SCANNET AIR 07 MM

Department of the Treasury

A. Fartha 2004 calandar was as tax

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)

OMB No 1545-0047

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

Open to Public Inspection

A	For the 2t	but calendar year, or lax year beginning SEP 1, 2004	ano er	naing AUG 31	, 200	13
В	Check if applicable	Please C Name of organization			O Employ	er identification number
[3	Address change	label or CIVIC BUILDERS, INC.			04-	-3635313
뜯	Name	point or type Number and street (or P.O. box if mail is not delivered to street address		Do am fauito		one number
岸	ichange Initial return	Specific 160 BROADWAY, EAST BUILDING - SU		900 Room/suite		2-870-3145
F	Final	Instruc-		700	F Accounting	
┌	—lreturn —lAmende —lreturn					afy) ▶
F	Applicate	 Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable tru 	sts	Hand Lare not app		section 527 organizations.
	ponumg	must attach a completed Schedule A (Form 990 or 990-EZ).		H(a) Is this a group		
G	Website:	▶HTTP://WWW.CIVICBUILDERS.ORG		H(b) If Yes, enter n		
J	Organizat	tion type (check only one) \triangleright X 501(c) (3) \triangleleft (insert no) 4947(a)(1) or	527	H(c) Are all affiliates	included?	
K	Check her	re In the organization's gross receipts are normally not more than \$25,000	The	(If "No," attach a H(d) Is this a separat		ed by an or-
		ion need not file a return with the IRS; but if the organization received a Form 990 Pai		ganization cove	red by a gro	oup ruling? Yes X No
	ın the mai	II, it should file a return without financial data Some states require a complete retur	n	I Group Exemption	<u>n Number</u>	<u> </u>
					-	nization is not required to attach
, , , ,		eipts: Add lines 6b, 8b, 9b, and 10b to line 12 > 3, 733, 18		Sch. B (Form 9	90, 990 -E Z,	or 990-PF)
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund	Bala	nces		
	1	Contributions, gifts, grants, and similar amounts received.	1	1 2 275 2	00	
	1	Direct public support	1a	3,075,0	00.	
	1	Indirect public support	1b	10.0	-	
	C	Government contributions (grants)	10	10,0		2 005 000
		Total (add lines 1a through 1c) (cash \$ 3,085,000 noncash \$.)	
		Program service revenue including government fees and contracts (from Part VII, III	16 93)		- 2	
		Membership dues and assessments	•		3	10 405
	l .	Interest on savings and temporary cash investments			. 4	-
	5 6 a	Dividends and interest from securities	60	ı		<u>'</u>
		Less: rental expenses	6a 6b	 		
		Net rental income or (loss) (subtract line 6b from line 6a)	OU	<u> </u>	6	
	7	Other investment income (describe	•) 7	
Revenue	8 a	Gross amount from sales of assets other (A) Securities		(B) Other	- ' ·	
Š		than inventory	8a	19700.0.		
æ	b	Lass Cost of Man-Basis and sales expenses	8b			
		Gain or (loss) (attach schedule)	8c			
	l la	Net gain or (Loss) (pombins in 8 e 8c, columns (A) and (B))			. 8	d
		Net gain or (loss) (pegnbinshipe 8c, columns (A) and (B))	here I	▶ 🗀		
	a	Gross revenue (not including \$ of contributions		•	Ì	
	11 0	OODEN, IUT.	9a			
	L_b_	Lose-direct expenses other than fundraising expenses	9b			
	1	Net income or (loss) from special events (subtract line 9b from line 9a)	1 1		. 9	<u>c</u>
	1	Gross sales of inventory, less returns and allowances	10a		<u></u> [
		Less. cost of goods sold	10b			
	1	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b fro	m line	10a)	10	
		Other revenue (from Part VII, line 103)			1	
		Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	· · ·	_ 	12	1 11 11 11 11
S	13	Program services (from line 44, column (B))	•	•	1;	54 045
Expenses	14 15	Management and general (from line 44, column (C)) Fundraising (from line 44, column (D))			. 14	60.060
ď	16		•		15	
m		Payments to affiliates (attach schedule) Total expenses (add lines 16 and 44, column (A))	•	•	11	4 0 6 0 4 4 0
		Excess or (deficit) for the year (subtract line 17 from line 12)		 	18	0.00
ats	19	Net assets or fund balances at beginning of year (from line 73, column (A))		•	19	
Net Assets	20	Other changes in net assets or fund balances (attach explanation)	•		20	
٩		Net assets or fund balances at end of year (combine lines 18, 19, and 20)			. 21	4 014 072
4230 01-1	mi -		ruction	S.		Form 990 (2004)

	Do not include amounts reported on line	l) organı	(A) Total	(B) Program	(D) are required for section trusts but optional for oth (C) Management	n 501(c)(3) Page : ers. (D) Fundraising
	6b, 8b, 9b, 10b, or 16 of Part I Grants and allocations (attach schedule)	 -		services	and general	(b) rundraising
42	(cash \$ noncash \$	22				
23		23				
24	Benefits paid to or for members (attach schedule)	24				
25	Compensation of officers, directors, etc	25	142,500.	121,125.	11,400.	9,975.
26	Other salaries and wages	26	361,759.	307,495.	28,941.	25,323.
27	Pension plan contributions	27				
28	Other employee benefits	28				
29	Payroll taxes	29	33,308.	28,310.	2,666.	2,332.
30	Professional fundraising fees	30				
31	Accounting fees	31	27,913.	26,239.	837.	837.
32	Legal fees	32	16,804.	15,796.	504.	504.
33	Supplies	33	15,340.	10,738.	2,301.	2,301.
34	Telephone	34	16,474.	11,532.	2,471.	2,471.
35	Postage and shipping	35	4,794.	3,356.	719.	719.
36		36	35,124.	24,586.	5,269.	5,269.
37	Equipment rental and maintenance	37				
38	Printing and publications	38	5,561.	3,893.	834.	834.
39	Travel	39	14,309.	10,017.	2,146.	2,146.
40	Conferences, conventions, and meetings	40				
41	Interest	41				
42	Depreciation, depletion, etc. (attach schedule)	42	168,438.	165,070.	1,684.	1,684.
43	Other expenses not covered above (itemize)					
а		43a				
þ		43b				
C		43c				
d	CDE CMAMENTANM 1	43d	F26 70F	407 640	14 572	14 574
e	SEE STATEMENT 1 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	43e	526,795.	497,648.	14,573. 74,345.	14,574.
		44	1,309,119.	1,225,805.	14,345.	68,969.
	nt Costs. Check Light of you are following SOP 98		indrajaina naljojtotion ron	arted in (D) Dragram assure	.a .	Yes X No
MIG	any joint costs from a combined educational campaig			orteo iii (b) Program service		162 [V] MO
		tc ¢	/:		roaram conjigas ¢	•
If "Y		ts \$		i) the amount allocated to P		;
# "Y	the amount allocated to Management and general \$; and (i			;
	the amount allocated to Management and general \$ art III Statement of Program Service		; and (i	i) the amount allocated to P		· · · · · · · · · · · · · · · · · · ·
	the amount allocated to Management and general \$ art III Statement of Program Service at is the organization's primary exempt purpose?		; and (i	i) the amount allocated to P		Program Service
HY White SE	the amount allocated to Management and general \$ art ## Statement of Program Service at is the organization's primary exempt purpose? E STATEMENT A rganizations must describe their exempt purpose achievement	s in a clea	; and (i	i) the amount allocated to P v) the amount allocated to F ie number of clients served, publi	undraising \$	Program Service Expenses
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White SE All o lead to c	the amount allocated to Management and general \$ Cart HI Statement of Program Service at is the organization's primary exempt purpose? E STATEMENT A Triggalizations must describe their exempt purpose achievement evenents that are not measurable (Section 501(c)(3) and (4) organizations to others) SEE STATEMENT 2 Other program services (attach schedule) Total of Program Service Expenses (should equal lies.)	s in a clea	; and (i) complishments r and concise manner State tr s and 4947(a)(1) nonexempt cr (G) (G) (G)	i) the amount allocated to P v) the amount allocated to F ine number of clients served, publicantable trusts must also enter the rants and allocations \$	undraising \$ cations issued, etc. Discuss e amount of grants and	Program Service Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)

Part IV Balance Sheets

	ere required, attached schedules and amounts within the description column uld be for end-of-year amounts only.	(A) Beginning of year		(B) End of year
45	Cash - non-interest-bearing	68,768.	45	41.882
46	Savings and temporary cash investments	1,073,384.	46	41,882 1,539,256
47 a	Accounts receivable			
4/ a		25,833.	47c	87,546
48 a	Pledges receivable 48a			
70 "		1	48c	
49	Grants receivable		49	2,010,000
50	Receivables from officers, directors, trustees,			_ <u>.</u>
	and key employees		50	
Assets p				
SS D	Less: allowance for doubtful accounts]	51c	
52	Inventories for sale or use		52	
53	Prepaid expenses and deferred charges	6,917.	53	7,524
54	Investments - securities		54	
55 a	Investments - land, buildings, and			
İ	equipment. basis 55a	_		
	Lancación de Caración de Carac			
	Less: accumulated depreciation		55c 56	
56	Investments - other Land, buildings, and equipment basis 57a 4,564,237		50	
57 a	Land, buildings, and equipment basis 57a 4,564,237. Less accumulated depreciation STMT 3 57b 100,432.	4,300,492.	57c	4,463,805
58	Other assets (describe SEE STATEMENT 4)	326,537.	58	576,131
59	Total assets (add lines 45 through 58) (must equal line 74)	5,801,931. 49,613.	59	8,726,144 71,841
60	Accounts payable and accrued expenses	49,613.	60	71,841
61	Grants payable		61	
62	Deferred revenue	<u></u>	62	
<u>ĕ</u> 63	Loans from officers, directors, trustees, and key employees		63	
	a Tax-exempt bond liabilities		64a	
י ל בֿ	b Mortgages and other notes payable	3,755,431.	64b	3,910,580
65	Other liabilities (describe SEE STATEMENT 6)	346,879.	65	729,650
66	Total liabilities (add lines 60 through 65)	4,151,923.	66	4,712,071
Orga	nizations that follow SFAS 117, check here			
_	69 and lines 73 and 74			
67 68 69 0 rga 70 71 72 73 73 73 73 73 73 73 73 73 73 73 73 73	Unrestricted	1,550,008.	67	2,301,169
68	Temporarily restricted	100,000.	68	1,712,904
69	Permanently restricted		69	
S Orga	nizations that do not follow SFAS 117, check here 🕨 🔲 and complete lines			
	70 through 74.			
2 70	Capital stock, trust principal, or current funds		70	
g 71	Paid-in or capital surplus, or land, building, and equipment fund		71	
72	Retained earnings, endowment, accumulated income, or other funds		72	
73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72;		:	
Ì	column (A) must equal line 19, column (B) must equal line 21)	1,650,008.		4,014,073
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	5,801,931.	74	8,726,144

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments

	990 (2004) CIVIC BUILDERS, INC. 04-3635	313		Page 5
Pa	TVI Other Information		Yes	+
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	<u> </u>	<u>X</u>
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes," attach a conformed copy of the changes			
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year?	79		X
	If "Yes," attach a statement			
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership,			
	governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		_X_
b	The state of the s			
-	and check whether it is exempt or nonexempt.		٠.	
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81a 0.			
b	Did the organization file Form 1120-POL for this year?	81b]	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than			
0 μ u	fair rental value?	82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an			
U	N/A		·	
D2 ~	expense in Part II (See instructions in Part III.)	83a	Х	
83 a		83b	X	
d o a c	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	84a	 -	X
84 a	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not	048		
b	NT / 7	84b	į ·	ĺ
05		85a		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85b		 -
p	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	030		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax			
	owed for the prior year Dues assessments and similar amounts from members 85¢ N/A			
C	200, 400000110110, 4110011011011011011011011011011011011011			
a	Cooled Total of Total		Ì.	
6	Aggregate nondestable annual to the state of			
f	Tanada di tanada			
g	2000 till Vigamination (v) till 1 til	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues			١
	allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12			
b	Gross receipts, included on line 12, for public use of club facilities			
87	501(c)(12) organizations. Enter a Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,			
	or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?			
	If "Yes," complete Part IX	88		X
89 a	501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under.			
	section 4911 ► 0 • ; section 4912 ► 0 • ; section 4955 ► 0 •		:	ĺ
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			1
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?			
	If "Yes," attach a statement explaining each transaction	89b		LX_
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			_
	sections 4912, 4955, and 4958			0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
90 a	List the states with which a copy of this return is filed ► NEW YORK			
b	Number of employees employed in the pay period that includes March 12, 2004			3
91	The books are in care of ► FRANK BUCCOLA Telephone no. ► 212-87	0-3	145	
	Located at ► 160 BROADWAY, EAST BUILDING #900, NEW YORK, NY ZIP+4 ► 1	003	8	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here		▶[
	and enter the amount of tax-exempt interest received or accrued during the tax year	<u> N/</u>	<u> </u>	
42304 01-13-	1 05	Forr	n 990	(2004)

Part	Analysis of income-Producing					
Note: E	nter gross amounts unless otherwise		business income		y section 512, 513, or 514	(E)
ındicate	ed.	(A) Business	(B)	(C) Exclu-	(D)	Related or exempt
93 Pro	gram service revenue	code	Amount	sion code	Amount	function income
	ONSULTING FEES			- Loue		72,250.
						
	EVELOPMENT FEE					43,275.
c <u>R</u>	ENTAL INCOME					513,718.
d		i l		1 1		
е —						
	dicare/Medicaid payments		·			
	· •	···-	 	- 		
	s and contracts from government agencies					
	mbership dues and assessments					
95 Inte	rest on savings and temporary cash investments			14	17,405.	
96 Divi	dends and interest from securities	ł I				
97 Net	rental income or (loss) from real estate					······································
	t-financed property					
	· · · · · · · · · · · · · · · · · · ·					
	debt-financed property					
98 Net	rental income or (loss) from personal property					
99 Oth	er investment income					
100 Gair	or (loss) from sales of assets					
	er than inventory					
	income or (loss) from special events					
						
	ss profit or (loss) from sales of inventory					
	er revenue:	1		1		
a <u>M</u>	ISCELLANEOUS					1,536.
b		1		1 1		
C						
d						
						
e		<u></u>			17 405	620 770
	total (add columns (B), (D), and (E))			0.	17,405.	630,779.
	II (add line 104, columns (B), (D), and (E))				▶_	648,184.
	ne 105 plus line 1d, Part I, should equal the amo					
Part V	Relationship of Activities to the	Accomplish	ment of Exen	npt Purpos	ses (See page 34 of the in	nstructions.)
Line No.	Explain how each activity for which income is repo	orted in column (E) of Part VII contribu	ited importantly	to the accomplishment of	the organization's
\blacksquare	exempt purposes (other than by providing funds f	or such purposes			,	
	SEE STATEMENT 8	· · · · · · · · · · · · · · · · · · ·				
			· · · · · · · · · · · · · · · · · · ·			
						
						
FTE TO		 				
Part I		Subsidiaries		rded Entiti		structions.)
Nama	(A) (B) address, and EIN of corporation, Percentage of	1	(C) ature of activities		(D) Total income	(E)
	tnership, or disregarded entity ownership interes		iture of activities	ļ	Total income	End-of-year assets
		%				
		%				
						
		%				
		%			<u></u>	
Part X	Information Regarding Transfer	<u>s Associated</u>	with Person	al Benefit	Contracts (See page 3	34 of the instructions)
(a) Did	the organization, during the year, receive any funds, o	directly or indirectly	v, to pay premiums	on a personal b	enefit contract?	Yes X No
	the organization, during the year, pay premiums, dire				-	Yes X No
	"Yes" to (b), file Form 8870 and Form 4720 (see		a porounar conone	Contract	• • • • •	
	Under penalties of penury. I declare that I have examined this	s return including acc	omnanving schedules	and statements an	d to the hest of my knowledge	and helief it is true
Piease	Under penalties of perjury, I declare that I have examined this correct, and complete Declaration of preparer (other than off			arer has any know	ledge	المعام ما
Sign			127/de	_CH	, vavia	vinansky
Here	Signature profficer	Dat	e	Type or print n		· · ·
				Date /	Check if P	reparer's SSN or PTIN
Doi:	Preparer's Preparer's	7	•	7 7 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	L coH-	•
Paid	signature / Mente / Service	T	4	6/19/06	self-	•
Paid Preparer's	signature / Musuu / Serius / S	CPA'S T	I.P	6/19/06	employed >	·
_	Signature Alleniu Service Firm's name (or LUTZ AND CARR, vours if	CPA'S L	LP	6/19/06	employed ►	2 2 2 60
Preparer's	Signature Alleniu Service Firm's name (or LUTZ AND CARR, vours if	STREET	LP	6/19/06	employed >	7 2299

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

2004

Department of the Treasury Internal Revenue Service Name of the organization

over \$50,000

CIVIC BUILDERS, INC.

Employer identification number 04 3635313

Part ! Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions List each one. If there are none, enter "None.") (b) Title and average hours per week devoted to d) Contributions to (e) Expense account and other allowances (a) Name and address of each employee paid employee benefit plans & deferred (c) Compensation more than \$50,000 position compensation ANNIE SHAPIRO TIRSCHWELL REAL EST. DIR 160 BROADWAY, EAST BUILDING, #900, NEW YORK, NY 10038 40 115,417 0. 6,492. JILL CRAWFORD PROJ. MANAGER 160 BROADWAY, EAST BUILDING, #900, NEW YORK, NY 10038 72,708. 40 5,153. 1,969. DANIEL DECKMAN COORD. MARKET 160 BROADWAY, EAST BUILDING, #900, NEW YORK, NY 10038 40 50,167. 10,305 2,118. BRENDA SOLOMON PROJ MANAGER 160 BROADWAY, EAST BUILDING, #900, NEW OYRK, NY 10038 40 3,897 65,422 342. Total number of other employees paid

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms) If there are none,	enter "None")	
(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
TANENBAUM-HARBER CO., INC.		
320 WEST 57TH STREET, NEW YORK, NY 10019	INSURANCE SERVICES	145,320.
TITLE ASSOCIATES, INC.		
825 THIRD AVENUE, NEW YORK, NY 10022	TITLE SEARCH SERVICES	60,719.
HIRSCHEN & SINGER, LLP	_	
902 BROADWAY, 13TH FLOOR, NEW YORK, NY 10010	LEGAL SERVICES	134,895.
GRAN ASSOCIATES	_	
29 BROADWAY, 28TH FLOOR, NEW YORK, NY 10006	ARCHITECTURAL SERVICES	630,148.
GEORGIA LEVENSON KEOHANE		
269 WEST ROCK AVENUE, NEW HAVEN, CT 06515	CONSULTING SERVICES	59,880.
Total number of others receiving over \$50,000 for professional services • 0		-
AND TO BE AND THE RESERVE OF THE PARTY OF TH		

23101/11-24-04 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2004

Schedule A (Form 990 or 990-EZ) 2004 CIVIC BUILDERS, INC.	<u>04-3635</u>	<u> 313</u>	Pag	je 2
Part III Statements About Activities (See page 2 of the instructions.)		Y	'es l	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence				
public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the			İ	
lobbying activities \$\$ (Must equal amounts on line 3	8, Part VI-A,			
or line i of Part VI-B)	 -	1		X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations check	king			
"Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities				
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contrib				
trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which an				
person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "I attach a detailed statement explaining the transactions.) SEE STATEMENT 9	res,	1	-	
a Sale, exchange, or leasing of property?		†	1	X
a Sale, exchange, or leasing or property?		?a	——	Δ_
b Lending of money or other extension of credit?	,	2b	.	X
b Lending of filology of other extension of cledit?	٠٠ ا	"	+	
c Furnishing of goods, services, or facilities?	,	2c	.	X
trumsting or goods, services, or facilities.		-	- -	<u></u>
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	,	a l	x	
a raymont of componentian (or paymont of formula community of expanses in more than \$1,000):		<u>"</u>	-	
e Transfer of any part of its income or assets?	2	e		X
		_		
3 a Do you make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3	a		X
b Do you have a section 403(b) annuity plan for your employees?				X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice		7		
on the use or distribution of funds?	4	a	;	X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4			X
Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)				_
Reason to Non-Private Poditidation Status (see pages 3 through 6 of the instructions.)				
The organization is not a private foundation because it is: (Please check only ONE applicable box.)				
5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i).				
6 A school Section 170(b)(1)(A)(ii). (Also complete Part V.)				
7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(III).				
A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).				
9 A medical research organization operated in conjunction with a hospital 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 Section 1	J70(b)(1)(A)(Ⅳ)			
(Also complete the Support Schedule in Part IV-A.)				
11a An organization that normally receives a substantial part of its support from a governmental unit or from the general p	oublic.			
Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)				
11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)				
An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, at				
receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33				
its support from gross investment income and unrelated business taxable income (less section 511 tax) from business	ses acquired			
by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A)				
An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization	anizationa dacadhad	in:		
(1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section		M1.		
Provide the following information about the supported organizations. (See page 5 of the instruction				
To the time time time time time dispersion digunizations. (One page of or the mortaleton		l ine r	umber	
(a) Name(s) of supported organization(s)	(0)		above	
]			
				_
				_
14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)				
	nedule A (Form 990 c	0 190	J-EZ) 2(004
 -	,		,	

	rt IV-A Support Schedule (C Note: You may use the	complete only if you che e worksheet in the insti	ecked a box on line 10	, 11, or 12.) Use cash	method of acc	ountin	ng. Duntina.
	idar year (or fiscal year						
15	Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	(a) 2003 1,395,118.	(b) 2002 602,500.	(c) 2001 535,250.	(d) 2000		(e) Total 2,532,868
16	Membership fees received						
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	276,409.	114,450.	45,864.			436,723.
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	47,599.	0.	1,008.			48,607.
19	Net income from unrelated business				:		
20	activities not included in line 18 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
21	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge						
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets		2,834.	SEE STATEME	NT 10		2,834.
23	Total of lines 15 through 22	1,719,126.	719,784.	582,122.		0.	2,834. 3,021,032.
24	Line 23 minus line 17	1,442,717.	605,334.	536,258.			2,584,309.
25	Enter 1% of line 23	17,191.	7,198.	5,821.		[
26	Organizations described on lines 1					26a	51,686.
p	Prepare a list for your records to sho		•	,			
	unit or publicly supported organizati			ded the amount shown in	_		1 101 570
_	Do not file this list with your return.		• • • • • • • • • • • • • • • • • • • •			26b	1,191,570. 2,584,309.
	Total support for section 509(a)(1) t		40 600			26c	2,304,307
a	Add Amounts from column (e) for I	22		1,191,57	<u> </u>	26d	1,243,011.
	Public support (line 26c minus line 2					26e	1,341,298
- F	Public support percentage (line 26	•				261	51.90169
27	Organizations described on line 12						
b	records to show the name of, and to such amounts for each year (2003)	ital amounts received in ea N/A (2002) hat was received from each	ach year from, each "disqu (20 th person (other than "dis	ualified person. " Do not fi 201) qualified persons"), prepa	le this list with yo (200 are a list for your r	ur retur 10) ecords t	n. Enter the sum of
	described in lines 5 through 11, as v the larger amount described in (1) o	vell as individuals) Do no r (2) , enter the sum of the	t file this list with your re se differences (the exces	t urn. After computing the samounts) for each year	e difference betwe . N/A	en the a	
C	Add Amounts from column (e) for li	(2002) ines. 15		16			
	17	20		21		27¢	N/A
d	Add Line 27a total	an	d line 27b total			27d	N/A
е	Public support (line 27c total minus	line 27d total)	,		. ►	27e	N/A
f	Total support for section 509(a)(2) t				N/A		31/3
g	Public support percentage (lin	· ·	- •	==		279	N/A % N/A %
28 1	Investment income percentage Jnusual Grants: For an organization o show, for each year, the name of the	n described in line 10, 11.	or 12 that received any ii	nusual grants during 200	0 through 2003.	27h orepare	a list for your records
y	o snow, for each year, the name of the our return. Do not include these gran 1 12-03-04	ts in line 15	ONE	r a oner description of the	e nature of the gra		ile A (Form 990 or 990-EZ) 200

Schedule A (Form 990 or 990-EZ) 2004

34a

34b

34 a Does the organization receive any financial aid or assistance from a governmental agency?
 b Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either 34a or b, please explain using an attached statement.

1975-2 C B. 587, covering racial nondiscrimination? If "No," attach an explanation

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4 05 of Rev. Proc. 75-50,

Sc	hedule A (Form 990 or 990-Ez	2) 2004 CIVIC BUI	LDERS, INC.				04	1-3635 313 Page
P	rart VI-A Lobbying (To be comple	Expenditures by El dted ONLY by an eligible organ	ecting Public Cha	arities (See pa 68)	ge 9 of the instru	ctions)		N/A
<u>Ch</u>	eck 🕨 a 🔃 if the organi	zation belongs to an affiliated	group Chec	k ▶ b 🔲 f	you checked "a"	and "limited	contro	rprovisions apply
		imits on Lobbying I			Aff	(a) iliated group	•	(b) To be completed for ALL
_	(The te	rm "expenditures" means am	ounts paid or incurred)			totals		electing organizations
00	T-4-11-61-2	An and the second			1	A/N		
36		to influence public opinion (g			36			<u> </u>
37		to influence a legislative body	(direct lobbying)		37			ļ
38	Total lobbying expenditures	· · · · · · · · · · · · · · · · · · ·			38			
39 40	Other exempt purpose exper			-	39			
41		ditures (add lines 38 and 39)			40			
71	Lobbying nontaxable amount fit the amount on line 40 is -							
	Not over \$500,000	***************************************	g nontaxable amount is					
	Over \$500,000 but not over \$1,00		15% of the excess over \$500	.]				
	Over \$1,000,000 but not over \$1,5		10% of the excess over \$1,00		41			
	Over \$1,500,000 but not over \$17		5% of the excess over \$1,500		-7'			
	Over \$17,000,000	** ***		.]	-]
42	Grassroots nontaxable amou		• • • • • • • • • • • • • • • • • • • •		42			
43	Subtract line 42 from line 36		nan line 36		43			
44	Subtract line 41 from line 38	Enter -0- if line 41 is more th	nan line 38		44			
								·
	Caution: If there is an amo	ount on either line 43 or lin	ne 44, you must file For	m 4720.			-	
		below. See the ins	tructions for lines 45 thro Lobbying Ex	ugh 50 on page 1 penditures During			-	N/A
	endar year (or al year beginning in)	(a) 2004	(b) 2003	(c) 2002		(d) 2001		(e) Total
45	Lobbying nontaxable							1000
	amount							0.
46	Lobbying ceiling amount							
	(150% of line 45(e))	·						0.
47	Total lobbying					-		
	expenditures							0.
48	Grassroots nontaxable			ľ				
40	amount					· · · · · · · · · · · · · · · · · · ·		0.
43	Grassroots ceiling amount (150% of line 48(e))	<u> </u>		•			-	-
50	Grassroots lobbying		***************************************	ii				0.
•	expenditures				ļ			0.
P		Activity by Nonelect	ing Public Charit	ies				
	(For reporting o	nly by organizations that did	not complete Part VI-A) (S	See page 11 of the	instructions)			N/A
Duri	ng the year, did the organizati							
	ence public opinion on a legis				•	Yes	No	Amount
а	Volunteers .							
b	Paid staff or management (Inc	clude compensation in expen	ses reported on lines c thi	rough h.)	-			
	Media advertisements]	
	Mailings to members, legislate]	
	Publications, or published or	•		-				
	Grants to other organizations							
	Direct contact with legislators							·
	Rallies, demonstrations, semi Total lobbying expenditures (/		lectures, or any other me	ans				
•	If "Yes" to any of the above, al		a detailed description of th	ne lohbuna sahuh		- L	1	0.
4231 11-24	41 I-04		astance description of the	io ioboying activiti		Caba	dulc A	/Form 000 or 000 F7\ 000
	· - ·					Still	uuit A	(Form 990 or 990-EZ) 2004

Schedule A (Form 990 or 990-EZ) 2004

Par				d Relationships With Noncha	ritable		
		zations (See page 11 of the inst					
51		directly or indirectly engage in any of	- •	-			
		section 501(c)(3) organizations) or i		olitical organizations?			T-1
а	· · · · · ·	ganization to a noncharitable exemp	t organization of:		<u> </u>	Yes	No
	(i) Cash				51a(i)	4	X
	(ii) Other assets				a(ii)	—	X
b	Other transactions:					ļ	Í
	• •	ets with a noncharitable exempt orga			b(i)	↓	X
	• •	a noncharitable exempt organization			. <u>b(ii)</u>	↓	X
		ent, or other assets				↓	X
	(iv) Reimbursement arrangeme	ents			b(iv)	↓	X
	(v) Loans or loan guarantees				<u>b(v)</u>	↓	X
	- '	r membership or fundraising solicital			b(vi)	}	X
C		, mailing lists, other assets, or paid e			<u>C</u>	<u> </u>	X
d				always show the fair market value of the			
	~	s given by the reporting organization		· · · · · · · · · · · · · · · · · · ·		/-	
		ment, show in column (d) the value o	f the goods, other assets, o	or services received		N/A	<u> </u>
(a)		(C)		(d)			4 -
Line	10. Amount involved	Name of noncharitable ex	empt organization	Description of transfers, transactions, a	no snanng ai	rrangen	nents
							
							
							
		<u> </u>					
					<u> </u>		
52 a	Is the organization directly or in	directly affiliated with, or related to, o	one or more tax-exempt org	janizations described in section 501(c) of the	18		
	Code (other than section 501(c))(3)) or in section 527?	** * * * * * * * * * * * * * * * * * * *	. ▶	Yes	X	No
b	If "Yes," complete the following	schedule: N/A					
	(a)	(b)	(c)			
	Name of or	ganization	Type of organization	Description of relation	nship		
	<u> </u>						
							
-							
423151 11-24-0)4			Schedule A (F	orm 990 or 9	390-EZ	2004

2004 DEPRECIATION AND AMORTIZATION REPORT
FORM 990 PAGE 2

990

			•	*	•	·······								 	
Amount Of Depreciation	2,537	a	88,069.	2,354.	92,960.									 	
Current Sec 179		-			0						-			 ····	
Accumulated Depreciation	297.		7,175.		7,472.										
Basis For Depreciation	10,935.	860,980.	3677699.	14,623.	4564237.		•	_							
Reduction In Basis					0								-		
Bus % Excl			•					•							
Unadjusted Cost Or Basis	10,935.	860,980.	3677699.	14,623.	4564237.	<u>.</u>					-			•	•
No o	16			9									//	 	
Life	3.00	;······	40.0016	2.00		••••							· · ·	 -	
Method		្ន											-		`
Date Acquired	VARIESSL	080104L	VARIESSL	VARIESSE	:									 ······	
Description	1COMPUTER	ZLAND	BUILDING	6DFFICE EQUIPMENT											
Asset No	1		m 	4 0					-	·—·			· · · · · · · · · · · · · · · · · · ·		,
												-			

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

FORM 990	ОТНЕ	STATEMENT 1		
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
				TONDIMIDING
DUES AND				
SUBSCRIPTIONS	2,634.	1,844.	395.	395.
ADMINISTRATIVE FEES	1,239.	867.	186.	186.
INSURANCE	55,435.	43,239.	6,098.	6,098.
BANK CHARGES	590.	402.	94.	94.
INTEREST	272,969.	272,969.		
NON-RECOVERABLE		·		
DEVELOPMENT	1,672.	1,672.		
MISCELLANEOUS	16,944.	11,861.	2,541.	2,542.
PROFESSIONAL FEES	175,312.	164,794.	5,259.	5,259.
TOTAL TO FM 990, LN 43	526,795.	497,648.	14,573.	14,574.

DESCRIPTION OF PROGRAM SERVICE ONE

IN FISCAL YEAR 2005, CIVIC BUILDERS BEGAN CONSTRUCTION ON ITS SECOND CHARTER DEVELOPMENT, BRONX LIGHTHOUSE CHARTER SCHOOL, WHICH WILL OPEN FOR SCHOOL YEAR 2006-2007. THE PROJECT IS CURRENLY SCHEDULED TO BE COMPLETED ON TIME AND UNDER BUDGET CIVIC PLACED AN ADDITIONAL PROJECT UNDER PURCHASE CONTRACT: PARKCHESTER PREPARATORY CHARTER SCHOOL LOCATED AT 900 VAN NEST AVENUE IN PARKCHESTER, BRONX, NEW YORK. THE SCHOOL CONTINUES TO WAIT FOR NEW YORK CITY DEPARTMENT OF EDUCATION COMMITMENT FOR FUNDING. CIVIC ALSO SERVED AS PROJECT MANAGER FOR THE RENOVATION OF THE EXCELLENCE CHARTER SCHOOL OF BEDFORD STUYVESANT, OVERSEEING ALL ASPECTS OF THE PRECONSTRUCTION AND CONSTRUCTION PROCESS. CIVIC STRENGTHENED ITS PIPELINE OF FUTURE CLIENTS IN 2005, AND WE ARE CURRENTLY IN THE SITE SEARCH STAGE FOR DEMOCRACY PREPARATORY, UNCOMMON SCHOOLS AND VILLAGE ACADEMIES. IN 2005, CIVIC ALSO STRENGTHENED ITS COLLABORATIVE PARTNERSHIP WITH THE NEW YORK CITY DEPARTMENT OF EDUCATION.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A		1,225,805.

FORM 990 DEPRECIATION OF ASSE	TS NOT HELD FOR	INVESTMENT	STATEMENT	3
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE	3
COMPUTER LAND BUILDING OFFICE EQUIPMENT	10,935. 860,980. 3,677,699. 14,623.	2,834. 0. 95,244. 2,354.	8,10 860,98 3,582,45 12,26	30. 55.
TOTAL TO FORM 990, PART IV, LN 57	4,564,237.	100,432.	4,463,80	
FORM 990 O	THER ASSETS		STATEMENT	4
DESCRIPTION			AMOUNT	
DEFERRED FINANCING ACCUM. AMORTIZATION - DEFERRED FIN DEFERRED LEASING COSTS ACCUM. AMORTIZATION - DEFERRED LEA CONSTRUCTION REIMBURSEMENT RECEIVA UTILITY DEPOSIT SECURITY DEPOSIT DEVELOPMENT COSTS	SING COSTS		221,70 <135,48 31,54 <1,70 371,63 1,51 10,00 76,92	5.> 9. 9.> 0.
TOTAL TO FORM 990, PART IV, LINE 5	8. COLUMN B		576,13	

FORM 990		OTHER NO	res and	LOANS PAY	ABLE	STATEMENT
LENDER'S	NAME	TERM	S OF REI	PAYMENT		
SEE STATE	EMENT B					
DATE OF NOTE	MATURITY DATE	ORIGINAI LOAN AMOUN		INTEREST RATE		
			0.	.00%		
SECURITY	PROVIDED BY	BORROWER	PURPOS	SE OF LOAN		
	SHIP OF LEND	<u></u>				
DESCRIPT	ION OF CONSI	DERATION			FMV OF CONSIDERATION	BALANCE DUE
					0.	3,910,58
TOTAL INC	CLUDED ON FOI	RM 990, PAR	r IV, LI	NE 64, CO	LUMN B	3,910,58
	CLUDED ON FOI			NE 64, CO	LUMN B	3,910,58
FORM 990					LUMN B	
FORM 990 DESCRIPTI		OTI	HER LIAE	BILITIES	LUMN B	STATEMENT

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES					STATEMENT 7		
NAME AND ADDRESS			TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB		
DAVID UMANSKY 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING,	#900	CEO 40	142,500.	13,878.	4,221.	
BRIAN OLSON 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING,	#900	CHAIRMAN 1	0.	0.	0.	
D. LESLIE WINTER 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING,	#900	SECRETARY 1	0.	0.	0.	
KELLY WACHOWICZ 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING,	#900	TREASURER 1	0.	0.	0.	
MIMI CORCORAN 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING,	#900	BOARD MEMBER 1	0.	0.	0.	
BRAHM CRAMER 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING,	#900	BOARD MEMBER 1	0.	0.	0.	
JORDAN MERANUS 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING,	#900	BOARD MEMBER 1	0.	0.	0.	
J. DAVID SWEENY 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING,	#900	BOARD MEMBER 1	0.	0.	0.	
MARK VAN BRUNT 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING,	#900	BOARD MEMBER 1	0.	0.	0.	
JAMES WILCOX 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING,	#900	BOARD MEMBER 1	0.	0.	0.	
TOTALS INCLUDED ON	FORM 990,	PART	v :	142,500.	13,878.	4,221.	

FORM 9	90 PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES	STATEMENT	8
LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES		
93A 93A 93B 93B 93B 93B 93C 93C 93C 93C 93C	CONSULTING FEES WERE GENERATED THROUGH SERVICES PROVIDED SCHOOLS AND NOT-FOR-PROFITS THAT CONTRIBUTED TO THE ORGAN EXEMPT PURPOSE. DEVELOPMENT FEE WAS GENERATED IN CONNECTION WITH THE BUIL AT LONGFELLOW AVENUE, WHICH WAS REHABILITATED AND LEASED SCHOOL. THE DEVELOPMENT FEE WAS IN CONNECTION WITH THE OR EXEMPT PURPOSE. RENTAL INCOME IS GENERATED THROUGH A LEASE WITH A CHARTER CONNECTION WITH ITS EXEMPT PURPOSE OF A FACILITIES DEVELO PROVIDES TURNKEY SOLUTIONS FOR NEW YORK CHARTER SCHOOL RENEEDS. MISCELLANEOUS INCOME IS USED TO FURTHER THE ORGANIZATION' PURPOSE	DING LOCATED TO A CHARTER GANIZATION'S SCHOOL IN PER THAT AL ESTATE	t
SCHEDU	LE A STATEMENT REGARDING ACTIVITIES WITH SUBSTANTIAL CONTRIBUTORS, TRUSTEES, DIRECTORS,	STATEMENT	9

DAVID UMANSKY, CEO/EXECUTIVE DIRECTOR, RECEIVED COMPENSATION OF \$142,500. HIS SALARY WAS APPROVED BY THE BOARD AND DEEMED TO BE COMMENSURATE WITH HIS DUTIES.

CREATORS, KEY EMPLOYEES, ETC,. PART III, LINE 2

SCHEDULE A	OTHER INC	S'	TATEMENT 10	
DESCRIPTION	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT
MISCELLANEOUS	0.	2,834.	0.	0.
TOTAL TO SCHEDULE A, LINE 22	0.	2,834.	0.	0.

4562

Department of the Treasury Internal Revenue Service Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

Including information on Listed Property)
 ▶ See separate instructions.
 ▶ Attach to your tax return.

990 2004

Attachment Sequence No 67

OMB No 1545-0172

TILL DELL THE

Business or activity to which this form relates

Identifying number

CIV	VIC BUILDERS, INC.			FOR	M 990 P	AGE 2		<u> [04-3635313</u>
Pai	Election To Expense Certain Prope	rty Under Section 17	9 Note: If you	ı have any listed	property, comp	lete Part V befo	re you comp	lete Part I.
1 1	Maximum amount. See instructions for	or a higher limit for	certain busin	nesses			1	102,000.
2 7	otal cost of section 179 property pla	ced in service (see	Instructions	s)			2	
3 T	Threshold cost of section 179 propert	y before reduction	in limitation				3	410,000.
4 F	Reduction in limitation. Subtract line 3	from line 2. If zero	or less, ent	er-0·			4	· · · · · · · · · · · · · · · · · · ·
5 0	Pollar limitation for tax year Subtract line 4 from In	ne 1 If zero or less, enter	r-0- If marned fi	ling separately, see	instructions .		. 5	
6	(a) Description of	property		(b) Cost (busin	ess use only)	(c) Electer	l cost	
								-
								-
7 L	isted property. Enter the amount from	m line 29			. 7			
	Total elected cost of section 179 prop		s in column (c), lines 6 and	7		8	
	Tentative deduction. Enter the smalle						. 9	
	Carryover of disallowed deduction fro			562			10	
11 E	Business income limitation. Enter the	smaller of busines	s income (no	ot less than zer	o) or line 5		11	
12 5	Section 179 expense deduction. Add	lines 9 and 10, but	t do not ente	er more than lir	ne 11		. 12	
	Carryover of disallowed deduction to				. ▶ 13			
Note	: Do not use Part II or Part III below f	or listed property.	Instead, use	Part V.				
Pa	rt II Special Depreciation Allowar	nce and Other De	preciation (Do not include	listed propert	ty.)		
	Special depreciation allowance for qualified proper						. 14	
15 F	Property subject to section 168(f)(1) e	election (see instruc	ctions)				15	
16 (Other depreciation (including ACRS) (see instructions)					. 16	92,960.
	rt III MACRS Depreciation (Do no			instructions.)				
CHAMMA				ection A				
17 N	MACRS deductions for assets placed	In service in tax y	ears beginni	ng before 2004	.		17	
	f you are electing under section 168(i	-	_	_				
١	vear into one or more general asset a	ccounts, check he	re			▶ ⊑] [
	Section B - Asset	s Placed in Service	e During 20	004 Tax Year L	Jsing the Ger	eral Deprecia	tion Syste	em
	(a) Classification of property	(b) Month and year placed in service	(business/	or depreciation investment use e instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property							
b	5-year property						L	
C	7-year property	_						
d	10-year property						<u> </u>	
е	15-year property							
f	20-year property							
	25-year property				25 yrs.		S/L	
		/			27.5 yrs.	ММ	S/L	
h	Residential rental property	,			27.5 yrs.	MM	S/L	
		/			39 yrs.	ММ	S/L	
i	Nonresidential real property	1				MM	S/L	
	Section C - Assets	Placed in Service	During 200	4 Tax Year Us	sing the Alten	native Depre	iation Sys	tem
20a	Class life						S/L	
b	12-year				12 yrs.		S/L	
С	40-year	/			40 yrs.	MM	S/L	
Pa	rt IV Summary (See instructions.)							
	Listed property. Enter amount from lin	ne 28					21	
	Fotal. Add amounts from line 12, lines		nes 19 and 2	0 ın column (a), and line 21.	•		
	Enter here and on the appropriate line	_				ir	22	92,960.
	For assets shown above and placed i							
	portion of the basis attributable to see	-	,-		23	_		
41625			separate ir	structions.				Form 4562 (2004

P	Listed Propert	musement.))												
_	Note: For any through (c) of S	vehicle for w Section A, all	hich you ar I of Section	B, and Se	ction C i	f applica	ble					plete on	l y 24a, 2	4b, colu	mns (a)
Se	ction A - Depreciation a	nd Other in	formation	(Caution:	See inst	ructions	for limit	for pa	ssenger a	automob	iles.)				
<u>24</u>	a Do you have evidence to s	upport the bu	isiness/inves	tment use o	larmed?	<u> </u>	es _	_ No	24b If "Y	es," is t	<u>he evide</u>	nce writ	ten?	_ Yes [No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Busine investm use perce	ient ,	(d) Cost or other basis	1/50	(e) sis for depi siness/inve use ont	stment	(f) Recovery period	Me	(g) thod/ vention	Depr	(h) eciation uction	Ele secti	(i) ected on 179 ost
25	Special depreciation allo					In servi	ce durin	g the ta	ax		2-			·	
_	year and used more tha					: :	<u> </u>			·	25			<u> </u>	
26	Property used more tha	n 50% in a c	qualified bu		:					, -		1			
_		 	 	_%		 -				 -		 -	·	 	·
		<u> </u>	<u> </u>	_%						<u> </u>		 		 	
_		<u> </u>	L	_%		Ļ_			<u>.</u>	<u> </u>		<u> </u>		L	
<u>27</u>	Property used 50% or le	ess in a qual	rfied busine	ess use:											
_		ļ		%						S/L·		├		Į.	
_				%						S/L·		_		ļ	
_		<u> </u>	<u> </u>	<u>%</u>					_	S/L ·		<u> </u>			
28	Add amounts in column	(h), lines 25	through 27	7. Enter he	re and o	n line 21	, page 1			••	. 28	<u></u>		<u> </u>	
29	Add amounts in column	(i), line 26. E	nter here a	ınd on line	7, page	1							29	Ĺ	
				Section	B - Info	rmation	on Use	of Veh	icles						
lf y	mplete this section for ve you provided vehicles to yose vehicles.												ing this	section fo	or
					(a)	1 0	b)		(c)		d)	1 (e)	(1	Ŋ
30	Total business/investment i	miles driven d	uring the	Ve	hicle	Vet	ncle	Ve	ehicle	Veh	icle	Vet	nicle	Veh	
	year (do not include comr		_												
31	Total commuting miles of										-	T	_		-
	Total other personal (no		-				-	 -	-				_		
-		_	,, ,,,,,,			1						1			
22												 			
33	Total miles driven during					1						1		1	
	Add lines 30 through 32			<u> </u>	1	 			T		r	 		<u> </u>	
34	Was the vehicle available	•		Yes	No_	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?					 	<u> </u>			<u> </u>		ļ	<u> </u>		
35	Was the vehicle used pr		more	Ì	İ							ļ	1		
	than 5% owner or relate	d person?		<u> </u>	ļ					<u> </u>			ļ		
36	Is another vehicle availal	ble for perso	nal	Ī		Į						ŀ	1		
_	use?				<u>L</u>			L							
	swer these questions to oners or related persons.	Section C letermine if y											re not m	ore than	5%
37	Do you maintain a writte	n policy stat	ement that	prohibits	all persor	nal use c	of vehicle	es, incl	uding con	nmuting,	by you	r		Yes	No
	employees?				•										
38	Do you maintain a writte	n policy stat	ement that	prohibits	personal	use of v	ehicles,	except	commut	ing, by y	our				
	employees? See instruct													1	
39	Do you treat all use of ve					,									
	Do you provide more that	•		•		Informat	ion from	VOUL E	molovees	about			•		
•	the use of the vehicles, a					o		,00.0		about				İ	
41	Do you meet the require						tion was					•		-	
41	Note: If your answer to								· ·· ·						
-	7 4 4 4		0, 01 41 13	763, 007	ior comp	nete Sec	uon B it	11100	.Overeo ve	incles.					<u> </u>
	art VI Amortization (a)			(6)	1	(a)			(d)		(0)		 .	(6)	
	Description of	costs	Į.	(b) Date amortization		(C) Amortizab	le		(d) Code	1	(e) Amortiza		Ąr	(f) nortization	
_	Amentization of costs 45:	at booins di	mno va 0'	begins		amount			section		period or per	centage	fo	this year	
<u>42</u>	Amortization of costs that	at begins au	nng your 20	JU4 tax ye	ar:			т							
					 										
								- I							
					ļ								- ·		
	Amortization of costs that Total. Add amounts in co		-	•				<u></u>		<u>_</u>		43			

Civic Builders, INC. EIN: 04.3635313

FORM: 990

Part III: Primary Exempt Purpose

FYE: 8/31/05

Civic Builders, Inc.'s ("Civic Builders") tax exempt purposes are to combat community deterioration,

provide relief to the distressed and underpriveleged, provide social services, advance education, and promote social welfare and lessen the burden of government by promoting the creation of facilities for not-for-profit organizations primarily in low income urban neighborhoods. Civic Builders will further its tax exempt purposes by providing real estate related services to other not-for-profits organizations ("NFP"). A significant number of NFP's are implementing government programs and policies to alleviate social problems addressing, among others, the purposes stated above. However most NFP's lack the real estate expertise and the capacity to analyze, finance, acquire, design, construct, operate and/or maintain facilities to fully implement such programs and policies. Depending upon the needs and capacity of a NFP, Civic Builders will (i) analyze the NFP's facility requirements, (ii) locate appropriate physical spaces for rent or acquisition, (iii) arrange financing for the acquisition of and, if necessary, construction at the identified, location, (iv) renovate and/or newly construct facilities at the identified, final location, and/or (v) provide building management services for the operating not-forprofit ficility. These services will assist a wide range of NFP organizations locate and acquire properties, generally in low income urban neighborhoods, ensure their access to the properties and any necessary construction, perform the construction necessary to maximize their use of the expanded or new facilities, and enable them to run the facilities for their specific not-for-profit uses. Promoting a range of new and expanded NFP facilitie; in low income neighborhoods furthers Civic Builder's tax exempt purposes of providing relief to the underprivileged by providing more and better

social exvices to them and advances education by bringing quality educational options to neighborhoods with underperforming public schools. In addition, the promotion of NFP facilitie: will reduce unemployment, improve job opportunities, provide job training and promote employment through the people who will be employed by the facility, through direct training and employment during the construction phase, and through any direct jobrelated services provided by a NFP. An improved local employment pool and stabilized community will attract new industry as well as retain existing industry and together with better social services and schools will combat community deterioration. The aggregate results of Civic Builders' charitable purposes will serve to assist and encourage urban growth and renewal, promote social welfare and lessen the burdens of government.

CIVIC Builder'S INC

EIN# 04-3635313

FORM: 990

JE. 8-31-05

MORTGAGES AND OTHER NOTES PAYABLE

Page 3, LINE 646

	2005
Mortgage payable, not to exceed \$3,300,000, bearing interest, payable monthly, at the LIBOR daily rate plus 3%. Commencing November 1, 2004, various monthly principal payments are required through its maturity on October 22, 2006 when the remaining unpaid principal balance, approximately \$3,137,000, is due.	\$3,240,380
Promissory note, bearing interest, payable quarterly, at the prime rate plus 3% per annum. The note matures October 15, 2006, when the entire principal balance is due.	235,000
Subordinated mortgage note, payable to the seller of the Long Fellow property, bearing interest at the rate of 7% per annum through maturity on August 20, 2007. The note requires payment of interest only for the first year and monthly payments of \$2,326, including interest and principal, through maturity, when the remaining unpaid principal balance, approximately \$281,000, is due.	294,087
Promissory note, bearing interest at the rate of 5% per annum through maturity during October 2006. The note requires monthly payments of \$791, including interest and principal, through maturity, when the remaining unpaid principal balance, approximately \$85,500, is due.	91,113
Operating line of credit note, payable to the holder of the \$100,000 promissory note, bearing interest at the rate of 5% per annum through its maturity during October 2006. The note requires monthly payments of interest only and is subordinate to the aforementioned \$370,000 note payable.	50,000
payable.	\$3,910,580

	8 (Rev. 12-2004)	Page 2
	are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this bo	
	nly complete Part II if you have already been granted an automatic 3-month extension on a previously filed	Form 8868.
Part I	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1) Additional (not automatic) 3-Month Extension of Time - Must file Original a	nd One Conv
	Name of Exempt Organization	Employer identification number
Type or		Employer identification number
print.	CIVIC BUILDERS, INC.	04-3635313
File by the extended	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only
due date for	100 BROADWAT, BAST BOTTDING - SOTTE 900	(· · · · · · · · · · · · · · · · · · ·
return See	NEW YORK, NY 10038	
	ype of return to be filed (File a separate application for each return):	
X Fo	rm 990	Form 5227
STOP: D	o not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly filed Form 8868.
	ooks are in the care of FRANK BUCCOLA	·
_	hone No. ► 212-870-3145 FAX No. ►	
	organization does not have an office or place of business in the United States, check this box	
box >	is for a Group Return , enter the organization's four digit Group Exemption Number (GEN) If this for part of the group, check this box > and attach a list with the names and EINs of all	
	equest an additional 3-month extension of time until JULY 17, 2006	The indees the extension is for.
5 Fc		AUG 31, 2005
	his tax year is for less than 12 months, check reason: Initial return	Change in accounting period
	ate in detail why you need the extension	
	DDITIONAL TIME IS NEEDED TO COMPILE THE INFORMATION ECESSARY TO COMPLETE THE RETURN.	
	his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nrefundable credits. See instructions	
ta	his application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated payments made. Include any prior year overpayment allowed as a credit and any amount paid eviously with Form 8868	\$
	lance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with upon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	
	Signature and Verification	
it is true,	naties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the formect, and complete, and that I am authorized to prepare this form.	best of my knowledge and belief,
Signatur	Notice to Applicant - To Be Completed by the IRS	Date > 7/3/06
W	e have approved this application. Please attach this form to the organization's return.	
	e have not approved this application. However, we have granted a 10-day grace period from the later of the	
w		e date shown below or the due
	te of the organization's return (including any prior extensions). This grace period is considered to be a valid	
da oti	nerwise required to be made on a timely return. Please attach this form to the organization's return.	extension of time for elections
da oti	nerwise required to be made on a timely return. Please attach this form to the organization's return. e have not approved this application. After considering the reasons stated in item 7, we cannot grant your	extension of time for elections
da oti W	nerwise required to be made on a timely return. Please attach this form to the organization's return. e have not approved this application. After considering the reasons stated in item 7, we cannot grant your by which we are not granting a 10-day grace period.	extension of time for elections TENSION APPROVED request for an extension of time to
da oti W file	nerwise required to be made on a timely return. Please attach this form to the organization's return. e have not approved this application. After considering the reasons stated in item 7, we cannot grant your	extension of time for elections TENSION APPROVED request for an extension of time to
da oti W file	nerwise required to be made on a timely return. Please attach this form to the organization's return. The have not approved this application. After considering the reasons stated in item 7, we cannot grant your at the work with the work of the return for which the cannot consider this application because it was filed after the extended due date of the return for which ther	TENSION APPROVED request for an extension of time to APPRO2615 Vas Equested. FIELD DIRECTOR.
da oti W file	nerwise required to be made on a timely return. Please attach this form to the organization's return. The have not approved this application. After considering the reasons stated in item 7, we cannot grant your at the work with the work of the return for which the cannot consider this application because it was filed after the extended due date of the return for which ther	TENSION APPROVED request for an extension of time to APPROVED request for an extension of time to APPROVED THE TOTAL PROVED THE TOTAL PROVED TOTAL THE TOTAL P
da oti	herwise required to be made on a timely return. Please attach this form to the organization's return. The have not approved this application. After considering the reasons stated in item 7, we cannot grant your so we are not granting a 10-day grace period. The cannot consider this application because it was filed after the extended due date of the return for which ther	TENSION APPROVED request for an extension of time to APPRO2sion vas requested. FIELD DIRECTOR, ISSION PROCESSING, OGDEN Date
da oti	herwise required to be made on a timely return. Please attach this form to the organization's return. The have not approved this application. After considering the reasons stated in item 7, we cannot grant your at the work with the work of the return for which ther	TENSION APPROVED request for an extension of time to APPRO2sion vas requested. FIELD DIRECTOR, ISSION PROCESSING, OGDEN Date
da oti	herwise required to be made on a timely return. Please attach this form to the organization's return. The have not approved this application. After considering the reasons stated in item 7, we cannot grant your state. We are not granting a 10-day grace period. The cannot consider this application because it was filed after the extended due date of the return for which ther By: SUBM The Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extends the one entered above. Name	TENSION APPROVED request for an extension of time to APPRO2sion vas requested. FIELD DIRECTOR, ISSION PROCESSING, OGDEN Date
da oti	herwise required to be made on a timely return. Please attach this form to the organization's return. The have not approved this application. After considering the reasons stated in item 7, we cannot grant your state. We are not granting a 10-day grace period. The cannot consider this application because it was filed after the extended due date of the return for which ther By: SUBM The Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extends the one entered above.	TENSION APPROVED request for an extension of time to APPRO2sion vas requested. FIELD DIRECTOR, ISSION PROCESSING, OGDEN Date
da oti	herwise required to be made on a timely return. Please attach this form to the organization's return. The have not approved this application. After considering the reasons stated in item 7, we cannot grant your at the work was filled after the extended due date of the return for which ther	TENSION APPROVED request for an extension of time to APPRO2sion vas requested. FIELD DIRECTOR, ISSION PROCESSING, OGDEN Date
da oti	herwise required to be made on a timely return. Please attach this form to the organization's return. The have not approved this application. After considering the reasons stated in item 7, we cannot grant your at the action of the return for which the reconsider this application because it was filed after the extended due date of the return for which the reconsider this application because it was filed after the extended due date of the return for which the reconsider this application because it was filed after the extended due date of the return for which the reconsider this application for an additional 3-month extended the one entered above. Name LUTZ AND CARR CPA S LLP Number and street (include suite, room, or apt. no.) or a P.O. box number	TENSION APPROVED request for an extension of time to APPRO2sion vas requested. FIELD DIRECTOR, ISSION PROCESSING, OGDEN Date

Form **8868**

(Rev December 2004)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return

OMB No 1545-1709

•	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box	▶ X						
If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form)								
	t complete Part II unless you have already been granted an automatic 3-month extension on a previously file	ed Form 8868						
Part	Automatic 3-Month Extension of Time - Only submit original (no copies needed)							
Form	990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only	▶□						
All oth return	er corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file incom s Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 10	ne tax 66, or 1041						
below exten:	onic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to (6 months for corporate Form 990-T filers) However, you cannot file it electronically if you want the additiona sion, instead you must submit the fully completed signed page 2 (Part II) of Form 8868 For more details on the www.irs.gov/efile.	(not automatic) 3-month						
Туре	or Name of Exempt Organization	Employer identification number						
print	CIVIC BUILDERS, INC.	04-3635313						
File by t	he Number street and room or suite as 15 D.O. hours are maturated	01 3033313						
filing yo	" 160 BROADWAY. EAST BUILDING - SUITE 900							
instructi								
Checl	type of return to be filed (file a separate application for each return):							
X 	Form 990 Form 990-T (corporation) Form 47. Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 52 Form 990-EZ Form 990-T (trust other than above) Form 60 Form 990-PF Form 1041-A Form 88	27 69						
Tel If t	e books are in the care of FRANK BUCCOLA ephone No. 212-870-3145 FAX No. ne organization does not have an office or place of business in the United States, check this box his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this If it is for part of the group, check this box and attach a list with the names and EINs of all recommendations.							
	I request an automatic 3-month (6-months for a Form 990-T corporation) extension of time until APR to file the exempt organization return for the organization named above. The extension is for the organization' calendar year or X tax year beginning SEP 1, 2004, and ending AUG 31, 2005	IL 17, 2006 . s return for:						
2	If this tax year is for less than 12 months, check reason Initial return Final return	Change in accounting period						
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	<u>\$</u>						
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	\$						
	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with the coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	TD \$ N/A						
Cauti	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-EO for payment instructions.						
LHA	For Privacy Act and Paperwork Reduction Act Notice, see instructions.	Form 8868 (Rev. 12-2004)						