

Return of Organization Exempt From Income Tax

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)

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

A For the 2004 calendar year, or tax year beginning 10/1, 2004, and ending 9/30, 20 05

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization
Rebuilding Together
 Number and street (or P O box if mail is not delivered to street address) Room/suite
3318 Adeline Street
 City or town, state or country, and ZIP + 4
Berkeley, CA 94703-2709

D Employer identification number
94 : 3238591
E Telephone number
(510) 644-8979
F Accounting method. Cash Accrual
 Other (specify) ▶

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

G Website: ▶ **www.rebuildingtogetherabe.com**

J Organization type (check only one) ▶ 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

K Check here ▶ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? Yes No
 (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number ▶

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **281755**

M Check ▶ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:					
	a Direct public support	1a		154948		
	b Indirect public support	1b				
	c Government contributions (grants)	1c		126260		
	d Total (add lines 1a through 1c) (cash \$ 269774 noncash \$ 11434)	1d			281208	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2				
	3 Membership dues and assessments	3				
	4 Interest on savings and temporary cash investments	4			547	
	5 Dividends and interest from securities	5				
	6a Gross rents	6a				
	b Less: rental expenses	6b				
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c				
7 Other investment income (describe ▶)	7					
Revenue	8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
		8a		8a		
	b Less: cost or other basis and sales expenses	8b				
	c Gain or (loss) (attach schedule)	8c				
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8d				
	9 Special events and activities (attach schedule) If any amount is from gaming, check here ▶ <input type="checkbox"/>	a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a			
		b Less: direct expenses other than fundraising expenses	9b			
		c Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
	10a Gross sales of inventory, less returns and allowances	10a				
		b Less: cost of goods sold	10b			
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		10c				
11 Other revenue (from Part VII, line 103)	11					
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			281755		
Expenses	13 Program services (from line 44, column (B))	13		241445		
	14 Management and general (from line 44, column (C))	14		40569		
	15 Fundraising (from line 44, column (D))	15		47687		
	16 Payments to affiliates (attach schedule)	16				
	17 Total expenses (add lines 16 and 44, column (A))	17		329701		
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		(47946)		
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		168714		
	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, 19, and 20)	21		120768		

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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25	104667	69100	19400
26	Other salaries and wages	26	23388	6704	5820
27	Pension plan contributions	27			
28	Other employee benefits	28	8853	4427	4426
29	Payroll taxes	29	11341	6713	2234
30	Professional fundraising fees	30	9666		9666
31	Accounting fees	31	2175		2175
32	Legal fees	32			
33	Supplies	33	3708	2108	711
34	Telephone	34	5826	4369	583
35	Postage and shipping	35	4799	3665	87
36	Occupancy	36	9129	6847	913
37	Equipment rental and maintenance	37	24757	24521	94
38	Printing and publications	38	8303	7833	188
39	Travel	39	1821	1815	6
40	Conferences, conventions, and meetings	40	1628	1295	278
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule)	42	840	630	84
43	Other expenses not covered above (itemize): a	43a			
	b See attached	43b	108800	101418	3576
	c	43c			
	d	43d			
	e	43e			
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44	329701	241445	40569

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)

What is the organization's primary exempt purpose? Repair/improve disadvantaged persons' homes	Program Service Expenses (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others.)
a Volunteers renovated and added safety modifications to homes of low-income seniors and disabled residents, and to community facilities that serve low-income populations. _____ _____ (Grants and allocations \$ _____)	241445
b _____ _____ (Grants and allocations \$ _____)	
c _____ _____ (Grants and allocations \$ _____)	
d _____ _____ (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	241445

Part IV Balance Sheets (See page 25 of the instructions.)

				(A)		(B)
		<i>Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only</i>		Beginning of year		End of year
Assets	45 Cash—non-interest-bearing			2105	45	5627
	46 Savings and temporary cash investments			46836	46	7547
	47a Accounts receivable	47a				
	b Less: allowance for doubtful accounts	47b		9338	47c	14822
	48a Pledges receivable	48a				
	b Less: allowance for doubtful accounts	48b			48c	
	49 Grants receivable			108118	49	97483
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
	51a Other notes and loans receivable (attach schedule)	51a				
	b Less: allowance for doubtful accounts	51b			51c	
	52 Inventories for sale or use				52	
	53 Prepaid expenses and deferred charges				53	662
	54 Investments—securities (attach schedule)		<input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55a Investments—land, buildings, and equipment: basis	55a				
	b Less: accumulated depreciation (attach schedule)	55b			55c	
56 Investments—other (attach schedule)				56		
57a Land, buildings, and equipment basis	57a	8352				
b Less: accumulated depreciation (attach schedule)	57b	7169		1513	57c	
58 Other assets (describe ► Deposits)			1046	58	1197	
59 Total assets (add lines 45 through 58) (must equal line 74)			168956	59	128521	
Liabilities	60 Accounts payable and accrued expenses			242	60	7753
	61 Grants payable				61	
	62 Deferred revenue				62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a Tax-exempt bond liabilities (attach schedule)				64a	
	b Mortgages and other notes payable (attach schedule)				64b	
	65 Other liabilities (describe ►)				65	
66 Total liabilities (add lines 60 through 65)			242	66	7753	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.					
	67 Unrestricted				67	
	68 Temporarily restricted				68	
	69 Permanently restricted				69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.					
	70 Capital stock, trust principal, or current funds				70	
	71 Paid-in or capital surplus, or land, building, and equipment fund				71	
	72 Retained earnings, endowment, accumulated income, or other funds			168714	72	120768
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)			168714	73	120768	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)			168956	74	128521	

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.

Part VI Other Information (See page 28 of the instructions.)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.	76	✓
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	✓
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	✓
80a	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	✓
b	If "Yes," enter the name of the organization ▶ _____ _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81a	Enter direct and indirect political expenditures See line 81 instructions 81a 0		
b	Did the organization file Form 1120-POL for this year?	81b	✓
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	✓
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 expense in Part II. (See instructions in Part III.) 82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	✓
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	✓
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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.	85b	N/A
c	Dues, assessments, and similar amounts from members. 85c N/A		
d	Section 162(e) lobbying and political expenditures. 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices. 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e). 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
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 allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12. 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) orgs Enter: a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b N/A		
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	✓
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911 ▶ <u>N/A</u> ; section 4912 ▶ <u>N/A</u> , section 4955 ▶ <u>N/A</u>		
b	501(c)(3) and 501(c)(4) orgs 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," attach a statement explaining each transaction	89b	✓
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ <u>N/A</u>		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ <u>N/A</u>		
90a	List the states with which a copy of this return is filed ▶ <u>California</u>		
b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.) 90b 4		
91	The books are in care of ▶ <u>Rebuilding Together</u> Telephone no. ▶ <u>(510) 644-8979</u> Located at ▶ <u>3318 Adeline Street Berkeley, CA</u> ZIP + 4 ▶ <u>94703-2709</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 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 ▶ 92 <u>N/A</u>		

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	547	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				547	
105 Total (add line 104, columns (B), (D), and (E))					547

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
N/A	

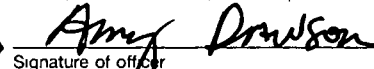
Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)


(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
 - (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
- Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign Here:  Date: 8/15/06
 Signature of officer: Amy Dawson Executive Director
 Type or print name and title

Paid Preparer's Use Only: Preparer's signature:  Date: 8/4/06 Check if self-employed: Preparer's SSN or PTIN (See Gen Inst W): 342-42-5572
 Firm's name (or yours if self-employed), address, and ZIP + 4: Jan A. Caine, CPA, 4417 Harbord Dr, Oakland, CA 94618
 EIN: Phone no: (510) 655-9498

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.)

OMB No 1545-0047

2004

Department of the Treasury
Internal Revenue Service

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

Name of the organization Rebuilding Together	Employer identification number 94 : 3238591
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Part I 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.")

(a) Name and address of each employee paid more than \$50,000	(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
None				
Total number of other employees paid over \$50,000 ▶				

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
None		
Total number of others receiving over \$50,000 for professional services ▶		

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	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 lobbying activities ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "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 contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		✓
b Lending of money or other extension of credit?		✓
c Furnishing of goods, services, or facilities?		✓
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <i>Sec. Part V Form 990</i>	✓	
e Transfer of any part of its income or assets?		✓
3a 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.)		✓
b Do you have a section 403(b) annuity plan for your employees?		✓
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		✓
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		✓

Part IV Reason for Non-Private Foundation 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).
- 8 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 ►**
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(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 public. 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.)
- 12 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described 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 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety. Section 509(a)(4) (See page 5 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28) .	287557	290087	324294	284400	1186338
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					
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	232	243	524	1352	2351
19 Net income from unrelated business activities not included in line 18.					
20 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					
23 Total of lines 15 through 22	287789	290330	324818	285752	1188689
24 Line 23 minus line 17	287789	290330	324818	285752	1188689
25 Enter 1% of line 23	2878	2903	3248	2858	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶	26a	23774
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶	26b	0
c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶	26c	1188689
d Add: Amounts from column (e) for lines 18 <u>2351</u> 19 _____ 22 _____ 26b _____ ▶	26d	2351
e Public support (line 26c minus line 26d total) ▶	26e	1186338
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶	26f	99.80 %

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return. Enter the sum of such amounts for each year:

(2003) _____ (2002) _____ (2001) _____ (2000) _____

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:

(2003) _____ (2002) _____ (2001) _____ (2000) _____

c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶	27c	
d Add: Line 27a total, _____ and line 27b total, _____ ▶	27d	
e Public support (line 27c total minus line 27d total) ▶	27e	
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e) ▶	27f	
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶	27g	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶	27h	%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15

Part V Private School Questionnaire (See page 7 of the instructions.)

(To be completed **ONLY** by schools that checked the box on line 6 in Part IV)

N/A

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain. (If you need more space, attach a separate statement.)		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a 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.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	N/A	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)		
38	Total lobbying expenditures (add lines 36 and 37)		
39	Other exempt purpose expenditures		
40	Total exempt purpose expenditures (add lines 38 and 39)		
41	Lobbying nontaxable amount Enter the amount from the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)		
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.		
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
 See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

2004 Corporation Depreciation and Amortization

3885

Attach to Form 100 or Form 100W

Corporation name Rebuilding Together	California corporation number 1911787
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Part I Depreciation

(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Method of figuring depreciation	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
1 FF&E	02/21/01	1440	1080	S/L	5	288	
Office Equipment	03/08/02	389	140	S/L	7	56	
Computer	03/24/02	1054	527	S/L	5	211	
Software	07/05/02	493	369	S/L	3	124	
Software	09/10/02	255	177	S/L	3	78	
Phone	04/01/03	223	48	S/L	7	32	
Laser printer	02/02/05	511		S/L	5	51	
2 Add the amounts in column (g) and column (h) The combined total of column (h) may not exceed \$2,000 See instructions for line 1, column (h)						840	
3 Total Add the amounts on line 2, column (g) and column (h)						3	840
4 Total depreciation claimed for federal purposes from federal Form 4562, line 22						4	
5 Depreciation adjustment If line 4 is greater than line 3, enter the difference here and on Form 100 or Form 100W, Side 1, line 6 If line 4 is less than line 3, enter the difference here and on Form 100 or Form 100W, Side 1, line 12 (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary)						5	

Part II Amortization

(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section	(f) Period or percentage	(g) Amortization for this year	
1							
2 Total Add the amounts in column (g)						2	
3 Total amortization claimed for federal purposes from federal Form 4562, line 44						3	
4 Amortization adjustment If line 3 is greater than line 2, enter the difference here and on Form 100 or Form 100W, Side 1, line 6 If line 3 is less than line 2, enter the difference here and on Form 100 or Form 100W, Side 1, line 12						4	

General Information

In general, California law conforms to the Internal Revenue Code (IRC) as of January 2001. However, there are continuing differences between California and federal law. When California conforms to federal tax law changes, we do not always adopt all of the changes made at the federal level. For more information regarding California and federal law, please visit our Website at www.ftb.ca.gov and select "Law and Legislation." Additional information can be found in FTB Pub 1001, Supplemental Guidelines to California Adjustments, the instructions for California Schedule CA (540 or 540NR), and the Business Entity tax booklets.

Note, the instructions provided with California tax forms are a summary of California tax law and are only intended to aid taxpayers in preparing their state income tax returns. We include information that is most useful to the greatest number of taxpayers in the limited space available. It is not possible to include all requirements of the California Revenue and Taxation Code (R&TC) in the tax booklets.

Taxpayers should not consider the tax booklets as authoritative law.

A Purpose

Use form FTB 3885 to calculate California depreciation and amortization deduction for corporations, including partnerships and limited liability companies (LLCs) classified as corporations only.

S corporations must use Schedule B (100S). Individuals must use form FTB 3885A, Depreciation and Amortization – Individuals. Fiduciaries and exempt trusts must use form FTB 3885F, Depreciation and Amortization – Fiduciaries. Partnerships must use form FTB 3885P, Depreciation and Amortization – Partnerships. LLCs classified as partnerships must use form FTB 3885L, Depreciation and Amortization – Limited Liability Companies. Depreciation and amortization are deductions corporations claim for reasonable exhaustion, wear and tear, and normal obsolescence of property used in a trade or business or held for the production of income.

For purposes of this form, depreciation is used in connection with tangible property, while amortization is used for intangible assets.

Note: For amortizing the cost of certified pollution control facilities, use form FTB 3580, Application to Amortize Certified Pollution Control Facility.

B Federal/State Calculation Differences

Important differences between federal and California laws affect the calculation of depreciation and amortization. Some of the major differences are briefly described, as follows:

- California conforms to 2003 increase for the limitation on luxury automobile depreciation, with modifications. In addition, SUVs and minivans that are built on a truck chassis are now included in the definition of trucks and vans when applying the 6,000 pound gross weight limit. See R&TC Section 24349.1 and federal Rev Proc 2003-75 for more information.
- California has not conformed to the changes made to the deduction of the business start-up and organizational costs paid or incurred after October 22, 2004.

Rebuilding Together
94-3238591
Form 990 (2004) Schedule Attachment

Part II Other Expenses, line 43

	<u>Total</u>	<u>Program Services</u>	<u>Mgmt & General</u>	<u>Fundraising</u>
Building materials	66586	66586		
Insurance	8791	5055	2920	816
Volunteer support	17270	17270		
Contract labor	6775	6448	109	218
Dues	3740	3620		120
Advertising	3918	1455	162	2301
Payroll fees	1663	984	328	351
Miscellaneous	<u>57</u>		<u>57</u>	
	<u>108800</u>	<u>101418</u>	<u>3576</u>	<u>3806</u>

BOARD!
 Average
 hours:
 1-2
 weekly
 No
 compensation

REBUILDING TOGETHER ALBANY-BERKELEY-EMERYVILLE			
BOARD OF DIRECTORS			
Michael McDowell President	McDowell Construction	1470 Rose Street Berkeley, CA, 94710	510-524-4969(h), 866-989-8752(p), 510 neptunefc@sbcglobal.net Fax: 524-02
Jenny Liu Vice President	CAL Graduate Student	1040 A Guerrero Street San Francisco, CA 94110	650-380-0762 (c) jenxliu@yahoo.com
Nina Winans Treasurer	Winans Construction	1875 Tacoma Avenue Berkeley, CA 94707	510-525-1794 (h), 510-653-7288x102 (v) nina@winconinc.com, paulnina@sbcgl
Bill Cain Secretary	Albany Board of Education EBMUD	2510 Prince Street Berkeley, CA 94705	510-287-1198 (w), 510-287-1984(f), 51 bcain@ebmud.com, bcainse@aol.com
Rosialeigh Wilson Member at Large	Educational Consultant	2916 Ellis Street Berkeley, CA 94703	510-845-1774 (h), 510-845-2090(f) rosialeighw@aol.com
Dash Butler	Contractor Former Chief of Police, Berkeley	2538 Caris Brook Drive Oakland, CA 94611	510-282-2712 (h), 510-482-9072(c) bpd26@msn.com
Allan Chen	Lawrence Berkeley National Lab	2624 San Jose Ave. Alameda, CA 94501	510-814-9479 (h); 510-486-4210 (w) a_chen@lbl.gov
David Gyorke	General Management	751 Colusa Avenue El Cerrito, CA 94530	510-717-3745 (c) dgyorke@aol.com
Janet Johnson	Educator Former Electrician	5804 Alameda Avenue Richmond, CA 94804	510-233-2522 (h), 510-331-3985 (c) electricista@comcast.net
Janice Mason	Community Member	P.O. Box 391 Berkeley, CA 94701-0391	510-893-7070 (h), 510-268-0461 (w), 5 LilSkip@hotmail.com, buddywillie2@e
Bob Simpson	Architect/Newman Hall	3038 Benvenue Avenue Berkeley, CA 94705	510-549-2310 (h); 510-549-0127 (w), 5 bobxkate@comcast.net
Steve Tornallyay	West Office Exhibition	1531 9th Street Berkeley, CA 94710	510-524-9893 (h), 510-622-7804 x131 (c) stevet@woed.com

ADVISORY BOARD OF DIRECTORS			
Tom Bates	Mayor, City of Berkeley	2180 Milvia Street Berkeley, CA 94704	981-7100 (w)
Robert Good	Former Mayor, City of Albany	1000 San Pablo Avenue Albany, CA 94706	526-4785 (w)
Shirley Dean	Former Mayor, City of Berkeley	934 Santa Barbara Berkeley, CA 94707	524-3223 (h)
Loni Hancock	Assemblymember 14th Assembly district	712 El Cerrito Plaza El Cerrito, CA 94530	559-1406(w)
Jim Golden	City of Emeryville Liaison	86 Emery Bay Emeryville, CA 94608	655-1729 (h)

REBUILDING TOGETHER ABE STAFF			
Office	RTABE www.rebuildingtogetherabe.org	3318 Adeline Street Berkeley, CA 94703	510-644-8979 (w), 510-644-6213 (f) rtabe@rebuildingtogetherabe.org
Amy Dawson	Executive Director 40 hours	3357 Morcom Avenue Oakland, CA 94619	510-436-3357 (h), 510-499-4913 (c) amy@rebuildingtogetherabe.org
Bill McCune	Program Director 20-40 hours	5414 Genoa St. Oakland, CA 94608	510-420-1634 (h) bill@rebuildingtogetherabe.org
David Snook	Office Coordinator/ Bookkeeper 20-40 hours	2030 Ashby Ave. #10 Berkeley, CA 94703	510-549-2283 david@rebuildingtogetherabe.org
Vacant	Program Assistant/Volunteer Coordinator		
Faye Lacy	Senior Office Aide Assets Program		

Previous Staff Members			
Kristin Hennessey	x - Program Assistant	kristinhennessey@gmail.com	510-501-4966
Gloria Crawley-Boevey	x - Office Coordinator	gcrawley@gmail.com	510-559-9755 (h)
Esete Menkir	x - Program Director	esete2000@yahoo.com	510-849-2132 (h) 375-3178 ©, 286-820
Jill Davis	x - Executive Director	davis.jill@sbcglobal.net	510-533-0504 (h), 510-830-8534 (c)

6104667

Updated on 6.27.06

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** and check this box **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (not automatic) 3-Month Extension of Time—Must File Original and One Copy.

Type or print	Name of Exempt Organization Rebuilding Together	Employer identification number 94 : 3238591
	Number, street, and room or suite no. If a P.O. box, see instructions. 3318 Adeline Street	For IRS use only
File by the extended due date for filing the return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Berkeley, CA 94703-2709	

Check type of return to be filed (File a separate application for each return):

- Form 990
- Form 990-BL
- Form 990-EZ
- Form 990-PF
- Form 990-T (sec. 401(a) or 408(a) trust)
- Form 990-T (trust other than above)
- Form 1041-A
- Form 4720
- Form 5227
- Form 6069
- Form 8870

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in the care of **Amy Dawson**
Telephone No. **(510) 644-8979** FAX No. **(510) 644-6213**

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the **whole group**, check this box . If it is for **part of the group**, check this box and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until 8/15, 20 06.
- 5 For calendar year _____, or other tax year beginning 10/1, 20 04, and ending 9/30, 20 05.
- 6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 7 State in detail why you need the extension We need more time to file a complete and accurate return.

8a 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 \$ _____

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ _____

c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ _____

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature *Jan A. Caine* Title CPA Date 5/12/06

Notice to Applicant—To Be Completed by the IRS

- We have approved this application. Please attach this form to the organization's return.
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested.
- Other _____

EXTENSION APPROVED
JUN 5 2006
FIELD DIRECTOR
SUBMISSION PROCESSING CENTER

Director _____ By: _____ Date _____

Alternate Mailing Address — Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name Jan A. Caine, CPA
	Number and street (include suite, room, or apt. no.) or a P.O. box number 4417 Harbord Dr
	City or town, province or state, and country (including postal or ZIP code) Oakland, CA 94618

