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# Form **990**

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

2009
Open to Public Inspection

	<u> </u>	or the	2009 calendar year, or tax year beginning and endin	<u>g</u>		
	Вс	heck if	Please C Name of organization	D Employer ide	entificati	ion number
	ap	plicable	Tuse institute MECHANICAL CONTRACTING			
		Addres	ss   label or   FOUNDATION, INC.			
		]Name ]chang	type 5 5 MILE MEGUANGTAL COMMERCENTING	FOU 52	2-164	6891
		]Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Room/			
		Termin	1 Specific I			869-5800
		Ameno		G Gruss receipto \$	0270	3,996,773.
		Applic		H(a) Is this a gro	up retur	
		pendir	F Name and address of principal officer DENNIS LANGLEY	for affiliates	•	Yes X No
			SAME AS C ABOVE	H(b) Are all affiliat		
	T T	ax-exe	empt status X 501(c) (3 ) ◀ (insert no ) 4947(a)(1) or 527			(see instructions)
			e: ► WWW.MCERF.ORG	H(c) Group exer		
				Year of formation: 198		
		_	Summary		· <b>&gt;</b>   101	ato or logar commune. 222
1	$\Box$		Briefly describe the organization's mission or most significant activities SEE PAR'	r III, LINE	1.	·
	Governance		briefly describe the digarization of modern of modern destricted bill 11111.	I III, DIND		
	ı.	2	Check this box   If the organization discontinued its operations or disposed of	more than 25% of its r	net asset	<u> </u>
	Ş		Number of voting members of the governing body (Part VI, line 1a)	111070 (11411 2070 01 1131	3	10
	ဖ <del>ွ</del>		Number of independent voting members of the governing body (Part VI, line 1b)		4	10
9	8		Total number of employees (Part V, line 2a)		5	0
2010	Activities &		Total number of volunteers (estimate if necessary)		6	10
<b>₩</b>	Ę		Total gross unrelated business revenue from Part VIII, column (C), line 12		7a	0.
<b>8</b>	Ř		Net unrelated business taxable income from Form 990-T, line 34		7b	0.
			Total and the state of the stat	Prior Year	175	Current Year
DEC		8	Contributions and grants (Part VIII, line 1h)	324,17	19.	196,931.
	Revenue		Program service revenue (Part VIII. line 2g)	8,80		6,985.
SCANNED	e e		Investment income (Part VIII, column (A), In	-3,713,69		-956,119 <b>.</b>
Z	ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,713,03	<b>-</b> -	330,113.
Z			Total revenue - add lines 8 through 11 (must equal Part VIII, column A), line 12)	-3,380,71	6.	-752,203.
Š			Grants and similar amounts paid (Part IX, dolumn (A) Sines 13,	249,50		75,000.
Ø			Benefits paid to or for members (Part IX, column (A), line 4)	225733		,3,000
	s		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			7,500.
	Se		Professional fundraising fees (Part IX, column (A), line 11e)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Expenses		Total fundraising expenses (Part IX, column (D), line 25)			
	ŭ		Other expenses (Part IX, column (A), lines 11a-11d, 11f 24f)	438,07	/1 .	372,921.
			Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	687,57		455,421.
			Revenue less expenses Subtract line 18 from line 12	-4,068,28		-1,207,624.
	58			Beginning of Current Y		End of Year
	lauc	20	Total assets (Part X, line 16)	7,972,14		8,800,611.
	Ass		Total liabilities (Part X, line 26)	32,86		8,467.
	Net Assets or Fund Balances		Net assets or fund balances Subtract line 21 from line 20	7,939,28		8,792,144.
	Pa	rt II	Signature Block		<u> </u>	0713272220
,			Under penalties of payory, I declare that I have examined his return, including accompanying schedules and staten and complete Deplaration of preparer later than officer's based on all information of which preparer has any know	nents, and to the best of my kn	owledge ar	nd belief it is true, correct,
			and complete Utmaration of preparer (tiner than officer's based on all information of which preparer has any know	rleage	/	/
	Sıgr	ı	Allows andlen	111	15/	2010
	Here		Signature of officer	Date /	7	
			DENNIS LANGLEY, EXECUTIVE DIRECTOR		•	
			Type or print name and title			
			Preparer's Date Date		reparer's	dentifying number
	Paid		signature David 1. Briling (PH) 11-12-10	self- employed ►	see instruc	mona)
		arer's	Firm's name (or GELMAN, ROSENBERG & FREEDMAN	EIN ►		
	Use	July	self-employed), 4550 MONTGOMERY AVE. SUITE 650 NOI			
			BETHESDA, MARYLAND 20814-2930		<b>►</b> (30	1) 951-9090
	May	the IE	25 discuss this return with the preparer shown above? (see instructions)	1,		V Vac Na

Form	990 (2009) FOUNDATION, INC.	52-1646891 Page <b>2</b>
	irt III   Statement of Program Service Accomplishments	52-1646891 Page <b>2</b>
1	Briefly describe the organization's mission SEE SCHEDULE O FOR CONTINUATIO	
	THE MECHANICAL CONTRACTING EDUCATION AND RESEARCH FOU	NDATION (MCERF)
	ARTICULATES AND FUNDS THE MECHANICAL CONTRACTING INDU	STRIES MOST
	CRITICAL HUMAN RESOURCE AND RESEARCH NEEDS. MCERF CUL	TIVATES AND
	SUPPORT ACTIVITIES THAT ALLOW PROFESSIONALS IN THE ME	
2		CIMITOTI
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 service	ces? Yes X No
	If "Yes," describe these changes on Schedule O	
4	Describe the exempt purpose achievements for each of the organization's three largest program services b	v expenses
-	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amour	
	allocations to others, the total expenses, and revenue, if any, for each program service reported	it of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a		• • • • • • • • • • • • • • • • • • • •
	FUNDING EDUCATIONAL EXCELLENCE FUNDS DEDICATED DIR	ECT TOWARD THE
	DEVELOPMENT AND ENHANCEMENT OF MECHANICAL CONTRACTING	STUDENT CHAPTERS
	AND FACULTY AWARENESS OF INDUSTRY ISSUES.	
	THE PROPERTY OF THE PROPERTY AND COMPANY	
	140 000	\(\(\text{D}\) \(\text{C}\) \(\text{O}\) \(\text{C}\) \(\text{O}\)
4b	(Code ) (Expenses \$ 140,909. including grants of \$	) (Revenue \$ 6,985.)
	INDUSTRY RESEACH - THE PRODUCTION OF EDUCATIONAL MATE	
	PUBLICATIONS TO FOSTER THE TECHNOLOGICAL ADVANCEMENT	
		AND DISSEMINATION
	PUBLICATIONS TO FOSTER THE TECHNOLOGICAL ADVANCEMENT OF INFORMATION IN THE MECHANICAL CONTRACTING INDUSTRY	AND DISSEMINATION , SUCH AS THE
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Form 990 (2009) FOUNDATION, INC.

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	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	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	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		_X_
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N/	<u>A</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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	6		_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	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u>X</u>
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide	İ		
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9_		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	X	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI			
•	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			
•	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			
•	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			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's separate of consolidated financial statements for the tax year include a roomote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12	Schedule D, Parts XI, XII, and XIII	12	х	
12Δ	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No			<u> </u>
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			1
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	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	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			ļ
	complete Schedule G, Part III	19	ļ	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	000	<u> </u>
		Form	9907	20091

52-1646891 Form 990 (2009) FOUNDATION, INC. Page 4 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the Х United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 29 If "Yes," complete Schedule I, Parts I and III 22 Х 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? If "Yes," complete Х Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X Schedule K If "No", go to line 25 24a 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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a Х disqualified person during the year? If "Yes." complete Schedule L. Part I 25a 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? If "Yes," complete X 25b Schedule L, Part I 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified Х person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Х Schedule L, Part III 27 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, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х contributions? If "Yes," complete Schedule M 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? Х If "Yes," complete Schedule N, Part I 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х Schedule N, Part II 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301 7701 2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity?

38 X Form **990** (2009)

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X

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If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1

Note. All Form 990 filers are required to complete Schedule O

If "Yes," complete Schedule R, Part V, line 2

If "Yes," complete Schedule R, Part V, line 2

35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?

36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

52-1646891

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T al	Statements negaring Other mornings and rax Compilance					
		i I			Yes	No_
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			,		
	U.S. Information Returns. Enter -0- if not applicable	1a	<del></del>	H		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		<u> </u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	геропар	ie gaming		3.7	
	(gambling) winnings to prize winners?	1 1		1c	Х	<del> </del>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		•			
	filed for the calendar year ending with or within the year covered by this return	2a	<u></u>	<u> </u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	<u> </u>	<del> </del>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see				}	.,,
	Did the organization have unrelated business gross income of \$1,000 or more during the year cover	ed by th	is return?	3a	<u> </u>	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	.,		3b	-	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		=			v
	financial account in a foreign country (such as a bank account, securities account, or other financial	accoun	1)12	4a	<del> </del>	X
b	If "Yes," enter the name of the foreign country		<del>.</del>	1		
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank ar	nd			
_	Financial Accounts			_		•
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	<del> </del>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans		No a la da da da d	5b	-	
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Reg	arding P	ronibited			
٥.	Tax Shelter Transaction?			5c		
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	ne orga	nization solicit			x
	any contributions that were not tax deductible?	itions or	aufte	6a		
D	If "Yes," did the organization include with every solicitation an express statement that such contribution were not tax deductible?	ILIONS OF	giits	6b		
7	Organizations that may receive deductible contributions under section 170(c).			OD		<del>                                     </del>
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	anode :	and services			
а	provided to the payor?	goods	and services	7a		x
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	<del>                                     </del>	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas regu	ured	75	1	<b> </b>
·	to file Form 8282?	vas roqu		7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		,,,	1	<del></del>
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a		ıl	7		
·	benefit contract?	<b>p</b> 0.00.10	•	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con-	tract?		7f		X
g g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required			7g		1
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-		uired?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting o					
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exi					
	at any time during the year?		N/A	8		<u>L</u>
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?		N/A	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		N/A	9b		
10	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		_		
11	Section 501(c)(12) organizations. Enter			-		
а	Gross income from members or shareholders N/A	11a		_		}
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them)	11b		_		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	n 1041?		12a		<u> </u>
<u> </u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			<u></u>	
				Forn	n <b>990</b>	(2009)

Form 990 (2009)

FOUNDATION, INC.

52-1646891 F

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

Sec	tion A. Governing Body and Management	_				
		1	Ì		Yes	No
1a	Enter the number of voting members of the governing body	1a		10		ļ
b	Enter the number of voting members that are independent	1b	<u> </u>	10		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			
	officer, director, trustee, or key employee?			2	ļ	<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the	ne direc	t supervision			
	of officers, directors or trustees, or key employees to a management company or other person?			3	X	ļ
4	Did the organization make any significant changes to its organizational documents since the prior Fo		0 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	ts?		5		<u> X</u>
6	Does the organization have members or stockholders?			6		<u>X</u> _
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	embers	of the			
	governing body?			7a	-	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	rsons?		7b	<b>-</b>	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during	the year			]
	by the following					
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	ļ
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached a	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9_		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	Revenu	e Code )			
				Γ	Yes	No
	Does the organization have local chapters, branches, or affiliates?			10a	-	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chapte	ers, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?			10b	+	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before for	iling th	e form?	11	ļ	_X_
11A						
12a				12a	<u> </u>	}
Ъ	Are officers, directors or trustees, and key employees required to disclose annually interests that couto conflicts?	uld gıv	e rise	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,"	describe			
	in Schedule O how this is done			120	X	
13	Does the organization have a written whistleblower policy?			13	Х	
14	Does the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approve	al by ir	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-	•			
а	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			
	taxable entity during the year?			16a	1	Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	aluate i	ts participation	n [		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	janizati	on's			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶MD					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-7	T (501(	c)(3)s only) ava	allable for		
	public inspection. Indicate how you make these available. Check all that apply					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflict	of interest po	licy, and fir	ancial	
	statements available to the public					
20	State the name, physical address, and telephone number of the person who possesses the books a	and rec	ords of the or	ganization	<b></b>	
	DONALD MAY - (301)869-5800					
	1385 PICCARD DRIVE, ROCKVILLE, MD 20850					
				r.	~ മമവ	(0000)

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- 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. 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

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

Name and Title  Average hours per week  Average hours	Check this box if the organization did no	ot compensate an (B)	y cu	irren			, dire	ecto	r, or trustee (D)	(E)	(F)	
hours   check all that apply   ref   week   per   per   week   per		1 '			•	•			1 ' '			
Per   Week   Per   Per   Week   Per   Pe	Name and the		(cl						'		amount of	
DOTECTION   DOTE				1			T	1,,,	1 '			
DOT		week	direct				_			organizations	compensation	
DOT			90	Stee			Isate			(W-2/1099-MISC)		
DOT			Trust	nal tru		ge	ed wo		(W-2/1099-MISC)			
JOHN B. WILHELMI   3.00 x x x   0.			wdua	ig g	193	Ē	hesto	핕			organizations	
PRESIDENT   3.00   X   X   0.   0.			Ē	IIIS	≣	Ke	로등	ই	. =			
ROBERT T. ARMISTEAD		2 00										
VICE PRESIDENT       2.00 X       X       0.       0.         SCOTT L. BERGER       2.00 X       X       0.       0.         SECRETARY/TREASURER       2.00 X       X       0.       0.         TIMOTHY J. BRINK       1.00 X       0.       0.         A. MICHAEL BUDAY       1.00 X       0.       0.         DON GIARRATANO       1.00 X       0.       0.         TRUSTEE       1.00 X       0.       0.         TRUSTEE       1.00 X       0.       0.         GARY MOORE       0.       0.       0.         TRUSTEE       1.00 X       0.       0.         JOSEPH WALICKI       1.00 X       0.       0.         MIKE FEUTZ       0.       0.       0.         TRUSTEE       3.00 X       7,500.       0.         DENNIS LANGLEY       0.       0.       0.		3.00	X	<u> </u>	X	<u> </u>	╙	_	0.	0.	0.	
SCOTT L. BERGER   SECRETARY/TREASURER   2.00   X   X   0.			l	Ì	l			1				
SECRETARY/TREASURER   2.00   X   X   0.   0.		2.00	X	L	X		<u> </u>	_	0.	0.	0.	
TIMOTHY J. BRINK TRUSTEE 1.00 X 0. 0.  A. MICHAEL BUDAY TRUSTEE 1.00 X 0. 0.  DON GIARRATANO TRUSTEE 1.00 X 0. 0.  ANDREW S. KRUSE TRUSTEE 1.00 X 0. 0.  GARY MOORE TRUSTEE 1.00 X 0. 0.  JOSEPH WALICKI TRUSTEE 1.00 X 0. 0.  MIKE FEUTZ TRUSTEE 3.00 X 7,500. 0.  DENNIS LANGLEY		2 00	Į.,		<b> </b> ₩				_	ا م	0.	
TRUSTEE 1.00 X 0. 0.  A. MICHAEL BUDAY TRUSTEE 1.00 X 0. 0.  DON GIARRATANO TRUSTEE 1.00 X 0. 0.  ANDREW S. KRUSE TRUSTEE 1.00 X 0. 0.  GARY MOORE TRUSTEE 1.00 X 0. 0.  JOSEPH WALICKI TRUSTEE 1.00 X 0. 0.  MIKE FEUTZ TRUSTEE 3.00 X 7,500. 0.  DENNIS LANGLEY		2.00	^	┢	┢	┢	⊢	┢	· ·	0.	٠.	
A. MICHAEL BUDAY   TRUSTEE   1.00 X   0.   0.		1.00	x						0.	i o.	0.	
TRUSTEE 1.00 X 0. 0.  DON GIARRATANO TRUSTEE 1.00 X 0. 0.  ANDREW S. KRUSE TRUSTEE 1.00 X 0. 0.  GARY MOORE TRUSTEE 1.00 X 0. 0.  JOSEPH WALICKI TRUSTEE 1.00 X 0. 0.  MIKE FEUTZ TRUSTEE 3.00 X 7,500. 0.  DENNIS LANGLEY				T			T	┢				
TRUSTEE 1.00 X 0. 0.  ANDREW S. KRUSE TRUSTEE 1.00 X 0. 0.  GARY MOORE TRUSTEE 1.00 X 0. 0.  JOSEPH WALICKI TRUSTEE 1.00 X 0. 0.  MIKE FEUTZ TRUSTEE 3.00 X 7,500. 0.  DENNIS LANGLEY		1.00	x						0.	0.	0.	
ANDREW S. KRUSE  TRUSTEE 1.00 X 0. 0.  GARY MOORE  TRUSTEE 1.00 X 0. 0.  JOSEPH WALICKI  TRUSTEE 1.00 X 0. 0.  MIKE FEUTZ  TRUSTEE 3.00 X 7,500. 0.  DENNIS LANGLEY							П					
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GARY MOORE         1.00 X         0.         0.           TRUSTEE         1.00 X         0.         0.           TRUSTEE         1.00 X         0.         0.           MIKE FEUTZ         3.00 X         7,500.         0.           DENNIS LANGLEY         0.         0.         0.			l				l	ł				
TRUSTEE 1.00 X 0. 0.  JOSEPH WALICKI TRUSTEE 1.00 X 0. 0.  MIKE FEUTZ TRUSTEE 3.00 X 7,500. 0.  DENNIS LANGLEY		1.00	X	ļ		L.	<u> </u>	L.	0.	0.	0.	
TRUSTEE 1.00 X 0. 0.  MIKE FEUTZ TRUSTEE 3.00 X 7,500. 0.  DENNIS LANGLEY		1 00	J							١ ,	م ا	
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MIKE FEUTZ TRUSTEE 3.00 X 7,500. 0. DENNIS LANGLEY		1 00	l.							1	0.	
TRUSTEE 3.00 X 7,500. 0. DENNIS LANGLEY		1.00	₽	⊢	-	├	┼	├—	ļ	0.	· ·	
DENNIS LANGLEY		3.00	l x	1	1	1			7 500.	l o.	0.	
		1 3.00			$\vdash$	$\vdash$	+	┢	7,3000	<del>                                     </del>	<del> </del> -	
		23.00			$ _{\mathbf{x}}$				0.	0.	0.	
					<u> </u>	T	†	┢				
		-	┢	┢	╁╴	╁╌	╁	╁	<del> </del>			
			L	L		L					<u> </u>	
						T	t					
			╀	+	$\vdash$	$\vdash$	╀	$\vdash$				

Form 990 (2009)

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(A) Name and title	(B) Average			(C Posi		1		(D) Reportable	<b>(E)</b> Reportable		(F) Estimat	ed
	hours	(cl				app	ly)	compensation	compensation		amount	of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC		other compens from the organiza and rela organizat	ation ie tion ted
		_										
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		-			<b>.</b>					$\downarrow$		
			ļ							$\dashv$		
			ļ <u>-</u>			_				+	<del></del> .	
1b Total		·						7,500.		0.		0 .
Total number of individuals (including but compensation from the organization	t not limited to th	nose	liste	ed at	bov	e) wł	no re				-	(
3 Did the organization list any former office	er, director or tru	ıstee	e, ke	y em	nplo	yee,	or h	nighest compensated er	nployee on	Γ	Yes	No
line 1a? If "Yes," complete Schedule J for 4 For any individual listed on line 1a, is the			omp	ensa	atior	n and	d otl	her compensation from	the organization	-	3	Х
<ul><li>and related organizations greater than \$1</li><li>Did any person listed on line 1a receive of</li></ul>									ices rendered to		4	Х
the organization? If "Yes," complete School Section B. Independent Contractors	edule J for such	pers	son								5	X
Complete this table for your five highest the organization NONE	compensated in	depe	ende	ent c	ont	racto	ors t	hat received more than	\$100,000 of comp	ensat	tion from	
(A) Name and busine	ss address							(B) Description of s	ervices	Со	(C) mpensatio	on
		_										
2 Total number of independent contractors \$100,000 in compensation from the orga		not li	mıte	d to		se li:	stec	d above) who received in	nore than			
										F	orm 990	เวกกร

### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b, 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 governments and organizations in the U.S. See Part IV, line 21	75,000.	75,000.		·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	7,500.	7,500.		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)			· · · · · · · · · · · · · · · · · · ·	
9	Other employee benefits				
0	Payroll taxes				
1	Fees for services (non-employees)	7F 000	EE 222	45 000	
а	Management	75,000.	57,991.	17,009.	·- ······
b	Legal	200.		200.	
С	Accounting	13,326.		13,326.	
d	Lobbying				<del></del>
е	Professional fundraising services. See Part IV, line 17	F0 106		50 106	
f	Investment management fees	79,196.		79,196.	
9					
2	Advertising and promotion	0.500		2 500	
3	Office expenses	9,539.		9,539.	
4	Information technology	2,362.		2,362.	
5	Royalties				
6 -	Occupancy	27 102		07 102	
7	Travel	27,193.		27,193.	
8	Payments of travel or entertainment expenses				
_	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization				<del></del>
3 4	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	EDUCATIONAL EXCELLENCE	89,987.	89,987.		
b	WATER EFFICIENCY	55,318.	55,318.		······································
С	GUIDELINES FOR QUALITY	11,407.	11,407.		
d	EUROPEAN GREEN TECH	8,393.	8,393.		
е	MISCELLANEOUS	700.		700.	
f	All other expenses	300.	300.	, , , ,	
5	Total functional expenses Add lines 1 through 24f	455,421.	305,896.	149,525.	
6	Joint costs Check here ▶ ☐ if following	,			
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

932010 02-04-10

Pa	rt X	Balance Sheet				
				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash · non-interest-bearing			1	
	2	Savings and temporary cash investments		59,237.	2	392,843.
	3	Pledges and grants receivable, net	347,035.	_3	307,732.	
	4	Accounts receivable, net	3,200.	4	9,830.	
	5	Receivables from current and former officers, di				
		employees, and highest compensated employee				
		of Schedule L		5		
	6	Receivables from other disqualified persons (as	1			
		4958(f)(1)) and persons described in section 495				
		Part II of Schedule L		6		
ts	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
ĕ	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a			
	Ь	Less accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities		7,539,993.	11	8,066,884.
	12	Investments other securities See Part IV, line		12		
	13	Investments - program-related See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11	22,683.	15	23,322.	
	16	Total assets. Add lines 1 through 15 (must equ	7,972,148.	16	8,800,611.	
	17	Accounts payable and accrued expenses	32,868.	17	8,467.	
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax exempt bond liabilities			20	<del> </del>
w	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, director			-	
ig		highest compensated employees, and disqualif				
ڐ		of Schedule L	oo persone complete i ali ii		22	
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate			24	
	25	Other liabilities Complete Part X of Schedule D	pa		25	
	26	Total liabilities. Add lines 17 through 25		32,868.	26	8,467.
	<u> </u>	Organizations that follow SFAS 117, check h	ere X and complete			<u> </u>
ώ	1	lines 27 through 29, and lines 33 and 34.	and complete			
ဦ	27	Unrestricted net assets		2,796,216.	27	3,674,244.
alaı	28	Temporarily restricted net assets		297,838.		270,260.
ã	29	Permanently restricted net assets		4,845,226.		4,847,640.
Š		Organizations that do not follow SFAS 117, c	heck here			
ř		complete lines 30 through 34.				
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30		
sse	31	Paid-in or capital surplus, or land, building, or ed			31	
tΑ	32	Retained earnings, endowment, accumulated in			32	
Š	33	Total net assets or fund balances	icome, or other funds	7,939,280.		8,792,144.
	34	Total liabilities and net assets/fund balances		7,972,148.		8,800,611.
	1 34	rotal liabilities and het assets/juno balances		1,314,140.	34	0,000,011.

Form **990** (2009)

Form	990 (2009) FOUNDATION, INC. 52-164	<u> </u>	Pa:	ge 12
Pa	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			-
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O	l		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a_		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c_	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			i
	consolidated basis, separate basis, or both	ļ	Į	
	X Separate basis Consolidated basis Both consolidated and separate basis		e.	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	l	1

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Form **990** (2009)

### **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. ► See separate instructions.

2009 2009

Open to Public Inspection

Employer identification number Name of the organization THE MECHANICAL CONTRACTING FOUNDATION, INC. 52-1646891 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 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii), (Attach Schedule E) A hospital or a cooperative nospital service organization described in section 170(b)(1)(A)(iii). 3 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 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)(ıv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 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 ) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 that describes the type of supporting organization and complete lines 11e through 11h a \_\_\_\_ Type I b \_\_\_\_ Type II c \_\_\_\_ Type III - Functionally integrated d \_\_\_\_ Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (III) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s) (vi) Is the organization in col (iii) Type of (iv) Is the organization (v) Did you notify the (1) Name of supported (ii) EIN (vii) Amount of organization in col. (ı) lısted ın your organization in col. organization support (described on lines 1-9 (i) organized in the aovernina document? (i) of your support? above or IRC section (see instructions)) Yes

932021 02-08-10

Form 990 or 990-EZ.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 FOUNDATION, INC. 52-1646891 Page 2

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

(Complete only if you checke	ed the box on line 5	, 7, or 8 of Part I)				
Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not						
include any "unusual grants ")	220,555.	305,110.	290,174.	324,179.	196,931.	1,336,949.
2 Tax revenues levied for the organ-						
ization'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	220,555.	305,110.	290,174.	324,179.	196,931.	1,336,949.
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)						95,012.
6 Public support. Subtract line 5 from line 4						1,241,937.
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	220,555.	305,110.	290,174.	324,179.	196,931.	1,336,949.
8 Gross income from interest,				,		
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources	375,791.	602,012.	860,150.	829.	223,983.	2,062,765.
9 Net income from unrelated business			,		. = = = , = = = :	2,002,700.
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 IV)						
11 Total support. Add lines 7 through 10		-				3,399,714.
12 Gross receipts from related activities		ons)		l	12	50,746.
			d fourth or fifth to	ax vear as a sectio	·	00,7.200
13 First five 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						
Section C. Computation of Pub		rcentage				
14 Public support percentage for 2009	(line 6, column (f) d	ivided by line 11, o	column (f))		14	36.53 %
15 Public support percentage from 200		•	ν,,		15	40.07 %
16a 33 1/3% support test - 2009.If the			n line 13, and line 1	14 is 33 1/3% or m		
stop here. The organization qualifies	•				,	►X
b 33 1/3% support test - 2008.If the	. ,	ŭ		line 15 is 33 1/3%	or more, check th	
and stop here. The organization qua	_				,	
17a 10% -facts-and-circumstances te				13. 16a. or 16b. a	and line 14 is 10%	or more.
and if the organization meets the "fa	-					
meets the "facts-and-circumstances			•			<b>▶</b>
b 10% -facts-and-circumstances te	<del>-</del>	•		-	7a. and line 15 is 1	10% or
more, and if the organization meets	-					
organization meets the "facts-and-ci				•		
18 Private foundation. If the organizat		_	•			s 🕌

932022 02-08-10

Schedule A (Form 990 or 990-EZ) 2009

Pa	art III Support Schedule for C	Organizations	Described in	Section 509(a	(Complete only	if you checked the b	ox on line 9 of Part I.)
Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")						
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						
3	Gross receipts from activities that			 			
	are not an unrelated trade or bus						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
_	the organization without charge						
	Total. Add lines 1 through 5				<del> </del>		
73	a Amounts included on lines 1, 2, and 3 received from disqualified persons						
ı	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						
,	c Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)		<u> </u>				•
-	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
l	b Unrelated business taxable income (less section 511 taxes) from businesses	·					
	acquired after June 30, 1975						
	c Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11, and 12)					<u> </u>	<u></u>
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	tax year as a section	on 501(c)(3) organi	zation,
_	check this box and stop here						<b>&gt;</b>
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2009 (	line 8, column (f) d	ivided by line 13,	column (f))		15	%
<u>16</u> Se	Public support percentage from 2008 ction D. Computation of Inve	•				16	<u>%</u>
-	Investment income percentage for 20				<del></del>	17	%
18		•	•	ne 10, column (1))		18	
	a 33 1/3% support tests - 2009. If the			on line 14, and lin	e 15 is more than		<del></del>
19	more than 33 1/3%, check this box a	-					
	b 33 1/3% support tests - 2008. If the	•	,				and
	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organization			•		•	
				,,			90 or 990-EZ) 2009

### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12. ➤ Attach to Form 990. ➤ See separate instructions. Open to Public Inspection

OMB No 1545-0047

THE MECHANICAL CONTRACTING Name of the organization

FOUNDATION, INC

Employer identification number 52-1646891

Par	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Fund	s or Accounts. Complete if the		
	organization answered "Yes" to Form 990, Part IV, line	6			
		(a) Donor advised funds	(b) Funds and other accounts		
1	Total number at end of year				
2	Aggregate contributions to (during year)	1-11			
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advi	sed funds		
Ū	are the organization's property, subject to the organization's	_	Yes No		
6	Did the organization inform all grantees, donors, and donor ac				
Ū	for charitable purposes and not for the benefit of the donor or		·		
	impermissible private benefit?	advice advices, or to: any extens purpose	Yes No		
Pai		anization answered "Yes" to Form 990.			
1	Purpose(s) of conservation easements held by the organization				
•	Preservation of land for public use (e.g., recreation or pl		storically important land area		
	Protection of natural habitat		tified historic structure		
	Preservation of open space		tilled filetone strastars		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	of a conservation easement on the last		
_	day of the tax year		or a concentation supernent en the last		
	day of the tax year		Held at the End of the Tax Year		
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
c	Number of conservation easements on a certified historic stru	icture included in (a)	2c		
d	Number of conservation easements included in (c) acquired a		2d		
3	Number of conservation easements modified, transferred, rele				
3	year	sassa, extinguished, or terminated by tr	to organization daring the tax		
4	Number of states where property subject to conservation eas	sement is located			
5	Does the organization have a written policy regarding the peri		:		
3	violations, and enforcement of the conservation easements it		Yes No		
6	Staff and volunteer hours devoted to monitoring, inspecting,				
7	Amount of expenses incurred in monitoring, inspecting, and e		-		
8	Does each conservation easement reported on line 2(d) abov		- · ·		
Ū	and section 170(h)(4)(B)(ii)?	o canory and requirements or country.	Yes No		
9		on easements in its revenue and expens			
Ů	9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for				
	conservation easements				
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or (	Other Similar Assets.		
L	Complete if the organization answered "Yes" to Form				
1a	If the organization elected, as permitted under SFAS 116, not	t to report in its revenue statement and	balance sheet works of art, historical		
	treasures, or other similar assets held for public exhibition, ed	•			
	the footnote to its financial statements that describes these if				
h	If the organization elected, as permitted under SFAS 116, to		ince sheet works of art, historical treasures.		
~	or other similar assets held for public exhibition, education, o	•			
	these items		, p. 0		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$		
	(ii) Assets included in Form 990, Part X		\$		
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financial			
~	the following amounts required to be reported under SFAS 1:		ga, p. 01100		
_	5	.5 .5.a.mg to those norms	<b>▶</b> \$		
a h	Assets included in Form 990, Part X		► \$ ► \$		
Ö	Assets included in Form 330, Fall A		Ψ		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2009

Part III   Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)			ION, INC.				-1646891 Page <b>2</b>
(check all that apply) a	Par	t III   Organizations Maintaining C	ollections of Ar	t, Historical Tr	reasures, or Ot	her Similar	Assets (continued)
b Scholarly research e Other  c Preservation for future generations  d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV  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 collections?  [Part V] Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reporting an amount on Form 990, Part X initial 2.  [1a] Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990. Part X?  [2b] If "Yes," explain the arrangement in Part XIV and complete the following table  [2c] Beginning balance  [2c] Beginning balance  [2c] Beginning balance  [2c] Dut the organization include an amount on Form 990, Part X, line 21?  [2c] Beginning the year  [2c] Dut the organization include an amount on Form 990, Part X, line 21?  [2c] Beginning of year balance  [2c] Beginning of year balance  [2c] Current year   3	(check all that apply)	on, and other records			significant use	of its collection items	
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV 5 During the year, did the organization's collections 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?  Part IV   Excrow and Custodial Arrangements. Complete if organization answered "Vea" to Form 990, Part IV, line 9, or reporting an amount on Form 990, Part X, line 21  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21  b If 'Yes,' explain the arrangement in Part XIV and complete the following table  c Beginning blatiance d Additions during the year 1 Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 3 Description of year balance 4 845.226. 482.42.96. 4 82.42.96. 4 82.42.96. 5 Contributions 6 Not investment earnings, gains, and losses 6 Grants or scholarships 6 Other expenditures for facilities and programs 8 Board designated or quasi-endowment ► 76  2 Provide the estimated percentage of the year end balance held as Board designated or quasi-endowment ► 76  5 Torm endowment ► 100.00 % 5 Torm endowment ► 100.00 % 6 Torm endowment ► 100.00 % 7 Torm endowment ► 100.00 % 8 Torm endowment ► 100.00 % 9 Torm endowment ► 100.00 % 1 Tryes to 300, are the related organizations listed as required on Schedule R?  4 Description of investment  6 (a) Cost or other basis (investment) basis (other) depreciation (d) Book value basis (investment) basis (investment) basis (other) depreciation (d) Book value basis (investment) basis (other) depreciation (d) Book value basis (investment) basis (other) depreciation (d) Book value Called Equipment.	а	Public exhibition	d	Loan or exc	change programs		
4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV  5. During the year, did the organization solicit or receive donations of air, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?    Part VI   Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an emotion on Form 990, Part X, iniu 21    Ia   Is the organization an agent, trustee, custodian or other intermediany for contributions or other assets not included on Form 990, Part X?   Ia   Is the organization an agent, trustee, custodian or other intermediany for contributions or other assets not included on Form 990, Part X, iniu 21   Ia   Ia   Ia   Ia   Ia   Ia   Ia   Ia	b	Scholarly research	е	Other			
So During the year, did the organization solicit or receive donations of art, historical treasures, or other similar asserts to be sold to raise funds rather than to be maintained as part of the organization's collection?    Part IV   Escrow and Custodial Arrangements. Complete if organization arrawered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21   Ia Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   Ia Is the organization in agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   Ia Is Beginning balance   Ia Is Is It It Is Is It It Is Is It It Is Is It	С	Preservation for future generations					
Does noted to raise funds rather than to be maintained as part of the organization? Sollection? Yes No   Part IV   Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part IX, line 21   Tall is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   Part XIV and complete the following table	4	· · · · · · · · · · · · · · · · · · ·	•	=	-		ın Part XIV
Part IV   Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21  1a Is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X   Yes   No   If "Yes," explain the arrangement in Part XIV and complete the following table   Additions during the year   It   It   It   It   It   It   It   I	5			•	•	ılar assets	
Teleported an arrigority of a minimum on Form 990, Part X?							
Ta Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    Ves	Par			te if organization a	nswered "Yes" to F	orm 990, Part I	√, line 9, or
on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIV and complete the following table  C Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21?  Tyes No b If "Yes," explain the arrangement in Part XIV  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10  (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back d 48 45 22 6 . 48 2 4 2 9 6 .  C Not 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 year end balance held as a Board designated or quasi-endowment ▶						<del> </del>	
b If "Yes," explain the arrangement in Part XIV and complete the following table  c Beginning balance d Additions during the year e Distributions during the year f Ending balance 20 Did the organization include an amount on Form 990, Part X, kine 21?  10 If "Yes," explain the arrangement in Part XIV  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10  1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships c Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year and balance held as a Board designated or quasi-endowment  1 10 0 0 6  5 Permanent endowment  1 10 0 0 6  5 Permanent endowment  1 10 0 0 6  6 Term endowment  1 10 0 0 7  4 Describe in Part XIV the intended uses of the organization is listed as required on Schedule R?  4 Description of investment  1 Land b Buildings c Leasehold improvements d Equipment  1 2 Land b Buildings c Leasehold improvements d Equipment	1a		an or other intermed	iary for contribution	ns or other assets r	ot included	
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 8 Distributions during the year f Ending balance 9 Distributions during the year f Ending balance 10 Diff "Yes," explain the arrangement in Part XIV    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    Part V   Investments - Land, Buildings, and Equipment. See Form 990, Part IV, line 10    Description of investment   (a) Cost or other basis (investment)   (b) Cost or other depreciation   (d) Book value basis (investment)   (e) Equipment.   (e) Accumulated   (d) Book value basis (investment)   (e) Equipment.							└── Yes
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21?  b If "Yes", explain the arrangement in Part XIV    Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    The part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    The part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    The part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    The part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10    The part V   Endowment Funds and Endowment Funds and Programs   Funds and P	b	If "Yes," explain the arrangement in Part XIV	and complete the fol	lowing table			
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21?  2b If I'Ves," explain the arrangement in Part XIV  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10  (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back 4845226 . 4824296 .  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 b Permanent endowment \( \) 100 0							Amount
e Distributions during the year for Ending balance		-					
f   Ending balance						1d	
Did the organization include an amount on Form 990, Part X, line 21?    In 'Yes, '' explain the arrangement in Part XIIV   Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10   Investment earnings, gains, and losses	е					1	
Description of investment   Part XIV	f	•				1f	
Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10   (a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back		<del>-</del>	orm 990, Part X, line	217			└── Yes
(a) Current year (b) Pror year (c) Two years back (d) Three years back (e) Four years back  1a 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 year end balance held as a Board designated or quasi-endowment ▶	$\overline{}$		f the		000 Deat IV to	- 10	
ta 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 year end balance held as a Board designated or quasi-endowment ▶	Fai	Endowment Funds. Complete					a book ( ) Cour was a book
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 year end balance held as a Board designated or quasi-endowment   4847640   4845226     2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment   700.00   76 b Permanent endowment   100.00   76 c Term endowment   100.00   76 c Term endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Describe in Part XIV the intended uses of the organization's endowment funds  C Leasehold improvements d Equipment						(a) Three year	s back (e) Four years back
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 year end balance held as a Board designated or quasi-endowment ▶	1a					<del>-</del>	
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 year end balance held as a Board designated or quasi-endowment	D		2,414.	20,330.	•		
e Other expenditures for facilities and programs  f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment \( \)	C						
and programs  f Administrative expenses g End of year balance  2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶	a	· ·					
g End of year balance  2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶	е	· i					
g End of year balance  4847640. 4845226.  Provide the estimated percentage of the year end balance held as  Board designated or quasi-endowment ▶		· ·					
2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶	· ·	·	1847640	1815226			
a Board designated or quasi-endowment ▶	_	,			<u> </u>		
b Permanent endowment	_		ii enu balance nelu a				
Term endowment    3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements d Equipment	a h		0/4	_/0			
Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations (ii) related organizations (iii) related organizations (iiii) related organizations (iv) related organizations (iv) related organizations (iv) related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment (a) Cost or other basis (other) (b) Cost or other depreciation  1a Land b Buildings c Leasehold improvements d Equipment	0						
by (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (investment)  basis (other)  (c) Accumulated depreciation  (d) Book value  basis (investment)  b Buildings  c Leasehold improvements d Equipment	33			ation that are held a	and administered fo	r the organizati	on
(i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements d Equipment	Ou		oolon or the organize			. uno organizati	
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements d Equipment		•					
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements  d Equipment		**					
Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation  1a Land b Buildings c Leasehold improvements d Equipment	b	` '	s listed as required o	n Schedule R?			
Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation  1a Land b Buildings c Leasehold improvements d Equipment	4	```	•				1
Description of investment  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements  d Equipment	Pai				D, Part X, line 10		
b Buildings c Leasehold improvements d Equipment	<b>L</b>	Description of investment	1 ' '	1 ' '	'		(d) Book value
b Buildings c Leasehold improvements d Equipment	1a	Land					
c Leasehold improvements d Equipment							
d Equipment		· ·					
		•					
		• •					
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))	<u>Total</u>		equal Form 990, Part	X, column (B), line	10(c))		0.

Schedule D (Form 990) 2009

1 (a) Description of liability	(b) Amount
Federal income taxes	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<b>&gt;</b>

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

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Schedule D (Form 990) 2009 FOUNDATION, INC.		52-1646891 Page <b>4</b>
Part XI Reconciliation of Change in Net Assets from Form 990 to Audited	Financial State	
1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	-752,203.
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	455,421.
3 Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,207,624.
4 Net unrealized gains (losses) on investments	4	2,060,488.
5 Donated services and use of facilities	5	
6 Investment expenses	6	
7 Prior period adjustments	7	
8 Other (Describe in Part XIV)	8	
9 Total adjustments (net) Add lines 4 through 8	9	2,060, <u>488</u> .
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	852,864.
Part XII   Reconciliation of Revenue per Audited Financial Statements With	n Revenue per F	
1 Total revenue, gains, and other support per audited financial statements		1 1,403,899.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments 2a	<u>2,060,488</u>	
b Donated services and use of facilities 2b	174,810	_
c Recoveries of prior year grants 2c		_
d Other (Describe in Part XIV)		_
e Add lines 2a through 2d		2e 2,235,298.
3 Subtract line 2e from line 1		3 -831,399.
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	79,196	•
b Other (Describe in Part XIV)		_
c Add lines 4a and 4b		4c 79,196. 5 -752,203.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5   -752,203.
Part XIII Reconciliation of Expenses per Audited Financial Statements Wit	th Expenses pe	
1 Total expenses and losses per audited financial statements		1 551,035.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities 2a	174,810	<u> </u>
b Prior year adjustments 2b		_
c Other losses 2c		_
d Other (Describe in Part XIV)		
e Add lines 2a through 2d		2e 174,810.
3 Subtract line 2e from line 1		3 376,225.
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	79,196	<u> </u>
b Other (Describe in Part XIV)		_
c Add lines 4a and 4b		4c 79,196.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5 455,421.
Part XIV Supplemental Information		
Complete this part to 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, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this p		
PART V, LINE 4: TO UNDERWRITE EDUCATIONAL AND RESI	EARCH EFFO	RTS TO
ADVANCE THE MECHANICAL CONTRACTING INDUSTRY.		
	···	
PART X: UNCERTAIN TAX POSITIONS -IN JUNE 2006, TH	E FINANCIA	<u>L</u>
ACCOUNTING STANDARDS BOARD (FASB) RELEASED FASB AS	SC 740-10,	INCOME TAXES,
THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY	IN INCOME '	TAXES. FOR THE
YEAR ENDED DECEMBER 31, 2009, MCERF HAS DOCUMENTED	D ITS CONS	IDERATION OF
FASB ASC 740-10 AND DETERMINED THAT NO MATERIAL U	NCERTAIN T.	AX POSITIONS
	<u> </u>	Schedule D (Form 990) 2009

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Schedule D (Form 990) 2009 FOUNDATION, INC.	52-1646891 Page 5
Schedule D (Form 990) 2009 FOUNDATION, INC.  Part XIV Supplemental Information (continued)	
QUALIFY FOR EITHER RECOGNITION OR DISCLOSUR	RE IN THE FINANCIAL STATEMENTS.
	· · · · · · · · · · · · · · · · · · ·
	······································
	······································

932055 02-01-10

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SCHEDULE I
(Form 990)

Department of the Treasury Internal Revenue Service
Name of the organization THE MECHANICAL CONTRICUENT TAXO

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2009.
Open to Public Inspection

(

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Name of the organization THE MECHANICAL CONTRACTING FOUNDATION, INC.	NICAL CON	TRACTING					Employer identification number 52-1646891
Part I General Information on Grants and Assistance	ind Assistance						
Does the organization maintain records to substantiate the amount of	to substantiate the	e amount of the grants	s or assistance, the	grantees' eligibilit	y for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the sylection	
criteria used to award the grants or assistance?	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for moni	toring the use of grant	funds in the United	States			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any received more than \$5 000 less part IV and Schedule 1.1 (Form 990) if add tonal enacte to part and schedule 1.1 (Form 990) if add tonal enacte to part and schedule 1.1 (Form 990) if add tonal enacte to part and schedule 1.1 (Form 990) if add tonal enacte to part and schedule 1.1 (Form 990) if add tonal enacte to part and schedule 1.1 (Form 990) if add tonal enacte to part and schedule 1.1 (Form 990).	Governments and	d Organizations in the	e United States. Control of received more th	omplete if the orga	anization answered "Y	'es" to Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(a) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, PMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MECHANICAL CONTRACTORS ASSOCIATION OF AMERICA - 1385 FICCARD DR - ROCKVILLE, MD 20850	13-0831270	501(C)(6)	75,000.	.0			PAID REGISTRATION FEES FOR STUDENTS ATTENDING 2009 MCAA,
1 1							
2 Enter total number of section 501(c)(3) and government organizations	ind government or	ganizations					
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2009

Schedule I (Form 990) 2009 FOUNDATION, INC.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
Use Part IV and Schedule I-1 (Form 990) if additional space is needed

Page 2

52-1646891

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	de the information	n required in Part I,	line 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: MCERF	FUNDS GR	GRANTS TO ST	STUDENT CHAPTERS	TERS AS PART	
OF THE FUNDING EDUCATION EXCELLENCE	(FEE)	PROGRAM WHICH	IS	MONITORED BY	
MCAA'S CAREER DEVELOPMENT COMMITTEE		CAREER DEV	THE CAREER DEVELOPMENT COMMITTEE	OMMITTEE SETS	
THE STANDARDS AND THE ELIGIBILITY	REQU	IREMENTS FOR OBTAINING		A GRANT. THE	
CAREER DEVELOPMENT COMMITTEE DECIDES	ES IF THE	E REQUIREMENTS IN	ENTS IN TH	THE APPLICATION	
FROM THE STUDENT CHAPTERS MEET THE	REQUIREMENTS	NI	THE APPLICATION.	TION. EACH	
STUDENT CHAPTER WORKS CLOSELY WITH	THE	AL MECHANI	LOCAL MECHANICAL CONTRACTING	CTING	
ASSOCIATION, WHICH IS AN AFFILIATE MEMBER		OF THE MCAA,	А, ТО МАКЕ	SURE THAT	
DS ARE USED AS PRESCRIBED	IN THE EL	IGIBILITY	ELIGIBILITY REQUIREMENTS	TS.	Schodule L'Earn 000) 2000
932102 02-02-10		0.7			Schedule I (Form 990) 2009

### SCHEDULE · O (Form 990)

Supplemental Information to Form 990

(Form 990)

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

THE MECHANICAL CONTRACTING FOUNDATION, INC.

Employer identification number 52-1646891

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CONTRACTING INDUSTRY TO SUCCEED IN THEIR BUSINESSES.

FORM 990, PART VI, SECTION A, LINE 3: THE ANNUAL MANAGEMENT FEE PAID TO

THE MECHANICAL CONTRACTORS ASSOCIATION OF AMERICA (MCAA) PROVIDES

COMPENSATION FOR ITS DELIVERY OF A CONTRACTED SCOPE OF SERVICES TO

MECHANCIAL CONTRACTION FOUNDATION (MCERF): THE SERVICES INCLUDE A COMPOSITE

OF PERSONNEL, INFRASTRUCTURE AND TECHNOLOGY EXPENSES, INCLUDING

COMPENSATION FOR THE SERVICES OF AN MCAA EMPLOYEE WHO SERVES AS THE

EXECUTIVE DIRECTOR OF MCERF.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 WAS PREPARED BY THE

OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. A COPY OF THE 990

WAS PROVIDED TO THE ORGANIZATION'S OFFICERS TO REVIEW ON BEHALF OF THE

ENTIRE BOARD OF TRUSTEES. ANY COMMENTS RECEIVED WERE CONSIDERED FOR

INCORPORATION INTO THE FINAL 990 SUBMISSION.

FORM 990, PART VI, SECTION B, LINE 12C: ON AN ANNUAL BASIS, ALL TRUSTEES

ARE PROVIDED WITH A COPY OF THE CONFLICT OF INTEREST POLICY AND ARE

REQUIRED TO COMPLETE AND SIGN THE ACKNOWLEDGMENT AND DISCLOSURE FORM. ALL

COMPLETED FORMS ARE PROVIDED TO AND REVIEWED BY THE MCERF PRESIDENT AND

EXECUTIVE DIRECTOR, AS WELL AS ALL OTHER PERTINENT INFORMATION PROVIDED BY

BOARD MEMBERS. THE TRUSTEE WHO PRESENTS THE ACTUAL OR POTENTIAL CONFLICT IS

RECUSED FROM PARTICIPATING IN DEBATES AND VOTING ON THE MATTER.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2009

### ( 1 · )

### SCHEDULE-O

(Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization	THE MECHANICAL CONTRACTING FOUNDATION, INC.	Employer identification number 52-1646891
GOVERNING DOCUM	MENTS, CONFLICT OF INTEREST POLICY AND FORM	990 AVAILABLE TO
THE PUBLIC UPO	N REQUEST AT THE MCERF NATIONAL OFFICE IN R	OCKVILLE, MD.