

Form **990-EZ**

**Short Form
Return of Organization Exempt From Income Tax**

OMB No 1545-1150

2008

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2008 calendar year, or tax year beginning 6/01/08, and ending 5/31/09

B Check if applicable	Please use IRS label or print or type. See Specific Instructions.	C Name of organization <u>I.B.E.W. Local 1908</u>		D Employer identification number <u>59-6133820</u>
<input type="checkbox"/> Address change		Number and street (or P O box, if mail is not delivered to street address)		E Telephone number <u>321-639-3190</u>
<input type="checkbox"/> Name change		Room/suite <u>2743 Wentworth Place</u>		F Group Exemption Number <u>0064</u>
<input type="checkbox"/> Initial return		City or town, state or country, and ZIP + 4 <u>Cocoa FL 32926</u>		
<input type="checkbox"/> Termination				
<input type="checkbox"/> Amended return				
<input type="checkbox"/> Application pending				

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method Cash Accrual
Other (specify) ▶

I Website: ▶ www.scu4ibew.org

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

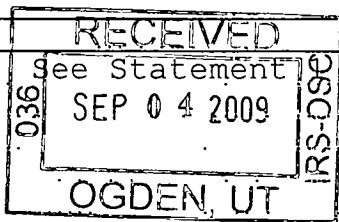
J Organization type (check only one) — 501(c) (5) ◀ (insert no) | 4947(a)(1) or | 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 128,602

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	128,331
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	271
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach sch)	5c	
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
	a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
b	Less direct expenses other than fundraising expenses	6b		
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe ▶ _____)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	128,602	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	71,269
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	34,410
	13	Professional fees and other payments to independent contractors	13	1,670
	14	Occupancy, rent, utilities, and maintenance	14	360
	15	Printing, publications, postage, and shipping	15	1,293
	16	Other expenses (describe ▶ <u>See Statement 2</u>)	16	13,709
	17	Total expenses. Add lines 10 through 16	17	122,711
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	5,891
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	53,462
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	59,353



Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

		(A) Beginning of year		(B) End of year
22 Cash, savings, and investments		54,055	22	60,151
23 Land and buildings			23	
24 Other assets (describe ▶ _____)			24	
25 Total assets		54,055	25	60,151
26 Total liabilities (describe ▶ <u>See Statement 3</u>)		593	26	798
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)		53,462	27	59,353

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

Form **990-EZ** (2008)

SCANNED OCT 01 2009

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

Expenses
(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others.)

What is the organization's primary exempt purpose?

LABOR ORGANIZATION - ELECTRICAL WORKERS

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

28 N/A

(Grants \$) If this amount includes foreign grants, check here **28a**

29

(Grants \$) If this amount includes foreign grants, check here **29a**

30

(Grants \$) If this amount includes foreign grants, check here **30a**

31 Other program services (attach schedule)

(Grants \$) If this amount includes foreign grants, check here **31a**

32 Total program service expenses (add lines 28a through 31a) **32**

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Larry Bryan (took office 06/07)	President	10,060	0	0
Marcos Romero (took office 06/07)	Rec. Sec.	4,254	0	0
Robert J. Schuck (took office 06/07)	Treasurer	3,019	0	0
Edward H. Avery (took office 06/07)	V.-President	4,078	0	0
Bruce Welch (took office 06/07)	Fin. Sec.	6,150	0	0

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
35a	a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		X
35b	b If "Yes," has it filed a tax return on Form 990-T for this year?		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr ▶ 37a		
37b	b Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
38b	b If "Yes," complete Schedule L, Part II and enter the total amount involved		
39	Section 501(c)(7) organizations. Enter		
39a	a Initiation fees and capital contributions included on line 9		
39b	b Gross receipts, included on line 9, for public use of club facilities		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____; section 4955 ▶ _____		
40b	b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		
40c	c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____		
40d	d Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
40e	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed ▶ <u>None</u>		
42a	The books are in care of ▶ <u>Michael R. Sexton</u> Telephone no. ▶ <u>321-269-1449</u> <u>2021 Alexander Drive</u> Located at ▶ <u>Titusville, FL</u> ZIP + 4 ▶ <u>32796</u>		
42b	b 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)? 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.		X
42c	c At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country: ▶ _____		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ <u>43</u>		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

- 46 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
- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a Did the organization make any transfers to an exempt non-charitable related organization?
- b If "Yes," was the related organization(s) a section 527 organization?
- 49b
- 50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

	Yes	No
46		
47		
48		
49a		
49b		

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

Total number of other employees paid over \$100,000 ▶

- 51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

Total number of other independent contractors each receiving over \$100,000 ▶

Sign Here Under penalties of perjury, I declare that I have examined this return, including attachments, and believe it is true, correct, and complete. Declaration of preparer (other than officer) if self-prepared.

Signature of officer: *[Handwritten Signature]*

Type or print name and title: Harry L. Bryan

Paid Preparer's Use Only

Preparer's signature: *[Handwritten Signature]*

Firm's name (or yours if self-employed), address, and ZIP + 4: Retz Baker, PA, CPA
1415 South Washington
Titusville, FL 32781

May the IRS discuss this return with the preparer shown above? See instructions.

Federal Statements

Statement 1 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid

<u>Name and Address</u>	<u>Relationship to Organization</u>	<u>Class of Activity</u>	<u>Date of Gift</u>			
<u>Description of Property</u>	<u>Cash Contribution</u>	<u>Noncash Contribution</u>	<u>Book Value</u>	<u>Book Value Explanation</u>	<u>FMV Explanation</u>	<u>Purpose</u>
Brevard Central Labor Council	3,812					
I.B.E.W. Per Capita Tax	27,450					
System Council Per Capita Tax	40,007					
Total	<u>71,269</u>					

Federal Statements**Statement 2 - Form 990-EZ, Part I, Line 16 - Other Expenses**

<u>Description</u>	<u>Amount</u>
Expenses	\$
Travel	3,117
Lodging	3,167
Meals	1,401
Miscellaneous	2,565
Donations	1,005
Bank service charges	60
Postage	116
Storage	108
Licenses and taxes	445
Telephone	1,725
Total	<u>\$ 13,709</u>

Statement 3 - Form 990-EZ, Part II, Line 26 - Total Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
Payroll Taxes Payable	\$ 593	\$ 798
	<u>593</u>	<u>798</u>

3769 I.B.E.W. Local 1908

59-6133820

FYE: 5/31/2009

8/14/2009 8:24 AM

Federal Statements

Form 990-EZ, Part II, Line 23 - Land and Buildings

<u>Description</u>	<u>Beginning of Year</u>	<u>Accumulated Depreciation</u>	<u>End of Year</u>	<u>Accumulated Depreciation</u>
Computers	\$	\$	\$ 1,590	\$
Furniture, Fixtures & Equipment			1,724	
Accumulated depreciation				3,314
Total	\$ <u>0</u>	\$ <u>0</u>	\$ <u>3,314</u>	\$ <u>3,314</u>