Yes,' complete Schedule I, Parts I and III.</i>	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 employees? <i>If 'Yes,' complete Schedule J.</i>	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? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a.</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?.....	24b	
c 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? <i>If 'Yes,' complete Schedule L, Part I.</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? <i>If 'Yes,' complete Schedule L, Part I.</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II.</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>	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):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28a	X
b A family member of any individual described in line 28a? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II.</i>	32	X
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? <i>If 'Yes,' complete Schedule R, Part I.</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	34	X
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 controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>	36	X
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? <i>If 'Yes,' complete Schedule R, Part VI.</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	X

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V.

	Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1 a	0
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1 b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2 a	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.		
2 a			
3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
2 b			
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3 a			
b	If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O.		
3 b			
4 a	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)?		X
4 a			
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).		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5 a			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5 b			
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		
5 c			
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6 a			
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
6 b			
7 Organizations that may receive deductible contributions under section 170(c).			
a	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?		X
7 a			
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
7 b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7 c			
d	If 'Yes,' indicate the number of Forms 8282 filed during the year.		
7 d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7 e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7 f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7 g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
7 h			
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?		
9 a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
9 b			
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10 a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10 b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11 a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b	
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a	
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.	12 b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state?	13 a	
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	13 b	
c	Enter the amount of reserves on hand	13 c	
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14 a	X
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O.	14 b	
15	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	X
If 'Yes,' see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	X
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 on 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
1 a Enter the number of voting members of the governing body at the end of the tax year	1 a 9		
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 on Schedule O.			
b Enter the number of voting members included on line 1a, above, who are independent	1 b 9		
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?	2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6		X
7 a 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?	7 a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8 a	X	
b Each committee with authority to act on behalf of the governing body?	8 b	X	
9 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 on Schedule O	9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10 a Did the organization have local chapters, branches, or affiliates?	10 a		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?	10 b		
11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a		X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O			
12 a Did the organization have a written conflict of interest policy? If 'No,' go to line 13.	12 a		X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b		
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done.	12 c		
13 Did the organization have a written whistleblower policy?	13		X
14 Did the organization have a written document retention and destruction policy?	14		X
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?			
a The organization's CEO, Executive Director, or top management official.	15 a		X
b Other officers or key employees of the organization.	15 b		X
If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).			
16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		X
b 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?	16 b		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ▶ None
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on 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. **See Schedule O**
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records ▶
KARLA LEANDRI RIDER MAIN STREET BRIDGTON ME 04009 (207) 647-2828

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

1 a 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.

See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KARLA LEANDRI RIDER Director	30 0	X					36,672.	0.	0.	
(2) ANNE OVERMAN Trustee	1 0	X					0.	0.	0.	
(3) PEG PUZA Trustee	1 0	X					0.	0.	0.	
(4) SAMANTHA ZAWISTOWSKI Trustee	1 0	X					0.	0.	0.	
(5) DEB FITTS Treasurer	5 0	X		X			0.	0.	0.	
(6) DAVE JOHNSON Trustee	1 0	X					0.	0.	0.	
(7) THERESE JOHNSON President	10 0	X		X			0.	0.	0.	
(8) DIANNE BARTH Secretary	1 0	X		X			0.	0.	0.	
(9) JUDY GRAHAM Vice President	1 0	X		X			0.	0.	0.	
(10)										
(11)										
(12)										
(13)										
(14)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15) -----									
(16) -----									
(17) -----									
(18) -----									
(19) -----									
(20) -----									
(21) -----									
(22) -----									
(23) -----									
(24) -----									
(25) -----									
1 b Subtotal						36,672.	0.	0.	
c Total from continuation sheets to Part VII, Section A.						0.	0.	0.	
d Total (add lines 1b and 1c).						36,672.	0.	0.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If 'Yes,' complete Schedule J for such individual.</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If 'Yes,' complete Schedule J for such individual.</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If 'Yes,' complete Schedule J for such person.</i>	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns.....	1 a					
	b Membership dues.....	1 b					
	c Fundraising events.....	1 c					
	d Related organizations.....	1 d					
	e Government grants (contributions)....	1 e					
	f All other contributions, gifts, grants, and similar amounts not included above....	1 f	113,415.				
	g Noncash contributions included in lines 1a-1f.....	1 g					
	h Total. Add lines 1a-1f..... ▶		113,415.				
	Program Service Revenue	2 a MEM. DUES & ASSESSMENTS	Business Code	8,329.	8,329.		
b -----							
c -----							
d -----							
e -----							
f All other program service revenue....							
g Total. Add lines 2a-2f..... ▶			8,329.				
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)..... ▶		1,093.	1,093.		
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties..... ▶						
	6 a Gross rents.....	6 a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6 b					
	c Rental income or (loss)	6 c					
	d Net rental income or (loss)..... ▶						
	7 a Gross amount from sales of assets other than inventory	7 a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales expenses	7 b					
	c Gain or (loss).....	7 c					
	d Net gain or (loss)..... ▶						
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18.....	8 a		3,487.				
		b Less: direct expenses.....	8 b	1,366.			
		c Net income or (loss) from fundraising events..... ▶		2,121.			
9 a Gross income from gaming activities. See Part IV, line 19.....	9 a						
		b Less: direct expenses.....	9 b				
		c Net income or (loss) from gaming activities..... ▶					
10 a Gross sales of inventory, less..... returns and allowances.....	10 a		4,276.				
		b Less: cost of goods sold....	10 b	3,361.			
		c Net income or (loss) from sales of inventory..... ▶		915.	915.		
Miscellaneous Revenue		Business Code					
	11 a -----						
	b -----						
	c -----						
	d All other revenue.....						
e Total. Add lines 11a-11d..... ▶							
12 Total revenue. See instructions..... ▶			125,873.	10,337.	0.	0.	

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	50,497.	50,497.	0.	0.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7 Other salaries and wages.				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	1,551.	1,551.		
9 Other employee benefits.				
10 Payroll taxes.	3,863.	3,863.		
11 Fees for services (nonemployees):				
a Management.				
b Legal.				
c Accounting.	695.	695.		
d Lobbying.				
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.)	2,019.	2,019.		
12 Advertising and promotion.	2,816.	2,816.		
13 Office expenses.	3,918.	3,918.		
14 Information technology.				
15 Royalties.				
16 Occupancy.	15,914.	15,914.		
17 Travel.	16.	16.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.				
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	17,081.	17,081.		
23 Insurance.	3,902.	3,902.		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>Camp Invention Scholarship</u>	6,500.	6,500.		
b <u>Infrastructures</u>	2,557.	2,557.		
c <u>Security</u>	1,800.	1,800.		
d <u>Telephone/Internet</u>	1,327.	1,327.		
e All other expenses.	4,328.	4,328.		
25 Total functional expenses. Add lines 1 through 24e.	118,784.	118,784.	0.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> 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)	
		Beginning of year		End of year	
Assets	1	Cash – non-interest-bearing	123,473.	1	153,850.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	10,222.	8	8,917.
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 529,325.		
	b	Less: accumulated depreciation	10b 60,461.	482,892.	10c 468,864.
	11	Investments – publicly traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 33)	616,587.	16	631,631.	
Liabilities	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	471.	25	8,426.
	26	Total liabilities. Add lines 17 through 25	471.	26	8,426.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions		27	
	28	Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds	616,116.	31	623,205.
32	Total net assets or fund balances.	616,116.	32	623,205.	
33	Total liabilities and net assets/fund balances.	616,587.	33	631,631.	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	125,873.
2	Total expenses (must equal Part IX, column (A), line 25)	2	118,784.
3	Revenue less expenses. Subtract line 2 from line 1	3	7,089.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	616,116.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	623,205.

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: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2 b	Were the organization's financial statements audited by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2 c	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? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3 a	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?		X
3 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 on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization RUFUS PORTER MUSEUM OF ART AND INGENUITY	Employer identification number 74-3175428
-----------------------------------------------------------------------------	-----------------------------------------------------

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations: _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	%
16a 33-1/3% support test—2020. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 33-1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.).....	141,873.	114,737.	162,582.	97,239.	121,744.	638,175.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.....	12,512.	20,415.	30,518.	18,402.	7,763.	89,610.
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.....						0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge...						0.
6 Total. Add lines 1 through 5...	154,385.	135,152.	193,100.	115,641.	129,507.	727,785.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.....	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.....	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b.....	0.	0.	0.	0.	0.	0.
8 Public support. (Subtract line 7c from line 6.).....						727,785.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6.....	154,385.	135,152.	193,100.	115,641.	129,507.	727,785.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.....	13.	7.	9.	716.	1,093.	1,838.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975...						0.
c Add lines 10a and 10b.....	13.	7.	9.	716.	1,093.	1,838.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.....						0.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI.....	49,424.	3,909.	2,171.			55,504.
13 Total support. (Add lines 9, 10c, 11, and 12.).....	203,822.	139,068.	195,280.	116,357.	130,600.	785,127.
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)).....	15	92.70 %
16 Public support percentage from 2019 Schedule A, Part III, line 15.....	16	93.27 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)).....	17	0.23 %
18 Investment income percentage from 2019 Schedule A, Part III, line 17.....	18	0.09 %

- 19a 33-1/3% support tests—2020.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization. ▶
- b 33-1/3% support tests—2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization. ▶
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions..... ▶

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If 'Yes,' answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If 'Yes,' describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ('foreign supported organization')? <i>If 'Yes' and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If 'Yes,' answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If 'Yes,' provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If 'Yes,' provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If 'Yes,' provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If 'Yes,' answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described in line 11a above?		
11b		
c A 35% controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI.		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
2a		
b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If 'Yes' or 'No,' provide details in Part VI.		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):	1e	
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

BAA

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D – Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required – provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required – explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2020		
a	From 2015.....		
b	From 2016.....		
c	From 2017.....		
d	From 2018.....		
e	From 2019.....		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2020 distributable amount		
i	Carryover from 2015 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2020 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2020 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2021. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2016.....		
b	Excess from 2017.....		
c	Excess from 2018.....		
d	Excess from 2019.....		
e	Excess from 2020.....		

BAA

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part III, Line 12 - Other Income

Nature and Source	2020	2019	2018	2017	2016
Sale of House					\$ 46,890.
Other Income			\$ 2,171.	\$ 3,909.	2,534.
Total	\$ 0.	\$ 0.	\$ 2,171.	\$ 3,909.	\$ 49,424.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service**Schedule of Contributors**▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization

RUFUS PORTER MUSEUM OF ART AND INGENUITY

Employer identification number

74-3175428

Organization type (check one):**Filers of:****Section:**

Form 990 or 990-EZ

 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

-
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering 'N/A' in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

RUFUS PORTER MUSEUM OF ART AND INGENUITY

Employer identification number

74-3175428

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BETH & JIM COSSEY 338 HIGHLAND RD BRIDGTON, ME 04009	\$ 9,700.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	WILLIAM & JUDITH GRAHAM 5109 S NICHOL ST TAMPA, FL 33511	\$ 17,092.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	NORMAN & ELEANOR NICHOLSON PO BOX 306 BRIDGTON, ME 04009	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---	-----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---	-----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---	-----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization **RUFUS PORTER MUSEUM OF ART AND INGENUITY** Employer identification number **74-3175428**

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶\$ N/A
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number

RUFUS PORTER MUSEUM OF ART AND INGENUITY

74-3175428

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, aggregate value of grants, and questions about donor advisement and grant fund usage.

Part II Conservation Easements.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.

Table with 3 columns: Question, Held at the End of the Tax Year. Rows include purpose of easements, monitoring policy, staff hours, expenses, and reporting requirements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.

Table with 3 columns: Question, Revenue, Assets. Rows include reporting requirements for art collections and financial gain.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange program
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1 a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If 'Yes,' explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance.....	1 c
d Additions during the year.....	1 d
e Distributions during the year.....	1 e
f Ending balance.....	1 f

2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.

Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance.....					
b Contributions.....					
c Net investment earnings, gains, and losses.....					
d Grants or scholarships.....					
e Other expenditures for facilities and programs.....					
f Administrative expenses.....					
g End of year balance.....					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ▶ _____ %
- b Permanent endowment ▶ _____ %
- c Term endowment ▶ _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations.....	3a(i)	
(ii) Related organizations.....	3a(ii)	
b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?.....	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land.....				
b Buildings.....		284,639.	29,192.	255,447.
c Leasehold improvements.....		221,615.	19,979.	201,636.
d Equipment.....				
e Other.....		23,071.	11,290.	11,781.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.).....				468,864.

BAA

Part VII Investments – Other Securities.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		

Part VIII Investments – Program Related.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		

Part IX Other Assets.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) PPP Loan	8,255.
(3) Sales Tax Payable	171.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements.....		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments.....	2 a		
	b Donated services and use of facilities.....	2 b		
	c Recoveries of prior year grants.....	2 c		
	d Other (Describe in Part XIII.).....	2 d		
	e Add lines 2a through 2d.....		2 e	
3	Subtract line 2e from line 1.....		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b.....	4 a		
	b Other (Describe in Part XIII.).....	4 b		
	c Add lines 4a and 4b.....		4 c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).....		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements.....		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities.....	2 a		
	b Prior year adjustments.....	2 b		
	c Other losses.....	2 c		
	d Other (Describe in Part XIII.).....	2 d		
	e Add lines 2a through 2d.....		2 e	
3	Subtract line 2e from line 1.....		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b.....	4 a		
	b Other (Describe in Part XIII.).....	4 b		
	c Add lines 4a and 4b.....		4 c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).....		5	

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

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

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Employer identification number

RUFUS PORTER MUSEUM OF ART AND INGENUITY

74-3175428

Form 990, Part VI, Line 11b - Form 990 Review Process

No review was or will be conducted.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.

Client RUFUSPOR

RUFUS PORTER MUSEUM OF ART AND INGENUITY

74-3175428

1/23/21

08:45AM

Computation of Cost of Goods Sold (Form 990)

1. Inventory at start of year.....	
2. Purchases.....	10,222.
3. Cost of labor.....	2,056.
4. Additional 263A costs.....	0.
5. Other costs.....	0.
6. Total (Add lines 1 through 5).....	0.
7. Inventory at end of year.....	12,278.
8. Cost of goods sold (Subtract line 7 from line 6).....	8,917.
	<u>3,361.</u>

**Form 990, Part III, Line 4e
Program Services Totals**

	Program Services Total	Form 990	Source
Total Expenses	118,784.	118,784.	Part IX, Line 25, Col. B
Grants	0.	0.	Part IX, Lines 1-3, Col. B
Revenue	0.	8,329.	Part VIII, Line 2, Col. A

**Form 990, Part IX, Line 11g
Other Fees For Services**

	(A) Total	(B) Program Services	(C) Management & General	(D) Fund- raising
Payroll Processing Fees	962.	962.		
Professional Services	1,057.	1,057.		
Total	\$ 2,019.	\$ 2,019.	\$ 0.	\$ 0.

**Form 990, Part IX, Line 24e
Other Expenses**

	(A) Total	(B) Program Services	(C) Management & General	(D) Fundraising
Credit Card Fees	258.	258.		
Dues & Subscriptions	1,048.	1,048.		
Grant Expense	1,251.	1,251.		
Member Discounts	148.	148.		
Miscellaneous	111.	111.		
Postage and Shipping	319.	319.		
Printing and Publications	753.	753.		
Professional Development	440.	440.		
Total	\$ 4,328.	\$ 4,328.	\$ 0.	\$ 0.

Client RUFUSPOR

RUFUS PORTER MUSEUM OF ART AND INGENUITY

74-3175428

1/23/21

08:45AM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Dep. Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec. Bal. Depr.	Salvage /Basis Reductio.	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.	
Form 990/990-PF																	
Buildings																	
1	BUILDINGS (PRE 2016)	Various		284,639							284,639	21,894	S/L	MM	39	.02564	7,298
Total Buildings																	
Furniture and Fixtures																	
4	COLLECTIONS	7/01/17		6,888							6,888	3,876	200DB	HY	7	.12490	860
5	COLLECTIONS	7/01/18		5,862							5,862	2,274	200DB	HY	7	.17490	1,025
7	COLLECTIONS	7/01/19		7,268							7,268	1,039	200DB	HY	7	.24490	1,780
9	COLLECTIONS	7/01/20		3,053							3,053		200DB	HY	7	.14290	436
Total Furniture and Fixtures																	
Improvements																	
2	IMPROVEMENTS	7/01/16		121,690							121,690	9,360	S/L	MM	39	.02564	3,120
3	IMPROVEMENTS	7/01/17		69,936							69,936	4,409	S/L	MM	39	.02564	1,793
6	IMPROVEMENTS	6/24/19		4,285							4,285	60	S/L	MM	39	.02564	110
8	WINDOWS	4/22/19		25,704							25,704	468	S/L	MM	39	.02564	659
Total Improvements																	
Total Depreciation																	
Grand Total Depreciation																	

Memorandum of Agreement and Letter of Support

This letter serves as a Memorandum of Agreement and Support between The Rufus Porter Museum of Art and Ingenuity; The National Inventors Hall of Fame (Camp Invention); Margaret Lindsey, Camp Invention Scholarship Coordinator; and Stevens Brook Elementary School.

Camp Invention is a nationally acclaimed summer STEM program led by certified local educators and grouped by grade level to create effective, encouraging learning environments. Camp Invention 2022 will be held during the week of July 11-16, 2022 at The Stevens Brook Elementary School in Bridgton, ME. Daily hours will be 8:30 a.m. -3:00 p.m.

These entities will continue in mutual support during the year 2022, working together to provide tuition scholarships for school children aged Kindergarten through Grade Six who attend or have attended The Stevens Brook Elementary School in Bridgton, ME. These organizations are also committed to seeking funding from sources other than CDBG including private donors, The United Way of Southern Maine, The Agnes Lindsey Foundation, the George A. Ramlose Foundation, and resources contributed by the National Inventors Hall of Fame.

During the summer of 2021, there were 76 attendees at Camp Invention. 34 students paid their own tuition; 42 students (including 12 CDBG-Covid scholarship recipients) received a full tuition scholarship.

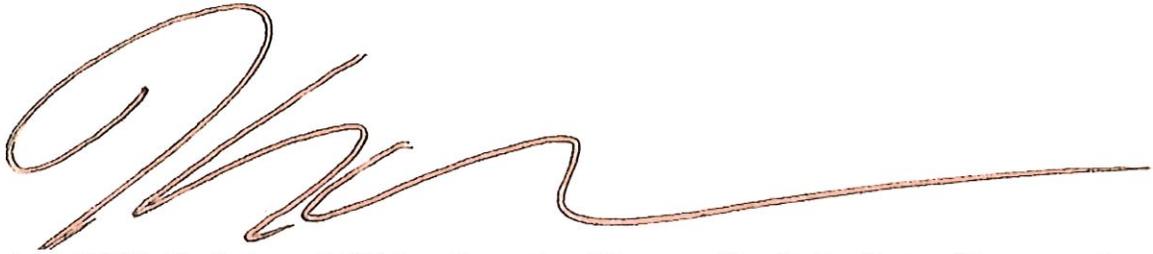
With the assistance of the Stevens Brook Elementary School (SBES) staff (in particular, Camp Director Allison Sands,) we will identify only low or low to middle income students who will receive CDBG scholarships. She will employ the same formulas used to determine free breakfast and lunch eligibility already used by Lake Region Schools. All tuition scholarships will be administered through The Rufus Porter Museum Camp Invention Scholarship budget. The RPM will pay Camp Invention directly.

The entities involved with this agreement intend to continue the precedent set last summer (2021) which allowed twelve (12) SBES children to receive a full scholarship to CI. This week of creative "childcare" provided essential services to area families, especially during the pandemic, who experienced difficulties in finding care for children while parents worked. More educationally, this program provided a week of STEM (Science, Technology, Engineering, and Mathematics) activities for participating children. These activities will have a long-lasting impact on their success in school, especially in the following areas:
Creativity, Persistence, confidence, problem solving, and reading skills.

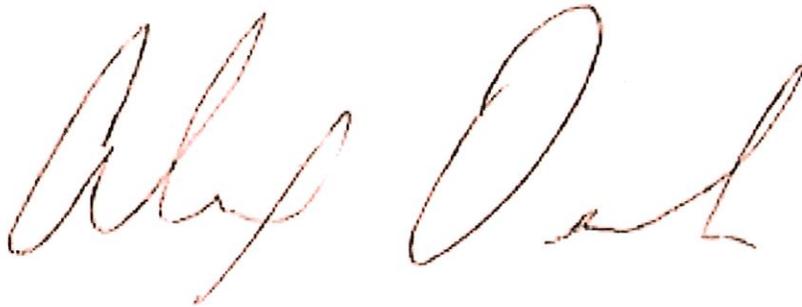
The Mission of Camp Invention speaks directly to the educational interests of Mr. Rufus Porter who was an artist, inventor, educator, and enhancer of public knowledge and creative thinking. Mission statement: The Rufus Porter Museum of Art and Ingenuity

page 2) celebrates the life and times, and legacy of a remarkable 19th c. New Englander through preservation and promotion of creativity and invention.

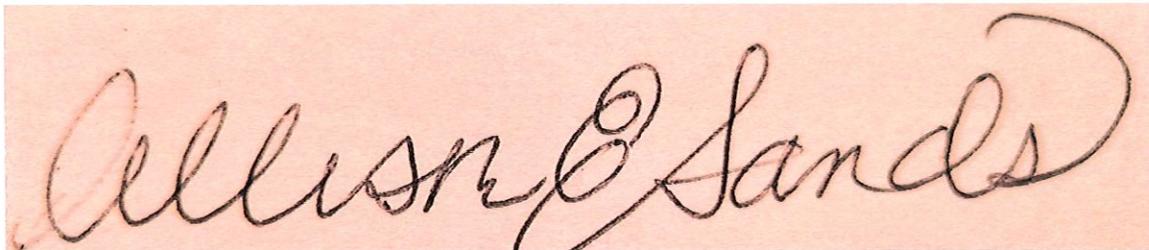
Signed:

A handwritten signature in brown ink, appearing to read 'Karla Leandri Rider', with a long horizontal flourish extending to the right.

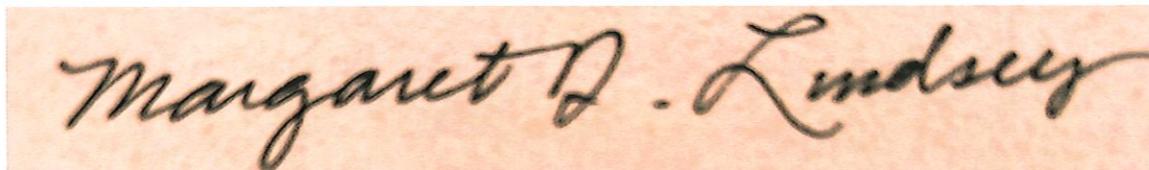
1/4/2022: Karla Leandri Rider, Executive Director, The Rufus Porter Museum of Art and Ingenuity

A handwritten signature in brown ink, appearing to read 'Alex Oesch', with a long horizontal flourish extending to the right.

1/3/2022: Alex Oesch, Account Manager, K-12 Education Programs, Camp Invention

A handwritten signature in brown ink, appearing to read 'Allison Sands', with a long horizontal flourish extending to the right.

1/4/2022: Allison Sands, Camp Director, Camp Invention; Teacher, SBE

A handwritten signature in brown ink, appearing to read 'Margaret D. Lindsey', with a long horizontal flourish extending to the right.

1/3/2022: Margaret Lindsey, Camp Invention Scholarship Coordinator for the Rufus Porter Museum of Art and Ingenuity



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/30/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER AssuredPartners of Ohio, LLC 4244 Mt. Pleasant St., NW North Canton OH 44720	CONTACT NAME: Darren Faye	
	PHONE (A/C, No, Ext): 330-266-1904	FAX (A/C, No): 330-498-9946
E-MAIL ADDRESS: dfaye@leonardinsurance.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED National Inventors Hall of Fame Inc. 3701 Highland Park NW North Canton OH 44720	INSURER A : Philadelphia Indemnity Company	18058
	INSURER B : Hartford Ins Co of the Midwest	37478
	INSURER C : HSB Specialty Insurance Company	14438
	INSURER D :	
	INSURER E :	
INSURER F :		

COVERAGES

CERTIFICATE NUMBER: 1862899705

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			PHPK2318961	8/31/2021	8/31/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			PHPK2318961	8/31/2021	8/31/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			PHUB783129	8/31/2021	8/31/2022	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	45WBCBV3411	1/1/2022	1/1/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.I. EACH ACCIDENT \$ 1,000,000 E.I. DISEASE - EA EMPLOYEE \$ 1,000,000 E.I. DISEASE - POLICY LIMIT \$ 1,000,000
A A C	Abuse & Molestation Professional Liab Cyber Liability			PHPK2318961 PHPK2318961 6605426-02	8/31/2021 8/31/2021 8/21/2021	8/31/2022 8/31/2022 8/21/2022	\$1,000,000 each claim \$1,000,000 each claim \$2,000,000 each claim \$3,000,000 Agg \$3,000,000 Agg \$2,000,000 Agg

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Automatic Additional Insured per written contract/agreement as provided by form PI-GLD-MK (03/2012)
 Camp Invention - Certificate Holder included as Additional Insured. C-ME39-18864-22

CERTIFICATE HOLDER**CANCELLATION**

RSU 61 MSAD 61
 900 Portland Rd.
 Bridgton ME 04009

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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TESTIMONIALS FROM CAMP INVENTION 2021

Student A was one of the youngest campers, going into Kindergarten. On the one hand, this child could already read, add, subtract, and do basic math problems. On the other hand, this was a child who had had no formal schooling, as yet. Each camp day he could report back to his parents in extensive detail what (and how) they had built that day. The significant information he relayed, however, was how the older children had helped him, and how exciting it was to work with kids who could teach him what he didn't know. Reflecting an important educational goal of the program, the child repeatedly described, "The older kids did lots of things better than me. But I could do some things better than some of them, so we all did well." Rather than getting discouraged or feeling out of place with his young age despite his own gifts, he came away understanding the nature of collaboration—the centerpiece of problem solving and invention.

Two siblings, an older sister and a younger brother, came to Camp. The younger brother had a number of allergies and was so anxious that he would initially not even enter the classroom. One of the parent volunteers arranged for him to put his chair just outside the door, facing the hallway. At any point he chose, he could turn around and watch or even come in. By mid-week, he was participating in every activity and every team project. He left a changed child!

These were reported by parents:

"My daughter loved taking things apart and putting them back together. She loves creating and this camp gave her the opportunity to use materials (LOTS OF TAPE!) to create her own things."

"With covid my daughter was home schooled last year so it was an amazing opportunity for her to get out of the house and make friends. She loved sharing what she had done during the day."

"My kids LOVED camp invention and continue to talk about it many weeks later."

"He absolutely love creating the microphone! And couldn't wait to show me how the solar powered cricket worked ! Also the chance to get to hang with peers he thought he wouldn't see again until next year was an absolute treat for him! Thanks so much camp invention! My boy will surely be back!"



Camp Invention®

EXPLORE

FOUR ALL-NEW ADVENTURES IN
HANDS-ON INVENTION EDUCATION



- Inspired by real space exploration, children build innovative devices to help them problem solve on distant planets and moons.
- Campers take on gravity-defying cooking challenges, make lunar glow-in-the dark discoveries and observe erupting ice volcanoes!
- Children mine an asteroid and collect data on how an animal can hatch from an egg and grow in space.



- Children dive into cutting-edge ocean research with their own robotic fish!
- To create a scenic habitat in a mini tank, campers design and patent new aquatic plants and give their fish a symbiotic friend.
- Influenced by deep-sea research, children design a bio-inspired aquatic innovation that will hook investors.

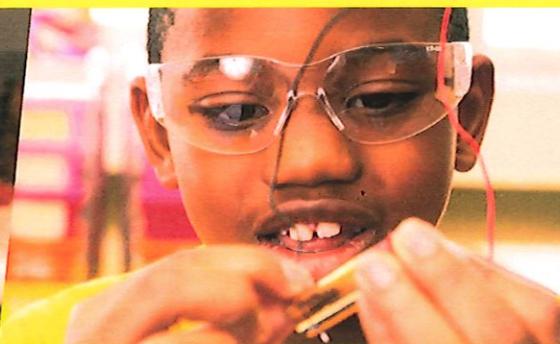


- In this immersive STEAM experience, children experiment with different media and discover inventions that have changed the way people create.
- Campers discover how animation works and make their own moving image — a thaumatrope!
- Children build their own spinning art robot and design one-of-a-kind shoes while exploring intellectual property.



- Children zigzag through physics, engineering and gaming as they build a mega marble arcade!
- Campers experiment with scientific principles like potential and kinetic energy as they roll gaming spheres at different speeds.
- Collaborative design challenges take children out of the digital world and into exciting, hands-on problem solving.

Camp Invention® is a nationwide K-6 STEM program providing creative, open-ended learning opportunities. This hands-on experience aligns to standards and typically runs for one week but can be adapted to meet district needs.



LEARN MORE TODAY AT INVENT.ORG/EDUCATORS/CAMP-INVENTION

© 2021 National Inventors Hall of Fame®, Inc.



**Town of Bridgton
Community Development Block Grant
Public Facilities and Infrastructure
Application**

July 1, 2022 – June 30, 2023

Elm Street Sidewalk Extension

Submitted by the Town of Bridgton Community Development Department
on January 11th, 2022

II. CONSTRUCTION APPLICATION

COMPLETE APPLICATION CHECKLIST

Please submit each section of the application, including this checklist:

- A. Construction Cover Page *limit 1 page*
- B. Construction Worksheet *limit 2 pages*
- C. Construction Narrative *limit 4 pages*
- D. Budget: Revenues and Expenditures, attached separately, *limit 1 page*
- E. Construction Summary *limit 1 page*

Required documents for ALL Construction Projects, *applies to non-profit or Town applicants:*

- Scope of work provided by Town or building professional: engineer, architect, project manager or contractor.
- Estimate provided by Town or building professional: engineer, architect, project manager or contractor. *Please note: if the project is over \$2,000 and is not being built with Town employees, federal wage rates apply.*
- Plans or Pictures if applicable, black and white, *limit 3 pages total*
For Slum/Blight projects: Blight or decay must be documented and submitted as part of the application (required for SB)
- Project Map of the neighborhood served by this project (LMA only)
- Project Timeline (See Section C-6*)

Supporting documents (subject to scoring)

- Memorandum of Agreement, if applicable, that describes the relationship between partner entities for this application. *Limit 2 pages: can be one MOA that's two pages long or two MOA's that are one page each. (See Work Order attached)*
- Letter of Support, if there is no MOA; a letter of support may be submitted. *Limit 2 pages: can be one letter that's two pages long or two letters that are one page each.*

Additional required documents for non-profit organizations:

- Verification of 501(c)3 Status, *limit 1 page*
- Most Recent Independent Auditors Report and identified findings or *if an Audit is not available* the most recent 990 Financial Statement
- Complete list of Board Members

Signature of the President, CEO, Executive Director or Town Manager

Date

01/10/22

*Town of Bridgton Community Development Block Grant Public Facilities and Infrastructure Application
2022-2023*

A. CONSTRUCTION COVER PAGE, limit 1 page

**COMMUNITY DEVELOPMENT BLOCK GRANT
PROGRAM YEAR 2020-2021**

Application Type	<input checked="" type="checkbox"/> Construction		
Operating Agency/ Business	Town of Bridgton, Maine		
Project Name	Elm Street Sidewalk Extension		
Mailing Address	3 Chase Street, Suite 1 Bridgton, ME 04009		
Project Address	Elm Street (from Main Street to Bennett Street)		
Executive Director	Linda LaCroix , Community Development Director	Phone 803-9956	Email llacroix@bridgtonmaine.org
Project Director	David Madsen Public Works Director	Phone 647-2326	Email dmadsen@bridgtonmaine.org
Financial Contact	Holly Heymann Finance Director	Phone 803-9957	Email hheyman@bridgtonmaine.org
Person who completed the Application	Victoria Hill , Deputy Community Development Director	Phone 803-9960	Email vhill@bridgtonmaine.org
Amount of CDBG Funds Requested	\$ 136,886	Total Project Budget \$ 143,086	
DUNS Number	948993381	Tax ID: 01-6000082	

B. CONSTRUCTION WORKSHEET, limit 2 pages

1. **HUD National Objective.** Indicate which National Objective this program activity will address, choose one. Refer to National Objective description p. 3 for additional information.

- Prevention and Elimination of Slum or Blight** to address conditions that is detrimental to public health, safety, or welfare (SB) *Slum or blight must be documented & submitted with the application.*
- Low and Moderate Income Area Benefit (LMA):** an activity *which is available to benefit all the residents of an eligible area/census tract*, plus housing authority properties.
If you choose LMA, please provide a map and outline on the map the area that your program serves.
- Low and Moderate Income Clientele (LMC):** an activity which provides benefits to a specific group of persons of which at least 51% qualify as LMI Bridgtoners.
Does this activity benefit a population that HUD presumes to be low to moderate income, including *abused children, elderly persons, battered spouses, homeless persons, illiterate adults, severely disabled adults, persons living with AIDS, and migrant farm workers?* No Yes (please circle appropriate population)
- Low and Moderate Income Housing (LMH)**

2. **HUD Program Objectives.** Indicate which HUD program objective this program will address; choose one:

- Creating a Suitable Living Environment**
- Providing Decent Housing**
- Creating Economic Opportunity**

3. **Primary Goal.** Indicate the primary goal your program or project addresses; choose one. Refer to the instructions on p. 6-7 for additional information.

- Public Facility Improvements-** *Improve accessibility and availability of public infrastructure*
- Public Infrastructure Improvements-***Improve the quality of public infrastructure that primarily serves low to moderate income families*
- Affordable Housing-***Promote activities that support affordable housing development and the rehabilitation of residential housing.*
- Economic Opportunity:** *Assist businesses through job creation programs*
- Public Services-** *Promote programs and activities that improve the quality of life for low and moderate income individuals.*
- Community Planning-***Promote long range planning for the benefit of the community as a whole.*

4. **Location.**

A. What census tract is the project located?	A. 016000
B. Service Area: What neighborhoods will be served by this project (<i>LMA only</i>)	B. Neighborhoods in the downtown district, all neighborhoods accessing services and businesses in downtown district

*Town of Bridgton Community Development Block Grant Public Facilities and Infrastructure Application
2022-2023*

5. **Beneficiaries.** *(LMA answer A only)*

A. Describe the beneficiaries or clients served by the program.	A. Bridgton residents of all ages in LMI Area
B. How many will be served by the proposed program?	B. n/a
C. How many are <i>residents of Bridgton</i> ?	C. n/a
D. How many are <i>low to moderate income residents of Bridgton</i> ? See income data in the instructions	D. n/a
E. What percentage of total clients are low to moderate income residents of Bridgton? <i>(To calculate = D/B * 100; Must be > 51%)</i>	E. n/a

6. **Program Objectives and Outcomes.** Please list below:

Program Objectives	Outcomes/ Community Impact
Extend sidewalk the full length of Elm Street, extending from Main Street to Bennett Street	Provide safe passage to LMI residents on this corridor and access to the Post Office and other businesses frequented by residents
	Provide continuity of sidewalk safety and aesthetic from Main Street Streetscape Project

7. **Documentation** *(not applicable for LMA)*

A. How will the beneficiaries' information be collected and documented?	A. n/a
B. How will the units of service be tracked and documented?	B. n/a
C. How will the outcomes be measured, collected, and documented?	C. n/a

C. CONSTRUCTION NARRATIVE

2022-2023 CDGB Infrastructure Application Narrative Elm Street Sidewalk Extension

Program Year: FY 2022-2023

Organization: Town of Bridgton, Maine

Contact: Linda LaCroix, Community Development Director

Address: 3 Chase Street, Bridgton, ME 04009

Email: LLaCroix@BridgtonMaine.org

Phone: 207-803-9956 (Direct Line); 207-595-3560 (Mobile)

Project Title: Elm Street Sidewalk Extension

Program Category: Public Infrastructure/Facility

National Objectives:

Low/Moderate Income: Area-Wide

Slum/Blight: Area-Wide

Amount of Funds Requested: \$136,886

Name of Authorized Official: Linda LaCroix

1. Project Description/Scope of Work

Extend sidewalk the full length of Elm Street, extending from Main Street to Bennett Street, providing safe passage on this corridor that includes the Post Office and other businesses frequented by residents. The cost estimate includes new 4'-wide concrete sidewalk with granite curbing from end of existing sidewalk on Main Street to Bennet Street. We matched the width of the existing sidewalk at Main Street as well as construction (granite curb and concrete sidewalk).

This area receives substantial foot traffic throughout the year as it is a passageway from LMI neighborhoods in the residential sections connected to it. The existing sidewalks are in disrepair and present a walking hazard as they currently exist with sections pushed up and sunken down throughout the distance of Elm Street. The sidewalks will replace the dilapidated walking area making it safer for pedestrians especially as they approach the busy area by the Post Office and Main Street. Elm Street also connects to Park Street where cars travel throughout the day making their way up or down Elm to Bennet Street and connecting roads.

The scope of work will consist of removing what remains of the deteriorated existing sidewalk running the entire length of Elm Street. Once the sidewalk is removed common excavation for the new sidewalk will be followed by installation of a base course, vertical curbing and finally concrete in the walking section. Hot mix concrete will be used to finish out the disturbed area of the roadway at the edges of the sidewalk. Following the installation of the sidewalk, Elm Street itself will be repaved to address the deteriorated roadway as well. Miscellaneous scope of work includes mobilization, temporary soil erosion and water pollution control, engineering design and bidding, project management and construction administration.

The project has been designed and sections will be prepared to match the Town of Bridgton's ongoing Streetscape improvement project approved by the town and coming under separate funds.

*Town of Bridgton Community Development Block Grant Public Facilities and Infrastructure Application
2022-2023*

2. Need for Project

The Elm Street area is a daily destination for residents going to and from both businesses on the street itself and to access LMI neighborhoods surrounding Elm Street, to include access to the Municipal Complex at the end of Bennet Street where it joins Chase Street. The combination of pedestrians and cars passing on Elm Street throughout the day to access the Post Office poses safety concerns for walkers and vehicle drivers alike with existing sidewalk conditions. The sidewalk extension will connect walkers on a continuous and safe passage from Main Street to the Post Office and connecting neighborhood roads.

3. Project Management

The project will be managed by the Town of Bridgton’s Public Services Director David Madsen, together with the Town Engineers from Woodard & Curran led by Senior Principal and Engineer Brent Bridges. Mr. Madsen and Woodard and Curran are managing current, major infrastructure projects including wastewater and streetscape projects for the town.

4. Readiness to Proceed

Upon securing funding, the Town Engineer will prepare bid documents and will manage the bidding project. Following the selection of the successful bidder, the project will go directly into the procurement and construction phase as managed by Woodard and Curran and David Madsen. A detailed services agreement and work order executed between the Town and its Town Engineer is included as part of this application.

5. Budget for the Project

Project costs are estimated at \$143,086 as described in the attached budget sheet and pending final bid response, plus in-kind items to include project management and administration at an estimated \$2,500, and miscellaneous construction materials provided by the town at \$1,500.

Cost Funding	CDBG	ORG	Other	Total
Engineering Design, Bidding and Construction Administration Services	\$32,000			\$32,000
Construction Costs	*104,886	\$2,400		\$107,286
Project Management and Administration		\$3,800		\$3,800
Total Costs	\$136,886	\$6,200	\$0.00	\$143,086

- * Contingency included in line items.
- Removing existing pavement \$1,850
- Paving including materials \$13,400
- Reinforced Concrete Sidewalk \$51,800
- Granite Curbing installed \$26,784
- Miscellaneous and Mobilization \$11,312

6. Implementation Schedule

Project start will be triggered by receipt of project funds and competitive bid process. *The schedule for mobilization, excavation, site prep and installation of sidewalk will be determined during and as a result of the bid process.

*Town of Bridgton Community Development Block Grant Public Facilities and Infrastructure Application
2022-2023*

7. Demonstration of Need for CDGB Funds

If successful in securing CDBG funds, the Town of Bridgton will contribute in-kind work to include project management and administration. Bridgton qualifies to receive these CDGB funds each year specifically to achieve the national goals serving low to moderate income residents in the Town and does not generally include sources other than in-kind work performed by town personnel unless costs exceed annual allocations determined by the program.

*Town of Bridgton Community Development Block Grant Public Facilities and Infrastructure Application
2022-2023*

D. BUDGET: REVENUES AND EXPENDITURES, limit 1 page.

D. BUDGET FORM , limit 1 page			
<i>Complete one program budget spreadsheet for each program application.</i>			
<i>Feel free to edit categories under Revenues or Expenditures as relevant to your program or project.</i>			
PROGRAM OR PROJECT NAME:		Elm Street Sidewalk Extension	
APPLICANT:		Town of Bridgton, Maine	
CDBG Program Year: July 1, 2022- December 31, 2024			
REVENUES	Please indicate: Secured or Projected	Revenues TOTAL	
CDBG Request 2022-2023	Projected	136886	
Other HUD Funds (please list)			
a.			
Other Federal Funds (please list)			
a.			
b.			
State/ County Funds (please list)			
a.			
b.			
City Funds			
Private Funds (Grants, Fundraising, etc, please list)			
a.			
b.			
In Kind Services (Town of Bridgton)	Secured	6200	
TOTAL PROGRAM or PROJECT REVENUE		143086	
EXPENDITURES	Expenditures CDBG	Expenditures All Other Sources	Expenditures TOTAL
Design/ Engineering, Bid Assistance, Construction Mngt	32000		32000
Materials/Supplies and Construction Costs	104886	2400	107286
Project Management and Administration		3800	3800
			0
Other, please specify			0
a.			0
b.			0
c.			0
d.			0
e.			0
TOTAL PROGRAM or PROJECT EXPENSES	136886	6200	143086
			143086

*Town of Bridgton Community Development Block Grant Public Facilities and Infrastructure Application
2022-2023*

E. CONSTRUCTION SUMMARY, *limit 1 page*

Application Type	<input checked="" type="checkbox"/> Construction Project		
Applicant	Town of Bridgton		
Project Name	Elm Street Sidewalk Extension		
Project Address/Location	Elm Street between Main Street and Bennett Street		
Funds Requested	\$ 136,886		
Project Summary			
Extend sidewalk the full length of Elm Street, extending from Main Street to Bennett Street, providing safe passage on this corridor and access to the Post Office and other businesses frequented by residents. The cost estimate includes new 4'-wide concrete sidewalk with granite curbing from end of existing sidewalk on Main Street to Bennet Street. The proposed sidewalk will match the width of the existing sidewalk at Main Street as well as construction (granite curb and concrete sidewalk).			
HUD National Objective <i>Refer to Section III.B.1</i>	<input type="checkbox"/> Prevention of Slum/ Blight	<input type="checkbox"/> Low/ Moderate Income Clientele	
	<input checked="" type="checkbox"/> Low/Moderate Income Area	<input type="checkbox"/> Low/ Moderate Income Housing	
Location - For LMA projects <i>Refer to Section II.B.4</i>			
Census Tracts	016000		
Service Area Neighborhoods (For LMA Projects)	LMI neighborhoods in downtown district – Elm St. serves as a corridor for accessing service facilities, business and public facilities		
Beneficiaries/ Clients Served - <i>Refer to Section II.B.5</i>			
Client Description	Residents in LMI area		
Number of Clients Served	n/a		
Number of LMI Bridgtoners	n/a		
LMI Bridgton Percentage	n/a		
Outcomes - <i>Refer to Section II.B.6</i>			
The Elm Street sidewalk project will connect walkers on a continuous and safe passage from Main Street to the Post Office and connecting neighborhood roads.			
Budget - <i>Refer to Section II.D</i>			
\$ 136,886	CDBG Request (Must match CDBG Request on Cover Page and Budget Worksheet)		
\$ 143,086	Total Program Budget (Must match Total Budget on Cover Page and Budget Worksheet)		
95.7 %	Percentage of CDBG Request of Total Budget [50% or less indicates at least a 1 to 1 match]		
Leveraged Funds - <i>Refer to Section II.D</i>			
\$ -	Federal	\$ -	Other grants
\$ -	State	\$ -	Endowment
\$ -	County	\$ -	Private Funds
\$ 6,200	Town (<i>not CDBG</i>)	\$ -	Gifts in kind

Attached Documents:

Work Order provided by Woodard & Curran *3 pages*

Opinion of Probable Project Cost provided by Woodard & Curran *1 page*

Elm Street Plan provided by Woodard & Curran *1 page*

Elm Street Overview Map provided by Town of Bridgton Community Development Department *1 page*

ArcGIS Web Map – Project Area Detail provided by Town of Bridgton Community Development Department *1 page*



WOODARD & CURRAN TERMS & CONDITIONS

WORK ORDER NUMBER 08

Issued Pursuant to the Engineering Services Agreement – Work Order Basis Between Woodard & Curran, Inc. and Town of Bridgton, dated as of 6/26/2019.

This Work Order is issued pursuant to, and in accordance with the Agreement, the terms and conditions of which are incorporated herein by this reference. Unless otherwise specified, all capitalized terms used in this Work Order shall have the same meaning as used in the Agreement. This Work Order will not be deemed valid and binding upon the Parties until both Engineer and Client have both signed below.

Project: Elm Street Sidewalk Improvements

Scope of Services:

Engineer agrees to provide the following Services to Client:

Task 1 – Final Design Services:

- A. Project Meetings: Woodard & Curran anticipates attending up to two project meetings during the design phase to review proposed improvements pavement rehabilitation and new sidewalk layout. Meetings with the Town will correspond with deliverable submissions outlined below.
- B. Design Drawings: Utilizing the existing topographic survey from the sanitary sewer collection project, Woodard & Curran will develop plan and profile drawings depicting the existing conditions and proposed 850 linear feet of sidewalk improvements along Elm Street, extending from Main Street to Bennett Street. The plans will be designed at a scale of 1" = 20' and will indicate the existing and proposed utilities, surface features, and right-of-ways based on the previously completed field survey. Woodard & Curran will also develop the necessary detail and cross-section sheets to depict the design intent as well as identify any construction or permanent easements needed to accommodate the proposed sidewalk improvements. All components of the sidewalk design will be designed based on the Town of Bridgton's design standards. Woodard & Curran will conduct site visits as necessary to review existing conditions and proposed improvements.
- C. Bidding Documents: Bidding documents will consist of the contract, project drawings and technical specifications. Woodard & Curran will prepare technical specifications for the project based upon the State of Maine Department of Transportation Standard Specifications, Revision of March 2020. Technical specifications will include supplemental specifications and special provisions. Woodard & Curran will incorporate front-end specifications identifying the public procurement process, bid requirements, contractor qualifications, bonding, requirements for Davis-Bacon wage rates and all other standard contract language for the proposed project, into the final bidding documents.
- D. Construction Cost Estimate: Woodard & Curran will prepare a construction cost estimate for the work upon completion of the preliminary (50%) and final (100%) design submittals.
- E. Deliverables: Woodard & Curran will provide to the Town design submittals at the preliminary (50%) design and final (100%) design. Woodard & Curran will accept comments, modify the design, and present a final bid package to the Town. Final bidding documents will be provided to the Town electronically (PDF format).



WOODARD & CURRAN TERMS & CONDITIONS

Clarification: Obtaining any rights of way or easements required for the construction of the project will be the responsibility of the Town.

Task 2 – Bidding Services

We understand the project will be publicly bid using the Town’s public procurement process. Woodard & Curran will advertise the project, act as the Plan Holder for the project, and provide Drawings and Specifications to contractors as requested. Woodard & Curran will also attend the pre-bid meeting, answer Technical RFIs submitted during the bid process and attend the bid opening.

Upon completion of the bid opening, Woodard & Curran will review the bids and tabulate bids, review the qualifications of the apparent low bidder, develop a letter summarizing this information, and prepare the Contract Documents for acceptance by the successful bidder. Advertising costs are not included as we understand those fees will be billed directly to the Town.

Task 3 – Construction Administration Services

Woodard & Curran will provide construction administration services for the proposed sidewalk improvements including the following:

- Prepare for, attend and conduct a pre-construction meeting with the Town and Contractor prior to the start of construction.
- Review Contactor’s submittals for compliance with project specifications; the submittal review process will consist of reviewing the initial submittal and up to one resubmittal.
- Review Contractor’s schedule of values and payment requisitions.
- Respond to Contractor’s RFIs.
- Conduct site visits to review construction progress and provide quality control activities. The following site visits are anticipated:
 - Two (2) progress visits during construction; and
 - One (1) punch-list site visit at the end of construction.

Start date: January 28, 2021

Completion date: November 18, 2022

Compensation:

For all Services duly rendered hereunder, Client will pay Engineer as described herein.

X **Lump Sum Fixed Fee Basis:** The services to be provided pursuant to this Work Order shall be provided on a not to exceed lump sum basis, billed monthly in a total amount of: \$ 32,000.

Designated Project Representatives

Client: Robert Peabody, Jr.

Engineer: Brent Bridges

Effective date: As of January 7, 2022



WOODARD & CURRAN TERMS & CONDITIONS

IN WITNESS WHEREOF, the undersigned have caused this Work Order to be duly executed by their authorized representatives set forth below.

Town of Bridgton

By _____

Title Town Manager

Woodard & Curran, Inc.

By _____

Title Senior Principal



**COMMITMENT & INTEGRITY
DRIVE RESULTS**

41 Hutchins Road T 800.462.4262
 Portland, Maine 04102 T 207.774.2112
 www.woodardcurran.com F 207.774.6635

Town of Bridgton, ME - Elm Street Sidewalk Project					
Opinion of Probable Project Cost					
January 7, 2022					
Pay Item	Description	Unit	Estimated Quantity	Unit Price*	Value
202.2021	Removing Pavement Surface	SY	370	\$5	\$1,850
304.15	Aggregate Base Course - Type A	CY	130	\$72	\$9,360
403.208	Hot Mix Asphalt, 12.5 mm Nominal Maximum Size	TON	30	\$126	\$3,780
608.08	Reinforced Concrete Sidewalk	SY	370	\$140	\$51,800
609.11	Vertical Curb Type I	LF	540	\$48	\$25,920
609.23	Terminal Curb Type I	LF	16	\$54	\$864
615.08	Loam & Seed & Mulch	SY	1	\$12	\$12
659.1	Mobilization	LS	1	\$11,300	\$11,300

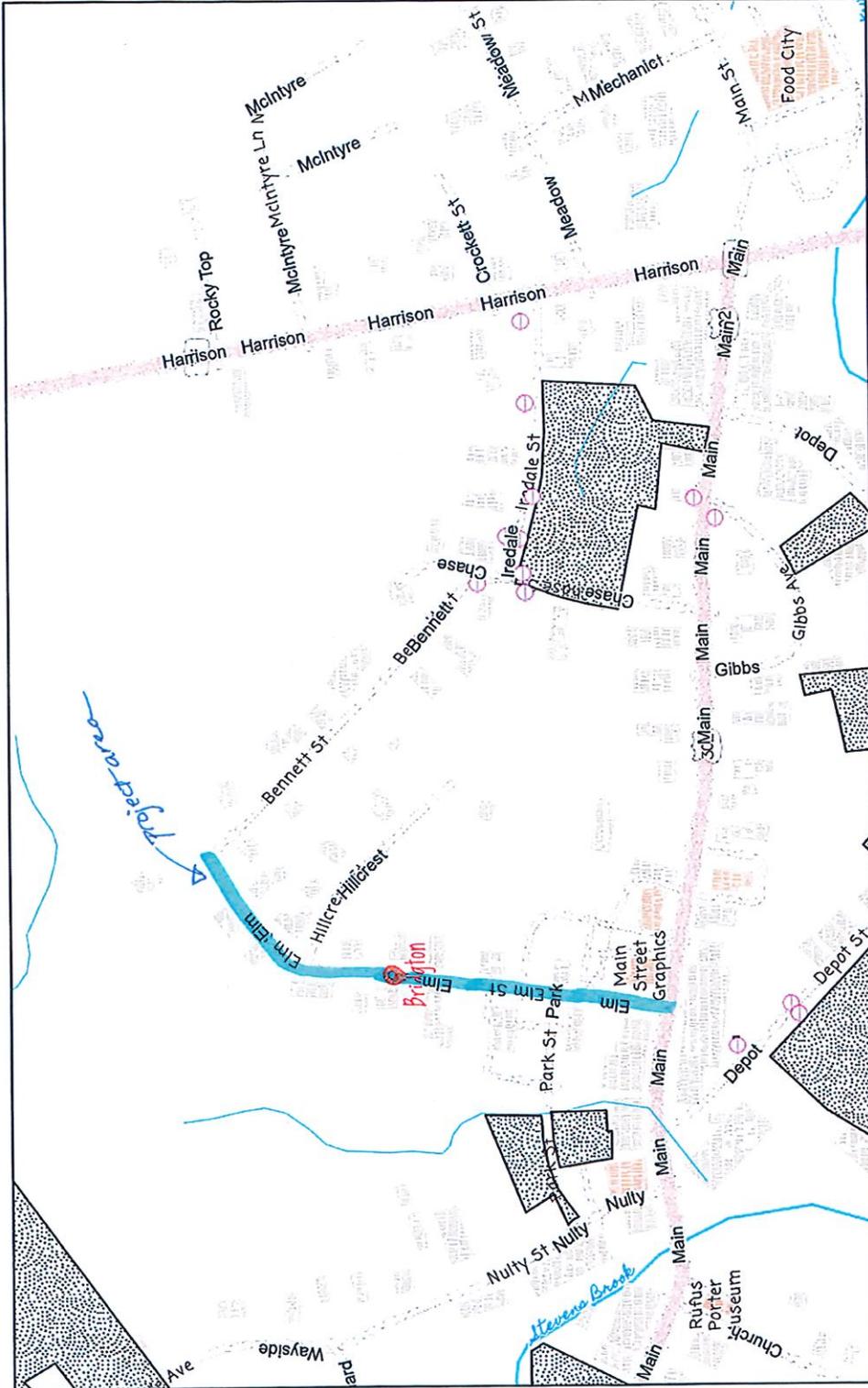
CONSTRUCTION SUBTOTAL: \$104,886

DESIGN, BIDDING & CONSTRUCTION ADMINISTRATION SERVICES: \$32,000

TOTAL \$136,886

*Pay Item Unit Prices include 20% contingency

Elm Street Overview



1/4/2022, 2:56:40 PM

1:4,514

0 0.03 0.06 0.11 mi

0 0.04 0.09 0.17 km

- Streams (Reference)
- Roads (Reference)
- Culvert Inlets
- Storm Culverts
- Municipal Property (Reference)

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