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# Form 990

# **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)

Open to Public Inspection

Form 990 (2009)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service benefit trust or private foundation)

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

A	For the	2009 cal	endar ye	ar, or tax	year beginnir	ng				,	and er	nding						
В	check if ap	oplicable	Please	C Name of	of organization	PLUM	BERS	& PIPEF	ITTEF	RS LU 4	421 LA	BOR I	D Employer	identifi	ication numb	er		
	Address	change	use IRS label or	Doing E	Business As	•						58-2442647						
	Name ch	ange	print or	Numbe	r and street (or	P O. box if ma	ıl ıs not	delivered to	street a	ddress)	Ro	om/suite	E Telephone	numbe	er			
$\Box$	nitial retu	ım	type See	2556 OS	CAR JOHN	SON DR.					- 1		843-554-36	55				
百.	Terminat	ed	Specific		town, state or co		+ 4								·			
=	Amended		Instruc- tions		CHARLEST	-		SC	;	29	405	1	G Gross rece	eipts \$		17	2,877	
=		on pending			ddress of prir		:		•			H(a) is i	this a group retu	ırn for a	ffiliates?		X No	
					56 Oscar Jo	-		hadestor	3.80	29404	5	, ,	e all affiliates inc		ī		     No	
		mpt status		1(c) ( 5	) <b>∢</b> (inse		_	47(a)(1) or		527			"No," attach a lis		_			
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		: ► N/A				٦		1			Γ		oup exemption i			d		
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ø		the plumbing and pipe fitting industry throughout North and South Carolina through education, advertis											ising a	and marke	ring eiro	ns.		
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Activities & Governance																		
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	8	Contribu	itione an	ıd arants	/Part VIII lin	ne 1h)							7 1101 1001	0			0	
e		8 Contributions and grants (Part VIII, line 1h)									15	7,990		17	0,159			
Revenue	10	~			•									6,109			2,718	
æ	11	Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)									0							
	12	Total reve	Total revenue—add lines 8 through 11 (must equal-Part-VIII column (A) line 12)								17	2,877						
	13	Grants a	and simi	lar amour	nts paid (Par	t IX. colum	n (A).	tines-1÷3	)				<del> </del>	0	<del>                                     </del>		0	
	14	Benefits	paid to	or for me	mbers (Part	IX/\bolumr	اہ ( <u>۸</u> ر) ا	ine 4) S.	1					0			0	
	15	Salaries	, other c	ompensa	mbers (Part ition, employ	ee benefit	s (Par	t IX, dolur	nn (A)	), lines	5–10)			0	O			
ses	16a	Professi	onal fun	draising f	ees (Part IX	Cotumn (4	λ),₋line	<u>11e</u> ) ⊅ .	l .`.'					0		O		
Expenses	Ь	Total fur	ndraising	g expense	es (Part X-c		lihe\2	25) ▶≟			0							
ŭ	17	Other ex	penses	Part IX,	column (A),	lines 11a-	11d, 1	1f=24f)=	<del></del> -	·			11	7,805		11	1,447	
	18				s 13–17 (mu								11	7,805	5	11	1,447	
	19	Revenue	e less ex	kpenses.	Subtract line	18 from li	ne 12	<u> </u>					4	6,294		6	<u>31,430</u>	
Net Assets or Fund Balances												Begin	ning of Curren		+	d of Year		
sets	20	Total as	sets (Pa	ırt X, line	16)									9,965	<del></del>		1,244	
e ₹ 6	21			Part X, lin							•			1,400			1,249	
2.	22				es. Subtrac	t line 21 fro	<u>m line</u>	e 20			<u> </u>	ļ	43	8,565	<u> </u>	49	99,995	
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Sig	ın		Signature	of officer	<del>/                                    </del>	<i>†</i>			<b>√</b>			ΛΛ	Date	1	1	,		
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Pai	d	signa	ture	$\rightarrow \lambda$	ريز (	_			2/4	0/2040		elf- nployed	▶□	(see i	nstructions)	2119	70/7	
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Mar	the II	DQ dicous	e thie re	din mith	the prepare	r shown ah	101/27	lead instr	uction	ie)					IX	Yes	l No	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

4d Other program services. (Describe in Schedule O.)
(Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )

4e Total program service expenses ▶ 111,447

Form 990 (2009)

Par	t 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		Х
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		Ιx
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,			
•	Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice			
3	and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			<u> </u>
J	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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		<del>  ^</del>
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"			<del>  ^</del>
8	complete Schedule D, Part III	8		х
		•		<del>  ^</del> -
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 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,			
	VII, VIII, IX, or X as applicable	11	X	<u> </u>
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete		i	
	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			l
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			1
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that			1
	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			<b> </b>
	Schedule D, Parts XI, XII, and XIII.	12	Х	ļ
12A	Was the organization included in consolidated, independent audited financial statements for the tax  Yes No			1
	year? 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		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,		1	1
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	L	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		1	ļ
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		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," complete Schedule G, Part III	19	<u> </u>	X
20	Did the organization operate one or more bospitals? If "Yes " complete Schedule H	20		Ιx

Part IV Checklist of Required Schedules (continued) No 21. Did the organization report more than \$5,000 of grants and other assistance to governments and organizations 21 Х in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . . . . . Did the organization report more than \$5,000 of grants and other assistance to individuals in the 22 Х United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . 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 23 Х 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 24a 24b **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 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 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 Х disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II . . . . . . Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor, or a grant selection committee member, or to a person related to such an individual? 27 Х 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): Х a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . . . . 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b Х 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, 28c 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 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R. Parts II, 34 Χ Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 Х 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part Х 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 38 

rai	Statements Regarding Other INST mings and Tax Compilance	-	V	
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		Yes	No
	U.S. Information Returns. Enter -0- if not applicable		•	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	4-	╽╻╽	
	gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return.  2a 0	٥L		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b_		
	<b>Note</b> . If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a	<u> </u>	х
b	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 authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			İ
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	<u>7a</u>	L	ļ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	ļ	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
_	required to file Form 8282?	7c	ļ	<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	!		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	<b>7</b> .		
	benefit contract?	7e	-	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7f		
g	For contributions of qualified intellectual property, did the organization file a Form 1098-C as	7 <u>g</u>		<b>-</b>
h	required?	<b>7</b> h	,	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	711		-
Ü	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			<b>-</b>
а	Did the organization make any taxable distributions under section 4966?	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12		1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:		1	
а	Gross income from members or shareholders			1
b	Gross income from other sources (Do not net amounts due or paid to other sources			1
	against amounts due or received from them.)		ŀ	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			1

58-2442647	Page 6

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

Seci	ion A. Governing Body and Management						
		<sub>r</sub> ——	Yes	No			
1a	Enter the number of voting members of the governing body						
b	Enter the number of voting members that are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			v			
_	any other officer, director, trustee, or key employee?	2		X			
3	Did the organization delegate control over management duties customarily performed by or under the direct	_		V			
4	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X			
4 5	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? Did the organization become aware during the year of a material diversion of the organization's assets?	5		X			
6	Does the organization have members or stockholders?	6		x			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			<u> </u>			
, u	of the governing body?	7a		Х			
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		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		Х			
b	Each committee with authority to act on behalf of the governing body?	8b		Х			
9	· · · · · · · · · · · · · · · · · · ·						
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		Х			
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal						
Reve	enue Code.)						
			Yes	No			
10a	Does the organization have local chapters, branches, or affiliates?	10a		Х			
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,						
	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 filing the						
	form?	11	Х				
	Describe in Schedule O the process, if any, used by the organization to review this Form 990						
12a	• • • • • • • • • • • • • • • • • • • •	12a		X			
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give						
	rise to conflicts?	12b		_X_			
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40-					
42	describe in Schedule O how this is done	12c 13	-	X X			
13	Does the organization have a written whistleblower policy?		<u> </u>	x			
14 15	Does the organization have a written document retention and destruction policy?	14	-	<del>  ^-</del>			
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official.	15a		X			
a b	Other officers or key employees of the organization	15b	<b>-</b>	X			
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			<u> </u>			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement						
	with a taxable entity during the year?	16a		х			
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	-					
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard						
	the organization's exempt status with respect to such arrangements?	16b					
Sect	ion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s of	nly)					
	available 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, conflict of interesting the conflict of inter	est					
	policy, and financial statements available to the public.						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the						
	organization: ► Perry Howard (800) 214-22	32					
	2556 Oscar Johnson Dr. , Charleston, SC 29405		_				

### Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Part VII **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.

Check this box if the organization did not compensate any current officer, director, or t  (A) (B) (C)								(D)	(E)	(F)
, ,		Poeifu	on (c			that ap	ואח			
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee	S Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Perry Howard Trustee	2.	Х						0	0	0
Zane Gauldin										
Trustee Chris Bunting Trustee	2. 2.	X						0	0	0 0
Robert Hughes Trustee	2.	Х						0		0
Jack Weaver Trustee	2.	х						0	0	0
Frank Stark Trustee	2	Х						0	0	0
Ed Drescher Trustee	_ 2.	х						0	0	0
Gary Kinley Trustee	2.	х						0	0	0
						<u>.</u>				
	_									

58-2442647	Page 8
------------	--------

	rt VII Section A. Officers, Directors, Tru (A)					(E)		(F)					
	Name and title	Average hours per week			Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)		Estimated amount of other compensation from the organization and related organizations			
												····	
										1			
												·	
			·							·			
												·	
1b 2	Total	ot limited to thos	se list	ted a	bove				0 ed more than \$1	L	0		0
3	Did the organization list any <b>former</b> officer, employee on line 1a? <i>If</i> "Yes," complete Sci										3	Yes	No X
4	For any individual listed on line 1a, is the su the organization and related organizations gindividual	reater than \$15	00,00	0? If	"Ye	s," c	ompl				4		X
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Ye										5		X
	tion B. Independent Contractors			4		4-	41.	-4		- £400 000 -4			
1	Complete this table for your five highest con compensation from the organization.	npensated inde	pena	ent d	contr	o	ors una	at re		n \$100,000 oi			_
	(A) Name and business a	ddress						<u> </u>	(B) Description of sen	vices (	Compe	(C) ensation	
								_					0
													0
													0
													0
2	Total number of independent contractors (in	-		ed to	thos	se lis			e) who received				
	more than \$100,000 in compensation from t	ine organization					0			l	F	om 99	0 (2009)

Form 990 (2009			OR MA	NAGEMENT FUND	)		58-2442647 Pag				
Part	VIII										
() (a)	,		la		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514			
ants		. 0	_								
Contributions, gifts, grants and other similar amounts	b	Membership dues									
	С	Fundraising events									
, gi	a	Related organizations									
ons Sim	e	Government grants (contributions)	. 16	9 0							
utic	f	All other contributions, gifts, grants, and		.  .							
trib		similar amounts not included above		0							
no:	g	Noncash contributions included in lines 1a-									
	h	Total. Add lines 1a–1f		Business Code	0			<u> </u>			
une	20	Employer contributions		Business Code	170 150						
eve	2a b	Employer contributions			170,159 0						
Se R					0						
Program Service Revenue	d				0						
ı Sı	u				0	<del></del>					
grar	•	All other program service revenue			0						
Pro	q	Total. Add lines 2a–2f			170,159						
	3	Investment income (including dividends, inte			170,133						
	3	, ,	-	4	2 740						
	4	other similar amounts)			2,718 0						
	5	Royalties	•		0						
	J	(i) F		(II) Personal				<del> </del>			
	6a	Gross Rents	\cai	(ii) i ersonai							
		Less: rental expenses		<del> </del>				1			
		Rental income or (loss)		0 0	j						
	d	Net rental income or (loss)			ol						
	_	Gross amount from sales of (i) Sec		(II) Other							
		assets other than inventory		0 0							
	b	Less: cost or other basis		<u> </u>							
		and sales expenses		ol ol							
	С	Gain or (loss)		0 0							
		Net gain or (loss)			o						
		Gross income from fundraising									
a l		events (not including \$ 0									
Ş		of contributions reported on line 1c).									
Re		See Part IV, line 18	. а	0							
Other Revenue	b	Less: direct expenses	. b	0				1			
₹		Net income or (loss) from fundraising events	s	<u> ▶</u>	0						
	9a	Gross income from gaming activities.									
		See Part IV, line 19									
- 1		Less: direct expenses									
		Net income or (loss) from gaming activities .		. <u></u>	0						
- 1	10a	Gross sales of inventory, less									
		returns and allowances						1			
		Less: cost of goods sold						1			
	_с	Net income or (loss) from sales of inventory	· · ·		0		<u> </u>	<del> </del>			
}	44	Miscellaneous Revenue		Business Code				1			
	11a			-	0			<del> </del>			
	b			-	0			+			
	q C	All other revenue			0			<del> </del>			
	u A	Total. Add lines 11a–11d			0	· · · · · · · · · · · · · · · · · · ·	· · · · · · · ·	<del> </del>			
	12	Total revenue. See instructions			172,877	0		1			

58-2442647

Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (D) Do not include amounts reported on lines 6b. Program service Total expenses Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses general expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21. . . 0 Grants and other assistance to individuals in 2 0 Grants and other assistance to governments, 3 organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . . . . . . . 0 Benefits paid to or for members . . . . . . . . . 0 5 Compensation of current officers, directors, trustees, and key employees . . . . . . . . . 0 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . 0 Other salaries and wages . . . . . . . . . . . . . 7 0 Pension plan contributions (include section 401(k) and section 403(b) employer contributions). . . . 0 0 9 0 10 11 Fees for services (non-employees): 0 0 b 18,666 18,666 d 0 Professional fundraising services. See Part IV, line 17 0 e f Investment management fees . . . . . . . . . . . . 0 12,881 12,881 q 12 Advertising and promotion . . . . . . . . . . . . 0 1,253 1,253 13 Office expenses . . . . . . . . . . . . . . . . . 14 Information technology . . . . . . . . . . 0 0 15 0 16 12,809 12.809 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . 3,000 3,000 19 Conferences, conventions, and meetings . . . . . 20 0 21 0 22 Depreciation, depletion, and amortization . . . . . 1.354 1,354 0 23 0 24 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.) Public relations 4,000 4,000 Office and secretarial services 3,500 3,500 b State and local affiliations 23,147 23,147 d Tax 55 55 30,782 30,782 Training grants All other expenses Total functional expenses. Add lines 1 through 24f 111,447 111,447 25 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 . . . . . . .

58-2442647 Page 11

٢	art X	Balance Sheet			
		•	<b>(A)</b> Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	421,634	2	493,867
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	15,600	4	16,000
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L	0	5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L	0	6	
Assets	7	Notes and loans receivable, net	0	7	0
SS	8	Inventories for sale or use		8	
4	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or 10a 20,074			
		other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b 18,697	2,731	10c	1,377
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	439,965		511,244
	17	Accounts payable and accrued expenses	1,400		11,249
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	0	20	
Liabilities	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Ę	22	Payables to current and former officers, directors, trustees, key			
<u> </u>		employees, highest compensated employees, and disqualified			
_		persons. Complete Part II of Schedule L	0	22	
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0:		0
	25	Other liabilities. Complete Part X of Schedule D	0-	25	0
	_26	Total liabilities. Add lines 17 through 25	1,400	26	11,249
G		Organizations that follow SFAS 117, check here ► X and			
<u> </u>		complete lines 27 through 29, and lines 33 and 34.			
a	27	Unrestricted net assets	438,565	27	499,995
Ba	28	Temporarily restricted net assets		28	
БП	29	Permanently restricted net assets		29	
교		Organizations that do not follow SFAS 117, check here ▶			
ŏ		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
SSI	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
۲	32	Retained earnings, endowment, accumulated income, or other funds .	· · · · · · · · · · · · · · · · · · ·	32	
Š	33	Total net assets or fund balances	438,565	-	499,995
	34	Total liabilities and net assets/fund balances	439,965		511,244

Form **990** (2009)

Form 9	90 (2009) PLUMBERS & PIPEFITTERS LU 421 LABOR MANAGEMENT FUND	58-2442647	P	age <b>12</b>
Part	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.			<u> </u>
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a	Χ	
b	Were the organization's financial statements audited by an independent accountant?	. 2b	Χ	
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	Χ	
	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 consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		L_
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		

Form **990** (2009)

### SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

2009

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Employer Identification number

мате	or the organization			Employer identification number					
PLU	MBERS & PIPEFITTERS LU 421 LABOR MAI	NAGEMENT FUND		58-2442647					
Par		or Advised Funds or Othe	r Similar Fur						
	the organization answered "Yes" to			·					
		(a) Donor advised funds		(b) Funds and other accounts					
1	Total number at end of year								
2	Aggregate contributions to (during year)								
3	Aggregate grants from (during year)		<del></del>	<del></del>					
_									
4	Aggregate value at end of year								
5	Did the organization inform all donors and do	=							
	funds are the organization's property, subject		-						
6									
	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other								
	purpose conferring impermissible private be	nefit?		Yes   No					
Part	Conservation Easements. Comp	lete if the organization ans	wered "Yes" t	o Form 990, Part IV, line 7.					
1	Purpose(s) of conservation easements held			Contraction Contraction of the second					
	Preservation of land for public use (e.g.,	recreation or pleasure)	reservation of	of an historically important land area					
	Protection of natural habitat		Preservation of	of a certified historic structure					
	Preservation of open space								
2	Complete lines 2a through 2d if the organiza	tion held a qualified conserva	ition contribution	on in the form of a conservation					
_	easement on the last day of the tax year.	Hora a quantito cortoot ve		and the second of the second o					
	casemont on the last day of the tax year.			Uold at the End of the Ton Year					
_	Total number of concentration accompate			Held at the End of the Tax Year					
a	Total number of conservation easements .								
b	Total acreage restricted by conservation eas								
С	Number of conservation easements on a cer								
d	Number of conservation easements included			·					
3	Number of conservation easements modified	d, transferred, released, exting	guished, or ten	minated by the organization					
	during the tax year								
4	Number of states where property subject to	conservation easement is loc	ated 🕨						
5	Does the organization have a written policy	regarding the periodic monitor	ring, inspection	n, handling of					
	violations, and enforcement of the conservation								
6	Staff and volunteer hours devoted to monito								
	<b>•</b>		-						
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing cor	servation ease	ements during the year					
•	► \$	g, and officioning out							
8	Does each conservation easement reported	on line 2/d) above satisfy the	requiremente	of section					
J				F I I					
•	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?								
9	In Part XIV, describe how the organization re	- <del>-</del> -							
	balance sheet, and include, if applicable, the		ganızatıon's fin	anciai statements that describes					
_	the organization's accounting for conservation			Olasilas Assada					
Par				Similar Assets.					
	Complete if the organization answered								
1a	If the organization elected, as permitted und								
	art, historical treasures, or other similar asse								
	service, provide, in Part XIV, the text of the f								
b									
	historical treasures, or other similar assets h		ation, or resea	arch in furtherance of public					
	service, provide the following amounts relati								
	(i) Revenues included in Form 990, Part VII	I, line 1		• \$					
	(ii) Assets included in Form 990, Part X			<b>&gt;</b> \$					
2	If the organization received or held works of	art, historical treasures, or of	her similar ass	ets for financial gain, provide the					
_	following amounts required to be reported up			The state of the s					
_	Povonues included in Form 000, Post VIII 19	no 1	.36 IIGH3.	▶ €					
а	Revenues included in Form 990, Part VIII, li			· · · · · • •					
b	Assets included in Form 990, Part X			>					

### PLUMBERS & PIPEFITTERS LU 421 LABOR MANAGEMENT FUND 58-2442647

Schedule D (Form 990) 2009 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Part III 3, Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs а b Scholarly research Other Preservation for future generations C 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 collection? . . . Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not 1a Yes b If "Yes," explain the arrangement in Part XIV and complete the following table: **Amount** С 1c 1d 1e f 0 2a Did the organization include an amount on Form 990, Part X, line 21? . . . . . . . . . . . . Yes X No If "Yes," explain the arrangement in Part XIV. Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance . . . Contributions . . . . . . . . . Net investment earnings, gains, and losses . . . . . . . . . Grants or scholarships . . . . Other expenditures for facilities and programs . . . . . . . Administrative expenses . . . f End of year balance . . . . . Provide the estimated percentage of the year end balance held as: 2 Board designated or quasi-endowment b Permanent endowment Term endowment Are there endowment funds not in the possession of the organization that are held and administered for the 3a organization by: Yes No 3a(i) 3a(ii) If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . . Describe in Part XIV the intended uses of the organization's endowment funds. Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Part VI Description of investment (a) Cost or other basis (b) Cost or other (c) Accumulated (d) Book value (investment) basis (other) depreciation Land . . . . . . . . . . . . . . . . 0 0 0 Buildings . . . . . . . . . . . 0 0 0 ol 0 Leasehold improvements . . . . . C 0 20,074 18,697 Equipment . . . . . . . . . . . Other. 0 • Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . 1,377 Schedule D (Form 990) 2009 Investments—Other Securities. See Form 990, Part X, line 12. (a) Description of security or category (c) Method of valuation (b) Book value (including name of security) Cost or end-of-year market value Financial derivatives . . . . . . . . . . . . . Closely-held equity interests . . . . . . 0 0 0 0 0 0 0 0 0 Total. (Column (b) must equal Form 990, Part X, col (B) line 12) 0 Investments—Program Related. See Form 990, Part X, line 13. Part VIII (a) Description of investment type (c) Method of valuation (b) Book value Cost or end-of-year market value 0 0 0 0 0 0 0 0 0 Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Other Assets. See Form 990, Part X, line 15. Part IX (a) Description (b) Book value 0 0 0 0 0 0 0 0 Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.). 0 Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Amount ol Federal income taxes 0 0 0 o 0 0 0 0 0 Total (Column (b) must equal Form 990, Part X, col (B) line 25) 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.

Sched	dule D (Form 990) 2009			Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial	Sta	tements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		172,877
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		111,447
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		61,430
4	Net unrealized gains (losses) on investments	4		-
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		0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		61,430
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments		ļ	
b	Donated services and use of facilities			
C	Recoveries of prior year grants			
d	Other (Describe in Part XIV.)			
e	Add lines 2a through 2d	$\dashv$	2e	0
3	Subtract line 2e from line 1	-	3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	- <b> </b> -	-	
	Investment expenses not included on Form 990, Part VIII, line 7b 4a	- 1	]	
a	Other (Describe in Part XIV.)	$\dashv$	ł	
b	,	一.	4c	0
C	Add lines 4a and 4b		5	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
	Total expenses and losses per audited financial statements	<u>cs p</u>	1	<u> </u>
1	·	<u> </u>	<del>'   -</del>	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	- [		
а	Donated services and use of facilities	$\dashv$		
b	Prior year adjustments			
C	Other losses			
d	Other (Describe in Part XIV.)	┨.		0
е	Add lines 2a through 2d	H	2e	0
3	Subtract line 2e from line 1	$\vdash$	3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIV.)	_		
С	Add lines 4a and 4b		4c	0
_5_	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	0
Par	t XIV Supplemental Information			
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	14; P	art IV, line	s 1b
	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			
	part to provide any additional information.			
			••••	

# PLUMBERS & PIPEFITTERS LU 421 LABOR MANAGEMENT FUND 58-2442647 Schedule D (Form 990) 2009 Page 5 Part XIV Supplemental Information (continued)

# SCHEDULE O (Form 990)

# 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.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

PLUMBERS & PIPEFITTERS LU 421 LABOR MANAGEMENT FUND	58-2442647
Form 990 Part III Line 1 To maintain a labor-management committee to sponsor a wide range	
cooperative activities designed to improve communication and engender and harmonious rela	tions
between labor and management representatives.	
·	
·	
·	
· · · · · · · · · · · · · · · · · · ·	
·	
•	
·	
	•

Part IX, Line 22 (990) - Depreciation, Depletion, and Amortization

(000) Depression, D	opionon, and					
	(A)	(B)	(C)	(D)		
	Total	Program	Management	Fundraising		
•		services	and general			
1 Depreciation	1,354	1,354	_			
<b>2</b> Depletion	0		<del></del>	<del> </del>		
3 Amortization 3	0	<del></del>				
4 Total	1,354	1,354	0	0		

Part X, Line 4 (990) - Accounts Receivable

	Accounts re	ceivable	Allowance for doubtful accounts					
	Beginning	End	Beginning	End				
1 Employer contributions 1	15,600	16,000						
2								
3								
4								
5								
6								
7								
88								
9								
10 10								
11 Total accounts receivable	15,600	16,000	0	0				

# Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

1,377		Ending		1,377	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
, 2,731		Beginning	Balance -	2,731	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0		Disposals/	Adjustments																				
18,697	Ending	Accumulated	Depreciation	18,697																			
17,343	Beginning	Accumulated	Depreciation	17,343	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
20,074		Cost/Other	Basis	20,074	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Check If	Asset	Disposed																				
	Check If	Investment	Asset																				
			Other																				
			Equipment	×																			
	Leasehold	Improve-	ments																				
			Buildings																				
			Land																				
			Category or Item	1 Trailer & video equipment	2	3	4	2	9	7	8	6	01	11	12	13	14	15	16	41	18	19	20
				-	2	<u>ო</u>	4	2	9	7	80	6	10	11	12	13	14	15	16	17	18	19	20