| • | 3 | 7707 0 |
|---|-----------------|--|
| | | > - - - - - - - - - |
| | | () () |
| 7 | \(\frac{7}{2}\) | • |

| | For | 9ອໍ່0-T | E | Exempt Orga | | | | Tax Retur | n | OMB No 1545-0047 |
|----------|-------------|---|-----------|--|--------------------------|---------------|---|------------------------|-----------|--|
| | | | i | | nd proxy tax u | | | 2009 | | 2040 |
| | | | For ca | lendar year 2019 or other tax y | | | | | <u>20</u> | 2019 |
| | | artment of the Treasury rnal Revenue Service | • | ► Go to www Do not enter SSN number | | | lons and the latest infor ade public if your organ | |). | Open to Public Inspection for 50 t(c)(3) Organizations Only |
| | A | Check box if address changed | | Name of organization (| Check box if nam | e change | d and see instructions.) | | (Em | oloyer identification number ployees' trust, see ructions) |
| | В | Exempt under section | Print | Spectrum Ge | nerations | | | | 1 0 | 1-0318051 |
| | | [] 501(c)(3 03 | or | Number, street, and roor | | box. see i | nstructions. | | | elated business activity code |
| | F | 408(e) 220(e) | Type | P.O Box 258 | | , | | | (See | instructions) |
| | Ē | 408A 530(a) | | City or town, state or pro | | or foreig | n postal code | | 1 | |
| | | 529(a) | | Augusta, ME | 04338-25 | 89 | | | 722 | 2320 |
| | C B | ook value of all assets t end of year | 05 | F Group exemption num G Check organization typ | | | 501(a) trust | 1 401/2 | \ | Other trust |
| | <u> </u> | | | tion's unrelated trades or | | orporation | | 401(a | | |
| | | | - | | | <u> </u> | | the only (or first) ur | | |
| | | | | ering Servi | | 5 | | , complete Parts I-V. | | |
| | | | | ce at the end of the previo | us sentence, complete | Parts I ar | id II, complete a Schedul | le M for each addition | nal trad | e or |
| | | usiness, then complete F | | | offiliated arous or a se | rant auba | diant postrollad aroun? | | Tv | es X No |
| k | | | | oration a subsidiary in an a fifying number of the parer | | 16111-2002 | idiary controlled group? | | | es (A) NO |
| 1 | | | | erard L. Qu | | | Teleph | ione number 🕨 2 | 07- | 620-1672 |
| _ | | | | le or Business Inc | | | (A) Income | (B) Expenses | | (C) Net |
| | | Gross receipts or sales | | 88,898. | | | | | | |
| | | Less returns and allow | | | c Balance | - 1c | 88,898. | i | / |] |
| | 2 | Cost of goods sold (So | | A. line 7) | , | 2 | 30,644. | | | |
| | 3 | Gross profit. Subtract I | | • | | 3 | 58,254. | | | 58,254. |
| | 4 a | Capital gain net income | | | | 4a | | | | <u> </u> |
| | | | • | art II, line 17) (attach Form | 4797) | 4b | | · * | | |
| | | Capital loss deduction | | | , | 4c | | i | | |
| | 5 | • | | hip or an S corporation (at | tach statement) | 5 | | l | | |
| | 6 | Rent income (Schedule | | p (| , | 6 | | | | |
| | 7 | Unrelated debt-finance | • | e (Schedule E) | | 7 | | | | |
| | 8 | | | nd rents from a controlled | organization (Schedule F | 8 | | | | |
| | 9 | | | 1 501(c)(7), (9), or (17) or | • | | | | | |
| | 10 | Exploited exempt activi | | | ` <i>'</i> | 10 | | | | |
| | 11 | Advertising income (Sc | • | | | 11 | | | | |
| | 12 | Other income (See insti | | • | | 12 | | | | |
| | 13 | Total. Combine lines 3 | | | | 13 | 58,254. | | | 58,254. |
| | Pa | | | t Taken Elsewher | | | | | | |
| | | <u> </u> | | e directly connected wi | | siness in | come) | | | |
| | 14 | Compensation of office | ers, dire | ectors, and trustees (Sche | dule K) | | | | 14 | |
| | 15 | Salaries and wages | | | | | | | 15 | 33,026. |
| 7 | 16 | Repairs and maintenar | nce | | | | | | 16 | |
| 7707 | 17 | Bad debts | | | | _ | | | 17 | |
| | 18 | Interest (attach schedu | ule) (see | ustructions) | OFN/ED | 1 | | | 18 | |
| 9 | 19 | Taxes and licenses | _/ | RE | CEIVED | 250-SI | | | 19 | 2,221. |
| > | 20 | Depreciation (attach Fo | orm 456 | 52) | | XI | 20 | | | |
| MA | 21 | Less depreciation clair | nfed on | Schedule Admielsewhere | Sonreturn 2021 | \mathcal{I} | 21a | | 21b | |
| ≥ | 22 | Dehlerion | | 10.41 | , • • • • • | 2 | | ļ | 22 | |
| נ | 23 | Contributions to deferr | | pensation plans | 701 11T | '= | | ļ | 23 | |
| U | 24 | Employee benefit prog | | 1 00 | DEN, UT | | | ļ | 24 | · |
| = | 25 | Excess exempt expens | | ledule I) | | | | ļ | 25 | |
| • | 26 | Excess readership cos | | | | | <u> </u> | | 26 | |
| , | 27 | Other deductions (attack | | • | | | See State | ement 1 | 27 | 2,865. |
| | 28 | Total deductions. Add | | | | | | į | 28 | 38,112. |
| | 29 | , | | ome before net operating | | | | Į. | 29 | 20,142. |
| | 30 | 7 | ating los | ss arısıng ın tax years beg | inning on or after Janu | ary 1, 20 | 18 | | ĺ | _ |
| | | (see instructions) | | | | | | ļ | 30 | 0. |
| | <u>31 /</u> | | | ome. Subtract line 30 fror | | | | | 31 | 20,142. |
| | 92370 | 1 01-27-20 LHA For l | Paperw | ork Reduction Act Notice, | , see instructions. | | | | | Form 990-T (2019) |



C

| Schedule A - Cost of Good | ls Sold. Enter | method of invent | ory valuation N/ | A | | | · · · · · · |
|--|----------------------------|--|---|--------------|--|----------|--|
| 1 Inventory at beginning of year | 1 | 0. | 6 Inventory at end of ye | ar | ····· | 6 | 0. |
| 2 Purchases | 2 | 30,644. | 7 Cost of goods sold. S | | line 6 | | |
| 3 Cost of labor | 3 | · · · · · · · · · · · · · · · · · · · | from line 5. Enter her | | | i | |
| 4a Additional section 263A costs | | | line 2 | | · ···································· | 7 | 30,644. |
| (attach schedule) | 4a | | 8 Do the rules of section | n 263A (| with respect to | | Yes No |
| b Other costs (attach schedule) | 4b | | property produced or | | | | |
| 5 Total. Add lines 1 through 4b | 5 | 30,644. | the organization? | • | , , | | X |
| Schedule C - Rent Income (see instructions) | (From Real | Property and | Personal Property | Leas | ed With Real Pro | pert | у) |
| 1. Description of property | | | | | | | == |
| (1) | | | | | - | | |
| (2) | | | | | | | |
| (3) | | | | | · - ·· | | |
| (4) | | | | | | _ | <u> </u> |
| | 2. Rent receiv | ed or accrued | | | T | | |
| (a) From personal property (if the personal property is more 10% but not more than 50% | e than | ` 'of rent for pe | d personal property (if the percen rsonal property exceeds 50% or is based on profit or income) | tage if | 3(a) Deductions directly columns 2(a) a | | ted with the income in attach schedule) |
| (1) | | | | | <u> </u> | | |
| (2) | | | | | | | |
| (3) | | | | | | | |
| (4) | | | | | | | |
| Total | 0. | Total | | 0. | | | ··········· |
| (c) Total income. Add totals of columns here and on page 1, Part I, line 6, column | 2(a) and 2(b). En n (A) | ter - | | 0. | (b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) | • | 0. |
| Schedule E - Unrelated De | bt-Financed | I Income (see ii | nstructions) | | | | |
| | | | 2. Gross income from | | 3. Deductions directly con to debt-finance | | |
| 1. Description of debt-fi | inanced property | | or allocable to debt- financed property | (a) | Straight line depreciation (attach schedule) | | (b) Other deductions (attach schedule) |
| (1) | | | | | | + | - |
| (2) | | | | | | | |
| (3) | | | | 1 | | | |
| (4) | | – | - | | . <u></u> | | |
| Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | of or a debt-fina | adjusted basis illocable to nced property i schedule) | 6. Column 4 divided by column 5 | | 7. Gross income reportable (column 2 x column 6) | (0 | 8. Allocable deductions column 6 x total of columns 3(a) and 3(b)) |
| (1) | | | % | | ··· -·· | 1 | |
| (2) | | | % | 1 | | 1 | |
| (3) | | | % | 1 | | 1 | |
| (4) | | | % | | | 1 | |
| | | | | | nter here and on page 1, Part I, line 7, column (A) | | inter here and on page 1, Part I, line 7, column (B) |
| Totals | | | • | | 0 | | 0. |
| Total dividends-received deductions in | ncluded in columi | 18 | • | | <u> </u> | 1 | 0. |

| | | | Exempt | Controlled O | rganizatio | ons | | | | |
|--|--|------------------------------|--|--|---|--|--|------------------------------|---|---|
| 1. Name of controlled organiza | j idi | Employer entification number | 3. Net unrelated income (loss) (see instructions) | | 4. Total of specified payments made | | 5 Part of column 4 that is included in the controlling organization's gross income | | Deductions directly connected with income in column 5 | |
| 1) | | | | | | | | | | |
| 2) | | | | | | | | | | |
| (3) | | | | | | | | - | | |
| (4) | | | | | | | | • • | | |
| Ionexempt Controlled Organ | izations | | | | | | | | | |
| 7. Taxable Income | 8. Net unrelated a (see instruc | | 9. Total | of specified payi made | ments | 10. Part of colum in the controllingross | nn 9 that ng organ income | is included ization's | | eductions directly connected h income in column 10 |
| (1) | | | <u> </u> | | | | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | | |
| | | | -1 | | | Add colum Enter here and line 8, c | | 1, Part I, | | dd columns 6 and 11 here and on page 1, Part I, line 8, column (B) |
| otals | | | | | ▶ | | | 0. | | 0 |
| Schedule G - Investme | | a Sectio | n 501(c)(| 7), (9), or | (17) Or | ganization | ı | | | |
| (see inst | · | | | 1_ | | 3. Deduction | | 4 Set- | nudaa | 5. Total deductions |
| 1. Desc | ription of income | | | 2. Amount of | income | directly connect (attach sched) | | (attach s | | and set-asides (col 3 plus col 4) |
| (1) | | | | · | | | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | <u> </u> | | | | | . = =:- |
| (4) | | | | | $\overline{}$ | | | | | |
| (*) | | | | Enter here and | on page 1. | | | | | Enter here and on page 1 |
| | | | | Part I, line 9, co | | | | | | Part I, line 9, column (B) |
| -t-l- | | | _ | ĺ | 0. | | | | | 0. |
| ^{otals} Schedule I - Exploited | Exempt Activ | ity Incon | ne, Othe | l r Than Ad | | ng Income | : | | | _1 |
| (see instru | uctions) | | | r . | | | | | | |
| 1. Description of exploited activity | 2. Gross unrelated business income from trade or business | directly with p of ui | xpenses connected roduction nrelated ss income | 4. Net incom from unrelated business (co minus columi gain, compute through | trade or lumn 2 1 3) If a cols 5 | 5. Gross incor from activity the is not unrelate business incor | nat ad | 6. Exp attributa colun | ble to | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4) |
| (1) | | | | | | | $\neg \uparrow$ | | | 1 |
| (2) | | + | | | | | | | | |
| 3) | | | | | - | | $\neg \neg$ | | | |
| (4) | | | | | | | - | | | |
| | Enter here and on page 1, Part I, line 10, col (A) | page line 10 | ere and on 1, Part I,), col (B) | | , 1 | | | | | Enter here and on page 1, Part II, line 25 |
| _{otals} ► Schedule J - Advertisi | na Income /s/ | | 0. | l | | | | | |] 0. |
| | | | | colidated | Pacie | | | | | |
| Part I Income From | renouicais n | eporteu (| on a Con | Solidated | Dasis | | | | | |
| 1. Name of periodical | 2. Gros advertisi income | ng ad | 3. Direct vertising costs | 4. Adverti or (loss) (co col 3) If a ga cols 5 th | I 2 minus in, compute | 5. Circulati income | on | 6. Reade | | 7. Excess readership costs (column 6 minus column 5, but not more than column 4) |
| (1) | | | | <u> </u> | | <u> </u> | | | | |
| 2) | | | | | | | | | | |
| 3) | | | | | | | | | | |
| | - | | | ⊣ | | | | | | |
| 1) | | | | | | 1 | • | | | |
| 4) | | | | | | | | | | |

Totals, Part II (lines 1-5)

0.

| | | a line-by-line basis | • | | or portodiour note | a in the case in, in the | S. |
|---------------------|---------|-----------------------------------|-----------------------------|---|-----------------------|--------------------------|---|
| 1. Name of periodic | cal | 2. Gross advertising income | 3. Direct advertising costs | 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7 | 5. Circulation income | 6. Readership costs | 7 - Excess readership costs (column 6 minus column 5, but not more than column 4) |
| (1) | | | | | | | |
| (2) | | | | | | | |
| (3) | | | | | | | |
| (4) | | | | | | | |
| Totals from Part I | | 0. | 0. | | | | 0. |

0 Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

page 1, Part I, line 11, col (B)

Enter here and on page 1, Part I, line 11, col (A)

| 1. Name | - 2. Title | 3. Percent of time devoted to business | Compensation attributable to unrelated business |
|---|------------|--|---|
| (1) | | % | |
| (2) | | % | |
| (3) | | % | |
| (4) | | % | |
| Total. Enter here and on page 1, Part II, line 14 | 0. | | |

Form **990-T** (2019)

Enter here and on page 1, Part II, line 26

| Form 990- | T | Other Deducti | ons | Statement 1 |
|----------------------------------|-------------------------------|-------------------------------|---------------------------------------|------------------------|
| Descripti | on | | | Amount |
| Utilities Office Exp | | | | 2,251. 614. |
| Total to | Form 990-T, Page 1, | line 27 | | 2,865. |
| Form 990- | r Net | Operating Loss D | eduction | Statement 2 |
| Tax Year | Loss Sustained | Loss Previously Applied | Loss Remaining | Available This Year |
| 09/30/05 09/30/06 09/30/12 | 41,074. 44,123. 31,292. | 41,074. 44,123. 31,292. | 0. 0. 0. | 0. 0. 0. |
| 09/30/13 | 25,989. 368,867. | 25,989. 166,285. | 0. 202,582. | 0. 202,582. |
| 09/30/18 | 300,007. | | · · · · · · · · · · · · · · · · · · · | |