Department of the Treasury Internal Revenue Service

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation)

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

Open to Public Inspection

A F	or the 2	006 calendar year, or tax year beginning and ending		
Bc	heck if pplicable	Please use IRS D E	mployer	identification number
	Address change	s liabel or CTUTE DUTE DEDC THE	04-3	3635313
	Name change	type Number and street (or P.O. box if mail is not delivered to street address) Room/suite F.T.	elephon	e number
	Initial	Specific 160 BROADWAY, EAST BUILDING - SUITE 900		-571-7260
	Final	Instruc- tions City or town, state or country, and ZIP + 4	Accounting m	ethod Cash X Accrual
	Amende		Other (specify	y) <b>&gt;</b>
	Applica pending	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts H and I are not applical	ble to se	ection 527 organizations.
		must attach a completed Schedule A (Form 990 or 990-EZ).  H(a) Is this a group return	n for affil	iates? Yes X No
		►HTTP://WWW.CIVICBUILDERS.ORG H(b) If "Yes," enter numb	er of affili	ates ► N/A
J	)rganiza	tion type (check only one) ► X 501(c) (3 ) ◀ (insert no) 4947(a)(1) or 527 H(c) Are all affiliates inclinates in the composition of the compositi	iqeqs	N/A Yes No
	heck he	H(d) is this a separate rel	turn filed	by an or-
	•	are normally not more than \$25,000. A return is not required, but if the organization ganization covered in	<del></del>	· · · · · · · · · · · · · · · · · · ·
	nooses	to file a return, be sure to file a complete return  I Group Exemption N		
1 6	\			ration is <b>not</b> required to attach
		Revenue, Expenses, and Changes in Net Assets or Fund Balances	90-EZ, 0	1 990-27)
(Pè	1		<del></del>	
	' a	Contributions, gifts, grants, and similar amounts received  Contributions to donor advised funds		
	b	Direct public support (not included on line 1a)  1b 2,855,910		
		Indirect public support (not included on line 1a)		
	ď	Government contributions (grants) (not included on line 1a)  1d	$\neg$	
	e	Total (add lines 1a through 1d) (cash \$ 2,855,910 . noncash \$ )	1e	2,855,910.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	435,367.
	3	Membership dues and assessments	3	
	4	Interest on savings and temporary cash investments	4	196,820.
	5	Dividends and interest from securities	5	
	6 a	Gross rents SEE STATEMENT 1 6a 513,369	•	
	b	Less rental expenses 6b	_	
<u>o</u>	C	Net rental income or (loss) Subtract line 6b from line 6a	6c	513,369.
Revenue	7	Other investment income (describe	7	
æ.	8 a	Gross amount from sales of assets other (A) Securities (B) Other	_	
_		than inventory 8a	_	
	b	Less cost or other basis and sales expenses 8b	$\dashv$	
	C	Gain or (loss) (attach schedule)  Not one or (loss) Combine (loss) Combine (loss) (2) and (1)	$\dashv$ $\Box$	
	o d	Net gain or (loss) Combine line 8c, columns (A) and (B)	8d	
	9 a	Special events and activities (attach schedule) If any amount is from gaming, check here   Gross revenue (not including \$		
	b	Less direct expenses other than fundraising expenses  9b	_	
	C	Net income or (loss) from special events. Subtract line 9b from line 9a	90	
	10 a	Gross sales of inventory, less returns and allowances		
	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	2,785.
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	4,004,251.
so.	13	Program services (from line 44, column (B))  Management and general (from line 44, column (C))  APR 0 6 2007	13	1,329,173.
ıse	14	1121	14	191,217.
Expenses	15	Fundraising (from line 44, column (D))	15	172,112.
ŭ	16		16	1 600 500
_	17	Total expenses Add lines 16 and 44, column (A)	17	1,692,502.
ş	18	Excess or (deficit) for the year. Subtract line 17 from line 12.	18	2,311,749.
Net Assets	19 20	Net assets or fund balances at beginning of year (from line 73, column (A)) Other changes in net assets or fund balances (attach explanation)	19	8,443,945.
Ä	21	Net assets or fund balances at end of year Combine lines 18, 19, and 20	20	10,755,694.

Form **990** (2006)

SCANNET APR 24 7001

Functional Expenses and  Do not include amounts reported on line		-	(a)(1) nonexempt charitable  (B) Program	(C) Management	
6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	services	and general	(D) Fundraising
22a Grants paid from donor advised funds					
(attach schedule)					
	<u>-</u>				
If this armount includes foreign grants, check here	22a				
22b Other grants and allocations (attach schedu	. 1				
	4				
If this amount includes foreign grants, check here	_   <u>22b</u>				
23 Specific assistance to individuals (attach					
schedule)	23		<u></u>		
24 Benefits paid to or for members (attach					
schedule)	24	<del>-</del>		+	
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A STMT 2	25.0	234,824.	166,725.	30,528.	27 571
• • •	25a	234,024.	100,723.	30,320.	37,571.
b Compensation of former officers, directors, key	25b	0.	0.	0.	0.
employees, etc. listed in Part V-B  c Compensation and other distributions, not include		•	•		
above, to disqualified persons (as defined under	50				
section 4958(f)(1)) and persons described in					
section 4958(c)(3)(B)	25c				
26 Salaries and wages of employees not	200				
included on lines 25a, b, and c	26	517,534.	368,155.	66,102.	83,277.
27 Pension plan contributions not included on		02.70000	000/2000		00,2,,,
lines 25a, b, and c	27				
28 Employee benefits not included on lines	-				
25a - 27	28				
29 Payroll taxes	29	104,509.	74,148.	13,912.	16,449.
30 Professional fundraising fees	30		,	•	
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33	45,756.	29,801.	7,470.	8,485.
34 Telephone	34	·	·		
35 Postage and shipping	35				,,,,
36 Occupancy	36				
37 Equipment rental and maintenance	37				
38 Printing and publications	38				
39 Travel	39	21,876.	15,518.	2,915.	3,443.
40 Conferences, conventions, and meetings	40				
41 Interest	41	289,698.	289,698.		
42 Depreciation, depletion, etc. (attach schedule	) 42	185,506.	176,231.	9,275.	
43 Other expenses not covered above (itemize	):				
a FACILITIES	43a	62,778.	44,540.	8,357.	9,881.
b INSURANCE	43b	24,996.	18,695.	6,301.	0.
t NON-RECOVERABLE	43c		15.005		
d DEVELOPMENT	430	<16,926.			
e PROFESSIONAL FEES	43e	95,594.	49,775.	34,859.	10,960.
f CONSULTING FEES	431	126,357.	112,813.	11,498.	2,046.
9	43g				
44 Total functional expenses. Add lines 22a through	h				
43g (Organizations completing columns (B)-(D),		1 600 500	1 200 172	101 017	170 110
carry these totals to lines 13-15)	44	1,692,502.	1,329,173.	191,217.	172,112.
Joint Costs. Check ▶ ☐ If you are following	_			. —	- GE
	-				Yes X No
	_			•	
(III) the amount allocated to Management and general	\$	N/A , and (	iv) the amount allocated to	Fundraising \$	
Are any joint costs from a combined educational camp If "Yes," enter (i) the aggregate amount of these joint of (iii) the amount allocated to Management and general 623011 01-23-07	osts \$ _	N/A .(	orted in (B) Program servicily the amount allocated to be in the amount allocated to	Program services \$	Yes X No N/A N/A Form <b>990</b>

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

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.

	at is the organization's prince E STATEMENT A		oose? ▶					-	Program Service Expenses
All	organizations must describ nts served, publications is anizations and 4947(a)(1) r	pe their exempt pu sued, etc. Discus	s achievements	that are not me	asurable. (Section 501	(c)(3) and (4)			(Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others )
а	SEE STATEMEN	т 3							
	(Grants and allocations	\$	)	If this amount i	ncludes foreign grants	, check here	<b>&gt;</b> [		1,329,173.
		-							
c	(Grants and allocations	\$	)	If this amount i	ncludes foreign grants	, check here	<b>&gt;</b> [		
	(Grants and allocations	\$	)	If this amount i	ncludes foreign grants	, check here	<b>&gt;</b> [		
d									
		-							
_	(Grants and allocations	\$	)	If this amount i	ncludes foreign grants	check here	<b>&gt;</b> [	1	
е	Other program services (a	•	1	If this amount i	noludos foroign granta	obook boss	▶ □	$\neg  $	
			ıld equal line 44			cneck nere			1 320 172
f	(Grants and allocations Total of Program Service	\$ Expenses (shou	) Ild equal line 44		ncludes foreign grants gram services)	, check here	<b>&gt;</b> [	<u>] </u>	1,329,173 Form <b>990</b> (200

623021 01-18-07

Pa	<u>rt 17</u>	Balance Sheets (See the instructions)				
Note		ere required, attached schedules and amounts uld be for end-of-year amounts only.	within the description column	(A) Beginning of year		(B) End of year
				79 207		1 150 600
	45 46	Cash · non-interest-bearing	•	78,307. 1,997,526.		1,150,682. 6,492,769.
	40	Savings and temporary cash investments		1,331,320.	40	0/452/109.
	47 a	Accounts receivable	47a			
	b	Less: allowance for doubtful accounts	47b	43,259.	47c	
	48 a		48a			
	"		48b	F 20F 000	48c	2 100 410
	49	Grants receivable		5,385,000.	49	3,108,410.
	50 a	Receivables from current and former officers	, directors, trustees, and			
		key employees			50a	
	D	Receivables from other disqualified persons			506	
Assets	E1 0	4958(f)(1)) and persons described in section Other notes and loans receivable	4956(C)(S)(B) 51a	<del></del>	50b	
Ass		Less allowance for doubtful accounts	51b	_	51c	
	52	Inventories for sale or use	0.15		52	
	53	Prepaid expenses and deferred charges		11,845.	53	
	I -	Investments - publicly-traded securities	Cost FMV		54a	
	l -	investments - other securities	Cost FMV		54b	
	1	Investments - land, buildings, and				
	į	equipment: basis	55a			
	b	Less: accumulated depreciation	55b	<u> </u>	55c	
	56	Investments - other			56	
	57 a	Land, buildings, and equipment: basis	57a 5,278,002.			
	b	•	57b 219,781.	4,432,995.	57c	5,058,221.
	58	Other assets, including program-related investmen		1 572 002		1 045 040
		·	SEE STATEMENT 5	1,572,003. 13,520,935.		1,845,049. 17,655,131.
	59	Total assets (must equal line 74). Add lines	45 through 58	253,298.	59 60	288,877.
	60	Accounts payable and accrued expenses		233,290.	61	200,077.
	61 62	Grants payable Deferred revenue			62	
es	63	Loans from officers, directors, trustees, and	key employees		63	
ilities	1	Tax-exempt bond liabilities	ncy diffployees		64a	<u> </u>
Liab	1	Mortgages and other notes payable	STMT 6	3,881,218.	64b	5,309,601.
_	65		SEE STATEMENT 7	942,474.	65	1,300,959.
		·				
	66	Total liabilities. Add lines 60 through 65		5,076,990.	66	6,899,437.
	Orga	anizations that follow SFAS 117, check here	► X and complete lines			
<sub>s</sub>		67 through 69 and lines 73 and 74.		0 000 501		
čě	67	Unrestricted	-	2,388,731.		4,223,529.
alar	68	Temporarily restricted		6,055,214.	68	6,532,165.
Ö	69	Permanently restricted			69	
Ë	Orga	anizations that do not follow SFAS 117, chec	ck here 🕨 📖 and			
P		complete lines 70 through 74.			- 1	
ets	70	Capital stock, trust principal, or current fund:			70	
\ss(	71 72	Paid-in or capital surplus, or land, building, an Retained earnings, endowment, accumulated			71 72	
Net Assets or Fund Balances	73	Total net assets or fund balances. Add lines 67 th				
Z	"	(Column (A) must equal line 19 and column (B) mi	-	8,443,945.	73	10,755,694.
	74	Total liabilities and net assets/fund balance		13,520,935.	74	17,655,131.

Pε	Reconciliation of Revenue per Audited Fina Instructions)	ncial Statements W	ith Revenue p	er Re	turn	(See the	
	Total revenue, gains, and other support per audited financial stateme	nts			a	4,004,2	51.
b	Amounts included on line a but not on Part I, line 12:					<u>,</u>	
1	Net unrealized gains on investments	1	11				
2	_		12				
3	Recoveries of prior year grants	F-	13				
4	Other (specify):	F	14				
	Add lines b1 through b4	L'	<u> </u>		ь		0.
C	Subtract line <b>b</b> from line <b>a</b>					4,004,2	
d	Amounts included on Part I, line 12, but not on line a:						
1	investment expenses not included on Part I, line 6b	ا	ı1				
	Other (specify):		12				
_	Add lines d1 and d2		:=,,		d		0.
e	Total revenue (Part I, line 12). Add lines c and d		•			4,004,2	
Pa	art IV-B Reconciliation of Expenses per Audited Fine	ancial Statements V	/ith Expenses	per F			
a	Total expenses and losses per audited financial statements		•		а	1,692,5	02.
b	Amounts included on line a but not on Part I, line 17:					,-	
1	Donated services and use of facilities	11	n				
2	Prior year adjustments reported on Part I, line 20	<b>├</b> ~	2				
3		<u> </u>	3				
4	Other (specify):	· ·	4				
	Add lines <b>b1</b> through <b>b4</b>		· · · · · · · · · · · · · · · · · · ·		ь		0.
C	Subtract line <b>b</b> from line <b>a</b>				С	1,692,5	02.
đ	Amounts included on Part I, line 17, but not on line a:						
1	Investment expenses not included on Part i, line 6b	(	11				
2	Other (specify):		12				
	Add lines d1 and d2		•		d		0.
е	Total expenses (Part I, line 17) Add lines c and d			▶	е	1,692,5	02.
D.							
	art V-A Current Officers, Directors, Trustees, and Ke	ey Employees (List eac	ch person who was	s an of	ficer, o	director, truste	e,
	current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we	ere not compensated.) (Se	e the instructions.)				-
			e the instructions.)	(D) Cor emplo plans		ns to (E) Expe	ense and
	or key employee at any time during the year even if they we	(B) Title and average hours per week devoted to	(C) Compensation (If not paid, enter	(D) Cor emplo plans	ntnbution	ns to (E) Expe	ense and
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and
	or key employee at any time during the year even if they we	(B) Title and average hours per week devoted to	(C) Compensation (If not paid, enter	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
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	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
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	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances
	or key employee at any time during the year even if they we (A) Name and address	(B) Title and average hours per week devoted to	e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Cor emplo plans comper	ntribution byee ben & defensation p	ns to (E) Expe efft red olans other allow	ense and vances

Form 990 (2				04-3635	313		age <b>6</b>
Part V-	Current Officers, Directors, Trustees, and Ko	ey Employees (continu	ied)			Yes	No
75 a Enter	the total number of officers, directors, and trustees permitted ngs	to vote on organization bu	siness at board ▶	12			
listed Part I	ny officers, directors, trustees, or key employees listed in Form in Schedule A, Part I, or highest compensated professional and I-A or II-B, related to each other through family or business reladividuals and explains the relationship(s)	nd other independent contr	actors listed in Sci	hedule A,	75b		x
listed Part I orgar	by officers, directors, trustees, or key employees listed in Form in Schedule A, Part I, or highest compensated professional and I-A or II-B, receive compensation from any other organizations, ization? See the instructions for the definition of "related organs," attach a statement that includes the information described	nd other independent contr whether tax exempt or tax nization."	actors listed in Scl	hedule A,	75c		X
	the organization have a written conflict of interest policy?		Received Com	nensation (	75d	her	х
1.63.1	Benefits (If any former officer, director, trustee, or key er						rına
	the year, list that person below and enter the amount of co						
	(A) Name and address NONE	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plan	à	E) Expe ccount er allow	and
					<del> </del>		
Part VI	Other Information (See the instructions)	<u> </u>				Yes	No
	e organization make a change in its activities or methods of coment of each change	onducting activities? If "Yes	s," attach a detaile	d	76		X
77 Were	any changes made in the organizing or governing documents s,* attach a conformed copy of the changes.	but not reported to the IRS		ļ	77		X
78 a Did th	ne organization have unrelated business gross income of \$1,00 s," has it filed a tax return on Form 990-T for this year?	0 or more during the year o	covered by this ret	,_ ٢	78a 78b		X
	here a liquidation, dissolution, termination, or substantial contr	raction during the year? If	'Yes," attach a sta	<u> </u>	79		X
80 a Is the	organization related (other than by association with a statewic pership, governing bodies, trustees, officers, etc., to any other	le or nationwide organization	on) through commo	on [	80a		X
b If "Ye	s,* enter the name of the organization ► N/A	and check whether it is	exempt or	nonexempt			
81 a Enter	direct or indirect political expenditures. (See line 81 instruction	-	81a	0.	1		
<b>b</b> Did th	e organization file Form 1120-POL for this year?	<del>.</del>			81b Form	<b>990</b> (	X 2006)
					. 51111	222(	_000)

For	m	990 (2006) CIVIC BUILDERS, INC. 04-3635	313	P	age 7
P	ar	t VI Other Information (continued)		Yes	
82	а	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		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 expense in Part II			
		(See instructions in Part III ) 82b N/A			ĺ
83	а	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Х	
	b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84	а	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		Х
	b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not			
		tax deductible? N/A	84b		
85		501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A	85a		
	b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b		
		If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a			
		walver for proxy tax owed for the prior year.			
	C	Dues, assessments, and similar amounts from members 85t N/A			
	d	Section 162(e) lobbying and political expenditures 85d N/A			
	е	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?  N/A	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 allocable to nondeductible lobbying and political expenditures for the			Ì
		following tax year? N/A	85h		ļ
86		501(c)(7) organizations 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) organizations 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	a	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	88a		<u> </u>
	b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of			
		section 512(b)(13)? If "Yes," complete Part XI	88b		X
89	а	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 •			İ
	D	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			
		transaction during the year or did it become aware of an excess benefit transaction from a prior year?			v
	_	If "Yes," attach a statement explaining each transaction	89b		X
	Ü	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			ĺ
	d				ĺ
		Enter: Amount of tax on line 89c, above, reimbursed by the organization  **Description**  *	89e		Х
	G f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		X
	, u	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization,	ופט		
	y	or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		х
gn	а	List the states with which a copy of this return is filed   NY	U39 I		
		Number of employees employed in the pay period that includes March 12, 2006  90b			7
		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		_	
	b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	-	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b		X
		If "Yes," enter the name of the foreign country   N/A	- / -		_ <b>-</b> _
		See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	_	and Financial Accounts.			
			Form	990	(2006)

	BUILDERS	S, IN	C.		04-	3635313 Page 8
Part VI Other Information (con	tinued)	<u></u>				Yes No
c At any time during the calendar year,	did the organiza	tion main	tain an office outside	of the U	nited States?	91c X
If "Yes," enter the name of the foreign	n country 🕨		N/A			
92 Section 4947(a)(1) nonexempt charita	able trusts filing F	orm 990	in lieu of Form 1041-	Check h	ere	▶ □
and enter the amount of tax-exempt i	nterest received	or accrue	ed during the tax year		▶ 92	N/A
Part VII Analysis of Income-Pi	roducing Act	ivities (	See the instructions)			
Note: Enter gross amounts unless otherwi	se L	Unrelat	ed business income	Exclud	ded by section 512, 513, or 514	(E)
indicated		(A)	(B)	(C)	(D)	(E) Related or exempt
93 Program service revenue:	"	lusiness code	Amount	Exclu- sion code	Amount	function income
a CONSULTING FEES			·	- Luide		89,167.
DEVELOPMENT FEE						346,200.
					<del></del>	340,200.
C			<del></del> -	+		
d				+		
£ 14 b (14 b )						<del></del>
f Medicare/Medicaid payments						
g Fees and contracts from government	agencies			-		
94 Membership dues and assessments					106 020	
95 Interest on savings and temporary cash inv	estments			14	196,820.	
96 Dividends and interest from securities	ļ				····	
97 Net rental income or (loss) from real es	state.					
a debt-financed property	_			16	513,369.	
b not debt-financed property						
98 Net rental income or (loss) from persor	nal property		· 		<u> </u>	
99 Other investment income						
100 Gain or (loss) from sales of assets	-					
other than inventory						
101 Net income or (loss) from special even	ts					
102 Gross profit or (loss) from sales of inve	entory					
103 Other revenue						
a MISCELLANEOUS						2,785.
b			W			
C						
d			<del></del>			
8				1		
104 Subtotal (add columns (B), (D), and (E)	, –		0	.	710,189.	438,152.
105 Total (add line 104, columns (B), (D), a			<u>_</u>	<u> 1</u>	<u> </u>	1,148,341.
Note: Line 105 plus line 1e, Part I, should e		on line 12	2. Part I.		٠.	
Part VIII Relationship of Activit	<u> </u>			nt Pur	noses (See the instruction	one l
Explain how each activity for which exempt purposes (other than by pre-				еа ітірогі	antly to the accomplishment (	of the organization's
SEE STATEMENT		don parpa		<del></del>	······································	
OBE STATEMENT	,					
	-				<del></del>	<del></del>
Doub IV Information Doubles	- Touchle Cu	i - l i i	ing and Diagram	al	AiAi 10	<del></del>
Part IX Information Regarding	(B)	bsidiar	(C)	aea Er	(D)	
Name, address, and EIN of corporation,	Percentage of		Nature of activities		Total income	(E) End-of-year
partnership, or disregarded entity ov	vnership interest					assets
	- %					
N/A	%		-			
	%					
	%					
Part X Information Regarding	Transfers A	ssocia	ted with Persona	l Bene	fit Contracts (See the	Instructions.)
(a) Did the organization, during the year, recei	ve any funds, direc	tly or indir	ectly, to pay premiums o	n a perso	nal benefit contract?	Yes X No
(b) Did the organization, during the year, pay (	-	-	· · · · ·	-		Yes X No
Note: If "Yes" to (b), file Form 8870 and F	-					·
						Form <b>990</b> (2006)
						, ,,

623163 01-18-07

Part XI Information Regarding Transfers To and From Controlling organization as defined in section 512(b)(13).	ontrolled Entitie	es. Complete only if the organi	ization is a
Controlling organization as semiles in section or 2 (s)(1.5).	Н/ А		Yes No
106 Did the reporting organization make any transfers to a controlled entity a complete the schedule below for each controlled entity.	as defined in section 5	512(b)(13) of the Code? If "Yes	
(A) Name, address, of each	(B) Employer Identification	(C) Description of	(D) Amount of
controlled entity	Number	transfer	transfer
a			
p			
c			
Totals	<b>,</b>		
107 Did the reporting organization receive any transfers from a controlled en complete the schedule below for each controlled entity.	tity as defined in sect	tion 512(b)(13) of the Code? If	Yes, No
(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a			
ь			
c			
Totals			Ves No
108 Did the organization have a binding written contract in effect on August 1 annuities described in question 107 above?	7, 2006, covering the	e interest, rents, royalties, and	Yes No
Under penalties of penjury, I declare that I have examined this return, including accompany and complete Oeclaration of preparer (other than officer) is based on all information of whice Please	ing schedules and statement ch preparer has any knowled	ts, and to the best of my knowledge and ge $3/27/3$	belief, it is true, correct,
Sign Here  Signature of officer  Type or print name and title	0	Date	164
Preparer's signature  Preparer's Firm's name (or LUTZ AND CARR, CPA'S LLP		self- employed > Poo 4	NorPTIN (See Gen Inst. X)
Use Only yours if self-employed), address, and 2IP+4 300 EAST 42ND STREET NEW YORK, NY 10017		Phone no	
			Form <b>990</b> (2006)

### **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 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

CIVIC BUILDERS, INC.			04 36353	313
Compensation of the Five Highest Paid Emp (See page 2 of the instructions List each one If there are none, et		Officers, Direc	ctors, and T	rustees
(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
	REAL EST. DI	1		
160 BROADWAY, EAST BUILDING, #900, NEW		185,000.	0	0.
JILL CRAWFORD 160 BROADWAY, EAST BUILDING, #900, NE	PROJECT MANA 40.00	GER 98,750.	0	. 0.
Total number of other employees paid over \$50,000	0			
Part II-A Compensation of the Five Highest Paid Inde	<del></del>	ors for Professi	onal Servic	 es
(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 the	an \$50,000	(b) Type of s	ervice	(c) Compensation
S. DIGIACOMO & SONS		GENERAL		11270454
1001 INTERVALE AVENUE, BRONX, NY 1045 ALEXANDER WOLF & SON		CONTRACTOR GENERAL	-	11270454.
211 EAST 43RD STREET, NEW YORK, NY 10		GENERAL CONTRACTOR		629,545.
GRAN ASSOCIATES		ARCHITECTU		025,545.
29 BROADWAY, 28TH FLOOR, NEW YORK, NY		SERVICES		202,497.
GMA ELECTRICAL CORP		ELECTRICAL		
201 EDWARD CURRY AVENUE, #207, STATEN	ISLAND, NY	CONTRACTOR		173,178.
HIRSCHEN & SINGER LLP				
902 BROADWAY, 13TH FLOOR, NEW YORK, N	Y 10010	LEGAL SERV	ICES	114,311.
Total number of others receiving over				
\$50,000 for professional services	0			
Part II-B Compensation of the Five Highest Paid Inde (List each contractor who performed services other than profession firms If there are none, enter "None" See page 2 of the instruction	onal services, whether individ		ervices	
(a) Name and address of each independent contractor paid more the	an \$50,000	(b) Type of s	ervice	(c) Compensation
NONE				
Total number of other contractors receiving over \$50,000 for other services	0			

623101/01-18-07 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

F	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   \$			-
	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			
	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?	2a		X
	b Lending of money or other extension of credit?	2b		Х
	c Furnishing of goods, services, or facilities?	_2c		Х
	d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE STATEMENT 10	2d	X	
	e Transfer of any part of its income or assets?	2e		Х
3	a Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how			
	the organization determines that recipients qualify to receive payments )	3a		Х
	b Dd the organization have a section 403(b) annuity plan for its employees?	3b		Х
	c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space,			
	the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		X
	d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		Х
4	a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f			
	and 4g	4a		Х
	b Did the organization make any taxable distributions under section 4966?	4b		Х
	c Did the organization make a distribution to a donor, donor advisor, or related person?	4c		X
	d Enter the total number of donor advised funds owned at the end of the tax year			0
	e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			0.
	f Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on			
	line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			0.
	g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year			0.

Par	t IV	Reason for Non-Private Foundation S	Status (See pages 41	hrough 7 of the instruction	ons )		
l certif	y that th	ne organization is not a private foundation because it is (	Please check only ONE a	ipplicable box )			
5		A church, convention of churches, or association of ch	•				
6		A school Section 170(b)(1)(A)(II) (Also complete Par	tV)				
7		A hospital or a cooperative hospital service organization		III)			
8		A federal, state, or local government or governmental		•			
9		A medical research organization operated in conjunction			the hospital's	s name, city,	
		and state 🕨					
10		An organization operated for the benefit of a college or	university owned or ope	rated by a governmental	unit Section	170(b)(1)(A)(	IV)
		(Also complete the Support Schedule in Part IV-A)					,
11a	X	An organization that normally receives a substantial pa	art of its support from a g	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 coi	nplete the Support Sche	dule in Part IV-A )			
12		An organization that normally receives (1) more than	33 1/3% of its support fr	om contributions, membe	ership fees, a	nd gross	
		receipts from activities related to its charitable, etc., fur					
		its support from gross investment income and unrelate	ed business taxable inco	me (less section 511 tax)	from busines	ses acquired	
		by the organization after June 30, 1975 See section 5	09(a)(2) (Also complete	e the Support Schedule ii	1 Part IV-A)		
13		An organization that is not controlled by any disqualifie	ed persons (other than fo	undation managers) and	otherwise me	ets the requir	ements of section
		509(a)(3) Check the box that describes the type of su					
		Type I Type II	Type III-Fu	nctionally Integrated		Type III-	-Other
		Provide the following information at	oout the supported orga	nizations. (See page 7 of	the instruction	ons )	
		(a)	(b)	(c)	(d)	)	(e)
		Name(s) of supported organization(s)	Employer	Type of organization		ipported	Amount of
		Name(s) of supported organization(s)	identification	(described in lines	organizatio	on listed in	Amount of support
		Name(s) of supported organization(s)			organization the sup	on listed in porting ration's	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup	on listed in porting	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup	on listed in porting ration's	
<del></del>		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
Total		Name(s) of supported organization(s)	identification	(described in lines 5 through 12 above	organization the sup organization organization organizati	on listed in porting ration's documents?	
Total 14		An organization organized and operated to test for pub	identification number (EIN)	(described in lines 5 through 12 above or IRC section)	organizati the sup organi governing Yes	on listed in porting ration's documents?	

Patye 4

	Note: You may use the	e worksheet in the inst	ructions for converting	from the accrual to th	e cash method of account	ng. countina
	ndar year (or fiscal year nning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants See line 28)	1,235,000.	1,075,000.	1,395,118.	602,500	4,307,618.
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	205,768.	53,812.	276,409.	114,450.	650,439.
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	193,945.	531,123.	47,599.	0.	
19	Net income from unrelated business	<u> </u>			<del></del>	1,2,00,0
	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		1,536.	SEE STATEME	NT 11 2,834.	4,370.
23	Total of lines 15 through 22	1,634,713.	1,661,471.	1,719,126.	719,784.	
24	Line 23 minus line 17	1,428,945.	1,607,659.	1,442,717.	605,334.	
25	Enter 1% of line 23	16,347.	16,615.	17,191.	7,198.	
26	Organizations described on lines 10		· · · · · · · · · · · · · · · · · · ·		▶ 26a	101,693.
h	Prepare a list for your records to sho		• •			20270301
_	unit or publicly supported organization		•	•	E .	
	Do not file this list with your return.	· -	•	sod the dinodin shown in	≥ 26b	1,118,228.
c	Total support for section 509(a)(1) to				≥ 26c	5,084,655.
	Add Amounts from column (e) for li		72,667. 19		- 100	
_	(0, 10	22	4,370. 26b	1,118,22	8. <b>&gt;</b> 26d	1,895,265.
e	Public support (line 26c minus line 2		7		≥ 26e	3,189,390.
f	Public support percentage (line 26)	•	tine 26c (denominator))		≥ 26f	62.7258%
27	Organizations described on line 12			<del></del>	·	
	records to show the name of, and to					-
		N/A		·	•	
	(2005)	(2004)	(2)	003)	(2002)	
b	For any amount included in line 17 th	hat was received from eac	h person (other than "dis	qualified persons"), prepa	re a list for your records	to show the name of,
	and amount received for each year, t					
	described in lines 5 through 11b, as					-
	the larger amount described in (1) or	r (2), enter the sum of the	se differences (the exces	s amounts) for each year	N/A	
	(2005)	(2004)	(20	003)	(2002)	
C	Add Amounts from column (e) for li	nes 15	· · · · · · · · · · · · · · · · · · ·	16	, ,	
	17	20		21	≥ 27c	N/A
đ	Add Line 27a total		d line 27b total		▶ 27d	N/A
e	Public support (line 27c total minus				<b>▶</b> 27e	N/A
f	Total support for section 509(a)(2) to		23, column (e)	<b>▶</b> 27f 1	N/A	
g	Public support percentage (line	e 27e (numerator) div	ided by line 27f (deno	minator))	<b>▶</b> 27g	N/A %
h	Investment income percentage	e (line 18, column (e) (	numerator) divided b	y line 27f (denominat	or)) <b>&gt;</b> 27h	N/A %
5	Jnusual Grants: For an organization thow, for each year, the name of the coelurn. Do not include these grants in I	ontributor, the date and ar	or 12 that received any u nount of the grant, and a	nusual grants during 200 brief description of the na	2 through 2005, prepare ture of the grant <b>Do no</b>	a list for your records to
	eturn. Do not include these grants in i 1-01-18-07	Ne 15	ONE		Sched	ule A (Form 990 or 990-EZ) 2006

Private School Questionnaire (See page 9 of the instructions)

N/A

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
•	instrument, or in a resolution of its governing body?	29		
0	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?	30		
1	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			İ
	to all parts of the general community it serves?	31		ĺ
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			Г
		_		
		_		
2	Does the organization maintain the following  Records indicating the record composition of the student heavy faculty, and administrative staff?	200		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	-	<del>                                     </del>
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		$\vdash$
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student	200		l
	admissions, programs, and scholarships?  Cover of all metaral word by the assessment of a contract to polar the contract to a co	32c		<del>                                     </del>
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)	32d		·
		_		
3	Does the organization discriminate by race in any way with respect to			İ
а	Students' rights or privileges?	33a		<u> </u>
b	Admissions policies?	33b		
C	Employment of faculty or administrative staff?	33c		<b></b>
d	Scholarships or other financial assistance?	33d	<u></u>	ļ
е	Educational policies?	33e		
f	Use of facilities?	33f	L	
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
		_		
	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b	ļ	<del>,</del>
_	If you answered "Yes" to either 34a or b, please explain using an attached statement			:
5	Does the organization certify that it has compiled 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	35		

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

	_	ecting Public Chariti nization that filed Form 5768)						
Check 🕨 a 🔲 if the organization	belongs to an affiliated	group Check	<b>b</b> ☐ if	you ch	ecked "a" and "I	ımıted_c	control"	provisions apply
	ts on Lobbying Expenditures* means amo	-			(a Affiliated tota	group		(b) To be completed for all electing organizations
( the term e.	xpenultures means and	ounts paid of incurred )		1	N/A			ordering organizations
6 Total lobbying expenditures to infl	luence public opinion (d	rassroots lobbying)		36	11,71	•		
7 Total lobbying expenditures to infi		37						
3 Total lobbying expenditures (add		38		•				
Other exempt purpose expenditure		39				-		
Total exempt purpose expenditure	es (add lines 38 and 39)	(		40				
Lobbying nontaxable amount Ent								
If the amount on line 40 is -								
Not over \$500,000	20% of the an	nount on line 40	)					
Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess over \$500,000	1					
Over \$1,000,000 but not over \$1,500,00	0 \$175,000 plus	10% of the excess over \$1,000,00	0 }	41		,,		·····
Over \$1,500,000 but not over \$17,000,0	00 \$225,000 plus	5% of the excess over \$1,500,000	· [					
Over \$17,000,000	\$1,000,000		J					
! Grassroots nontaxable amount (el	•			42				
Subtract line 42 from line 36. Ente				43				
Subtract line 41 from line 38 Ente	er -0- if line 41 is more t	han line 38		44				
(Son	ne organizations that ma	Averaging Period Unade a section 501(h) election of structions for lines 45 through	lo not have t	o comp	lete all of the fiv		nns	
(Son	ne organizations that ma	ade a section 501(h) election o	lo not have t 50 on page	o comp 13 of th	lete all of the fiv e instructions )		nns	N/A
alendar year (or	ne organizations that ma	ade a section 501(h) election o structions for lines 45 through	lo not have t 50 on page	o comp 13 of th	lete all of the five instructions )  ar Averaging P		nns	N/A (e) Total
alendar year (or scal year beginning in)	ne organizations that ma below. See the ins	ade a section 501(h) election of tructions for lines 45 through  Lobbying Expen  (b)	do not have t 50 on page ditures Duri (c)	o comp 13 of th	lete all of the five instructions )  ar Averaging P	eriod (d)	nns	(e)
alendar year (or scal year beginning in)	ne organizations that ma below. See the ins	ade a section 501(h) election of tructions for lines 45 through  Lobbying Expen  (b)	do not have t 50 on page ditures Duri (c)	o comp 13 of th	lete all of the five instructions )  ar Averaging P	eriod (d)	nns	(e) Total
atendar year (or scal year beginning in)	ne organizations that ma below. See the ins	ade a section 501(h) election of tructions for lines 45 through  Lobbying Expen  (b)	do not have t 50 on page ditures Duri (c)	o comp 13 of th	lete all of the five instructions )  ar Averaging P	eriod (d)	nns	(e) Total
atendar year (or scal year beginning in)	ne organizations that ma below. See the ins	ade a section 501(h) election of tructions for lines 45 through  Lobbying Expen  (b)	do not have t 50 on page ditures Duri (c)	o comp 13 of th	lete all of the five instructions )  ar Averaging P	eriod (d)	nns	(e) Total
llendar year (or cal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))	ne organizations that ma below. See the ins	ade a section 501(h) election of tructions for lines 45 through  Lobbying Expen  (b)	do not have t 50 on page ditures Duri (c)	o comp 13 of th	lete all of the five instructions )  ar Averaging P	eriod (d)	nns	(e) Total
alendar year (or scal year beginning in)  5 Lobbying nontaxable amount 6 Lobbying ceiling amount (150% of line 45(e)) 7 Total lobbying expenditures	ne organizations that ma below. See the ins	ade a section 501(h) election of tructions for lines 45 through  Lobbying Expen  (b)	do not have t 50 on page ditures Duri (c)	o comp 13 of th	lete all of the five instructions )  ar Averaging P	eriod (d)	nns	(e) Total
alendar year (or scal year beginning in)  5 Lobbying nontaxable amount 6 Lobbying ceiling amount (150% of line 45(e)) 7 Total lobbying expenditures 8 Grassroots nontaxable	ne organizations that ma below. See the ins	ade a section 501(h) election of tructions for lines 45 through  Lobbying Expen  (b)	do not have t 50 on page ditures Duri (c)	o comp 13 of th	lete all of the five instructions )  ar Averaging P	eriod (d)	nns	(e) Total
alendar year (or scal year beginning in)  5 Lobbying nontaxable amount 6 Lobbying ceiling amount (150% of line 45(e)) 7 Total lobbying expenditures 8 Grassroots nontaxable amount	ne organizations that ma below. See the ins	ade a section 501(h) election of tructions for lines 45 through  Lobbying Expen  (b)	do not have t 50 on page ditures Duri (c)	o comp 13 of th	lete all of the five instructions )  ar Averaging P	eriod (d)	nns	(e) Total
alendar year (or scal year beginning in)  5 Lobbying nontaxable amount 6 Lobbying ceiling amount (150% of line 45(e)) 7 Total lobbying expenditures 8 Grassroots nontaxable amount 9 Grassroots ceiling amount	ne organizations that ma below. See the ins	ade a section 501(h) election of tructions for lines 45 through  Lobbying Expen  (b)	do not have t 50 on page ditures Duri (c)	o comp 13 of th	lete all of the five instructions )  ar Averaging P	eriod (d)	nns	(e) Total
alendar year (or scal year beginning in)  5 Lobbying nontaxable amount 6 Lobbying ceiling amount (150% of line 45(e)) 7 Total lobbying expenditures 8 Grassroots nontaxable amount 9 Grassroots ceiling amount (150% of line 48(e))	ne organizations that ma below. See the ins	ade a section 501(h) election of tructions for lines 45 through  Lobbying Expen  (b)	do not have t 50 on page ditures Duri (c)	o comp 13 of th	lete all of the five instructions )  ar Averaging P	eriod (d)	nns	(e) Total
alendar year (or scal year beginning in)  5 Lobbying nontaxable amount  6 Lobbying ceiling amount  (150% of line 45(e))  7 Total lobbying expenditures  8 Grassroots nontaxable amount  (150% of line 48(e))  6 Grassroots lobbying	ne organizations that ma below. See the ins	ade a section 501(h) election of tructions for lines 45 through  Lobbying Expen  (b)	do not have t 50 on page ditures Duri (c)	o comp 13 of th	lete all of the five instructions )  ar Averaging P	eriod (d)	nns	(e) Total
Idendar year (or ical year beginning in)  Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures Grassroots nontaxable amount (150% of line 48(e)) Grassroots lobbying expenditures	to e organizations that management below. See the instance (a) 2006	ade a section 501(h) election of tructions for lines 45 through  Lobbying Expen  (b)	do not have t 50 on page ditures Duri (c) 200	o comp 13 of th	lete all of the five instructions )  ar Averaging P	eriod (d)	nns	(e) Total
Alendar year (or cal year beginning in)  Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures Grassroots nontaxable amount (150% of line 48(e)) Grassroots lobbying expenditures Cart VI-B Lobbying Acti	(a) 2006	ade a section 501(h) election of structions for lines 45 through  Lobbying Expen  (b) 2005	do not have t 50 on page ditures Duri (c) 200	o comp 13 of th ng 4-Ye	lete all of the five instructions )  ar Averaging P	eriod (d)	nns	(e) Total
illendar year (or ical year beginning in)  i Lobbying nontaxable amount  i Lobbying ceiling amount  (150% of line 45(e))  7 Total lobbying expenditures  i Grassroots nontaxable amount  (150% of line 48(e))  i Grassroots lobbying expenditures  Part VI-B Lobbying Actions (For reporting only buring the year, did the organization at	(a) 2006  ivity by Nonelec by organizations that did ttempt to influence nation	Lobbying Expen  (b) 2005  String Public Charities I not complete Part VI-A) (See onal, state or local legislation, i	do not have t 50 on page ditures Duri (c) 200	o comp 13 of th ng 4-Ye 4	lete all of the five instructions )  ar Averaging P	eriod (d) 2003		(e) Total
alendar year (or scal year beginning in)  5 Lobbying nontaxable amount  6 Lobbying ceiling amount (150% of line 45(e))  7 Total lobbying expenditures  8 Grassroots nontaxable amount (150% of line 48(e))  0 Grassroots lobbying expenditures  Part VI-B Lobbying Acti (For reporting only burning the year, did the organization at offluence public opinion on a legislative	(a) 2006  ivity by Nonelec by organizations that did ttempt to influence nation	Lobbying Expen  (b) 2005  String Public Charities I not complete Part VI-A) (See onal, state or local legislation, i	do not have t 50 on page ditures Duri (c) 200	o comp 13 of th ng 4-Ye 4	lete all of the five instructions )  ar Averaging P	eriod (d)	No	(e) Total
alendar year (or scal year beginning in)  5 Lobbying nontaxable amount  6 Lobbying ceiling amount (150% of line 45(e))  7 Total lobbying expenditures  8 Grassroots nontaxable amount (150% of line 48(e))  0 Grassroots lobbying expenditures  Part VI-B Lobbying Acti (For reporting only burning the year, did the organization at fluence public opinion on a legislative a Volunteers	(a) 2006  ivity by Nonelectory organizations that did ttempt to influence nations matter or referendum,	Lobbying Expen  (b) 2005  String Public Charities I not complete Part VI-A) (See onal, state or local legislation, in through the use of	do not have t 50 on page ditures Duri (c) 200  S page 13 of t including any	o comp 13 of th ng 4-Ye 4	lete all of the five instructions )  ar Averaging P	eriod (d) 2003		(e) Total  (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d
alendar year (or scal year beginning in)  5 Lobbying nontaxable amount  6 Lobbying ceiling amount  (150% of line 45(e))  7 Total lobbying expenditures  8 Grassroots nontaxable amount  (150% of line 48(e))  9 Grassroots lobbying expenditures  Part VI-B Lobbying Acti  (For reporting only buring the year, did the organization at fluence public opinion on a legislative at Volunteers  9 Paid staff or management (Include	(a) 2006  ivity by Nonelectory organizations that did ttempt to influence nations matter or referendum,	Lobbying Expen  (b) 2005  String Public Charities I not complete Part VI-A) (See onal, state or local legislation, in through the use of	do not have t 50 on page ditures Duri (c) 200  S page 13 of t including any	o comp 13 of th ng 4-Ye 4	lete all of the five instructions )  ar Averaging P	eriod (d) 2003		(e) Total
alendar year (or scal year beginning in)  5 Lobbying nontaxable amount  6 Lobbying ceiling amount (150% of line 45(e))  7 Total lobbying expenditures  8 Grassroots nontaxable amount (150% of line 48(e))  0 Grassroots lobbying expenditures  Part VI-B Lobbying Activation (For reporting only buring the year, did the organization at fluence public opinion on a legislative a Volunteers  0 Paid staff or management (Included Media advertisements	ivity by Nonelectory organizations that did tempt to influence natice matter or referendum, e compensation in expe	Lobbying Expen  (b) 2005  String Public Charities I not complete Part VI-A) (See onal, state or local legislation, in through the use of	do not have t 50 on page ditures Duri (c) 200  S page 13 of t including any	o comp 13 of th ng 4-Ye 4	lete all of the five instructions )  ar Averaging P	eriod (d) 2003		(e) Total  C  C  C  N/A
alendar year (or scal year beginning in)  5 Lobbying nontaxable amount  6 Lobbying ceiling amount  (150% of line 45(e))  7 Total lobbying expenditures  8 Grassroots nontaxable amount  (150% of line 48(e))  0 Grassroots lobbying expenditures  Part VI-B Lobbying Activity  (For reporting only but the organization at offluence public opinion on a legislative a Volunteers  b Paid staff or management (Include	(a) 2006  ivity by Nonelectory organizations that did itempt to influence national matter or referendum, a compensation in experience or the public	Lobbying Expen  (b) 2005  String Public Charities I not complete Part VI-A) (See onal, state or local legislation, in through the use of	do not have t 50 on page ditures Duri (c) 200  S page 13 of t including any	o comp 13 of th ng 4-Ye 4	lete all of the five instructions )  ar Averaging P	eriod (d) 2003		(e) Total  C  C  C  N/A

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities 623151 01-18-07

Schedule A (Form 990 or 990-EZ) 2006

i Total lobbying expenditures (Add lines c through h.)

g Direct contact with legislators, their staffs, government officials, or a legislative body h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means

		6 CIVIC BUILDERS		<del></del>	535313	Page 7
Part '		_		d Relationships With Nonchari	table	
51 Di		zations (See page 13 of the ins Irrectly or indirectly engage in any o		r organization described in section		
		section 501(c)(3) organizations) or				
		ganization to a noncharitable exemp			Ye	s No
	i) Cash				51a(i)	X
(i	i) Other assets				a(ii)	X
	her transactions					
		ts with a noncharitable exempt org			b(i)	X
	•	noncharitable exempt organization	1		b(II)	X
•	i) Rental of facilities, equipme		-		b(iii)	X X
	<ul> <li>r) Reimbursement arrangeme</li> <li>r) Loans or loan guarantees</li> </ul>	ents		•	b(iv) b(v)	X
	•	membership or fundraising solicita	ations		b(vi)	X
-		mailing lists, other assets, or paid		-	C	X
	-	_		always show the fair market value of the	<del></del>	
		given by the reporting organization				
tra	nnsaction or sharing arrangem	nent, show in column (d) the value	of the goods, other assets, o	r services received	N/	Α
(a)	(b)	(c)		(d)	•	
Line no	Amount involved	Name of noncharitable e	xempt organization	Description of transfers, transactions, and	snaring arrang	ements
		<u> </u>			<del>-</del>	
			· ·-			
			<del></del>			
					·	
Co	the organization directly or ini ode (other than section 501(c) "Yes," complete the following s	)(3)) or in section 527?	one or more tax-exempt org	anizations described in section 501(c) of the	Yes [	X No
	(a) Name of org	) ganization	(b) Type of organization	(c) Description of relations	hip	
						<del></del>
			·			
	· · · · · · · · · · · · · · · · · · ·				·····	
						_
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					<del>-</del> ·	
		, #1	<del> </del>			
623152 01-18-07			<u> </u>	Schedule A (For		Z) 2006

COMPUTER									
Computer   Computer	Current Year Deduction	2,037.	0	, 319	1,607.	, 889	654.	, 506	•
COMPUTER   Description   Dute   Understand   Description   Acquired   Method   Life   Understand   Excl   Basse For   Accommutated   Accomm	Current Sec 179							0	
COMPUTER	Accumulated Depreciation	4,050.			3,330.	•		34,275.	
COMPUTER	Basis For Depreciation	10,935.	860,980.		14,623.	391	4,724.	5278002	
COMPUTER	Reduction In Basis							0	
COMPUTER	Bus % Excl								
COMPUTER	Unadjusted Cost Or Basis	10,935.	860,980.			391	724		
COMPUTER   Date   Life   Lomputer	No e	16		16	<u>1</u> 6	16	9		
1COMPUTER 2LAND 3BUILDING 6OFFICE EQUIPMENT 7BUILDING 8OFFICE EQUIPMENT 7BUILDING 8OFFICE EQUIPMENT 7BUILDING 8 TOTAL 990 PAGE 2 PEPR	Life	00.		40.00	5.00	40.00			
1COMPUTER 2LAND 3BUILDING 6OFFICE EQUIPMENT 7BUILDING * TOTAL 990 PAGE 2 DEPR	Method	SI	뭐_	SL	ZI	SL	ST		
1COMPUTER 2LAND 3BUILDING 6OFFICE EQUIPMENT 7BUILDING * TOTAL 990 PAGE 2 DEPR	Date Acquired	VARIES	380104	VARIES	VARIES	VARIES	VARIES		
	Description						r		
	Asset	П	7	m	9	7	α		

(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 990 RENTAL INCOME		STATEMENT 1
KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
950 & 954 LONGFELLOW AVENUE, BRONX, NY	1	513,369.
TOTAL TO FORM 990, PART I, LINE 6A		513,369.

FORM 990 OFFIC		STATEMENT 2		
NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
DAVID UMANSKY	215,000.	18,666.	1,158.	234,824.
A. PROGRAM SERVICES	152,650.	13,253.	822.	166,725.
B. MANAGEMENT AND GENERAL	27,950.	2,427.	151.	30,528.
C. FUNDRAISING	34,400.	2,986.	185.	37,571.
TOTAL PROGRAM SERVICES				166,725.
TOTAL MANAGEMENT AND GENERA	AL			30,528.
TOTAL FUNDRAISING				37,571.
TOTAL OFFICER, ETC., COMPEN	SATION INCLUDE	D ON PART II,	, LINE 25A	234,824.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 3

#### DESCRIPTION OF PROGRAM SERVICE ONE

2006 HAS BEEN A VERY PRODUCTIVE YEAR FOR CIVIC BUILDERS (CIVIC). CIVIC'S MOST IMPORTANT ACCOMPLISHMENTS WERE COMPLETING TWO MAJOR PROJECTS (BRONX LIGHTHOUSE CHARTER SCHOOL - 43,000 SQUARE FEET, 525 STUDENTS - AND EXCELLENCE CHARTER SCHOOL OF BEDFORD-STUYVESANT - 90,000 SQUARE FEET, 600 STUDENTS) AND ONE MINOR PROJECT (BRONX CHARTER SCHOOL FOR THE ARTS PHASE II - 24,000 SQUARE FEET, 280 STUDENTS) ON-TIME AND UNDER BUDGET.

WITH THE NEW YORK CITY DEPARTMENT OF EDUCATION (DOE) CAPITAL PROGRAM, CIVIC PUT TWO ADDITIONAL BUILDINGS, 510 WAVERLY AND 900 VAN NEST, IN DEVELOPMENT. THESE TWO FACILITIES ALONE WILL BRING EDUCATIONAL OPPORTUNITY TO AN ADDITIONAL 1,560 SCHOOL CHILDREN IN OTHERWISE ACADEMICALLY UNDERSERVED COMMUNITIES. CIVIC EXPECTS THAT THE EXPERIENCE AND CAPACITY DEVELOPED IN 2006 WILL FACILITATE PROJECTS IN 2007 AND BEYOND. CHARTER SCHOOLS PROVIDE IMMEDIATE AND MUCH NEEDED RELIEF IN SOME OF THE CITY'S POOREST NEIGHBORHOODS BY AFFORDING THE NEIGHBORHOOD CHILDREN AN OPPORTUNITY FOR EDUCATIONAL EQUITY, IN ADDITION TO PLAYING A LARGE ROLE IN SEVERAL ASPECTS OF COMMUNITY DEVELOPMENT. FACILITIES REMAIN A MAJOR HURDLE TO THE CHARTER SCHOOL MOVEMENT; SINCE 2002, CIVIC HAS BEEN WORKING TO OVERCOME THAT HURDLE IN NEW YORK CITY BY CREATING LONG TERM REAL ESTATE SOLUTIONS FOR CHARTER SCHOOLS.

		GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	=		1,329,173.
FORM 990 DEPRECIATION OF ASS	ETS NOT HELD FOR	INVESTMENT	STATEMENT 4
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
COMPUTER LAND BUILDING OFFICE EQUIPMENT BUILDING OFFICE EQUIPMENT	10,935. 860,980. 3,679,349. 14,623. 707,391. 4,724.	6,087. 0. 121,214. 4,937. 86,889. 654.	4,848. 860,980. 3,558,135. 9,686. 620,502. 4,070.
TOTAL TO FORM 990, PART IV, LN 57	5,278,002.	219,781.	5,058,221.

04-36352

FORM 990	OTHER ASSETS	STATEMENT 5
DESCRIPTION		TNUOMA
DEFERRED FINANCING ACCUM. AMORTIZATION - DEFERR DEFERRED LEASING COSTS ACCUM. AMORTIZATION - DEFERR CONSTRUCTION REIMBURSEMENT R DEVELOPMENT COSTS OTHER ASSETS	ED LEASING COSTS	344,485. <242,557.> 31,549. <3,812.> 13,685. 1,647,672. 54,027.
TOTAL TO FORM 990, PART IV,	LINE 58, COLUMN B	1,845,049.

FORM 990 OTH	ER NOTES AND LOANS PAY	/ABLE	STATEMENT
LENDER'S NAME	TERMS OF REPAYMENT		
SELF- HELP VENTURE FUND	MONTHLY PAYMENTS INCLUDING PRINCIPAL A	AND	
	IGINAL INTEREST AMOUNT RATE		
10/30/06 10/29/13 4	,685,000. 7.30%		
SECURITY PROVIDED BY BORRO	WER PURPOSE OF LOAM	1	
CIVIC BUILDER'S PROPERTY	MOTGAGE ON PROP	- PERTY OWNED	
RELATIONSHIP OF LENDER			
THIRD PARTY			
DESCRIPTION OF CONSIDERATI	ON	FMV OF CONSIDERATION	BALANCE DUE
NONE	<del>_</del>	0.	4,678,048
LENDER'S NAME	TERMS OF REPAYMENT		
LENDER'S NAME  CALVERT SOCIAL INVESTMENT			
CALVERT SOCIAL INVESTMENT  DATE OF MATURITY OR			
CALVERT SOCIAL INVESTMENT  DATE OF MATURITY OR  NOTE DATE LOAN	SEMI ANNUALLY IGINAL INTEREST		
CALVERT SOCIAL INVESTMENT  DATE OF MATURITY OR NOTE DATE LOAN  07/31/06 07/31/10	SEMI ANNUALLY  IGINAL INTEREST AMOUNT RATE  300,000. 4.50%	I	
CALVERT SOCIAL INVESTMENT  DATE OF MATURITY OR NOTE DATE LOAN  07/31/06 07/31/10  SECURITY PROVIDED BY BORRO	SEMI ANNUALLY  IGINAL INTEREST AMOUNT RATE  300,000. 4.50%	-	
CALVERT SOCIAL INVESTMENT  DATE OF MATURITY OR NOTE DATE LOAN  07/31/06 07/31/10  SECURITY PROVIDED BY BORRO  NONE	SEMI ANNUALLY  IGINAL INTEREST AMOUNT RATE  300,000. 4.50%  WER PURPOSE OF LOAN	-	
CALVERT SOCIAL INVESTMENT  DATE OF MATURITY OR	SEMI ANNUALLY  IGINAL INTEREST AMOUNT RATE  300,000. 4.50%  WER PURPOSE OF LOAN	- GTS	
CALVERT SOCIAL INVESTMENT  DATE OF MATURITY OR NOTE DATE LOAN  07/31/06 07/31/10  SECURITY PROVIDED BY BORRO  NONE  RELATIONSHIP OF LENDER	SEMI ANNUALLY  IGINAL INTEREST AMOUNT RATE  300,000. 4.50%  WER PURPOSE OF LOAN DEVELOPMENT COS	-	BALANCE DUE

LENDER'S NAME	TERMS OF	REPAYMENT		
RAZA DEVELOPMENT FUND	MONTHLY I	NTEREST		
	IGINAL AMOUNT	INTEREST RATE		
10/01/05 05/11/08	500,000.	5.00%		
SECURITY PROVIDED BY BORRO	WER PUR	POSE OF LOAN		
NONE	DEV	ELOPMENT COS	TS	
RELATIONSHIP OF LENDER				
THIRD PARTY			FMV OF	
DESCRIPTION OF CONSIDERATION	ON			BALANCE DUE
NONE			0.	237,350.
LENDER'S NAME	TERMS OF	REPAYMENT		
LOW INCOME INVESTMENT FUND	MONTHLY II	NTEREST		
	IGINAL AMOUNT	INTEREST RATE		
12/09/05 12/31/08	500,000.	6.00%		
SECURITY PROVIDED BY BORRO	WER PUR	POSE OF LOAN		
NONE	DEV	ELOPMENT COS	rs	
RELATIONSHIP OF LENDER				
THIRD PARTY			EMIZ OF	
DESCRIPTION OF CONSIDERATION	ON		FMV OF CONSIDERATION	BALANCE DUE

94,203.

5,309,601.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B

NONE

FORM 990	ОТНЕБ	R LIABILITIES		STAT	EMENT 7
DESCRIPTION				Al	MOUNT
TENANT SECURITY DEL		S PAYABLE		1	171,972. ,128,987.
TOTAL TO FORM 990,	PART IV, LINE 6	55, COLUMN B			,300,959.
FORM 990 PART	V-A - LIST OF CU TRUSTEES A	URRENT OFFICERS,		STAT	EMENT 8
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DAVID UMANSKY 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING, #900	CEO 40.00	215,000.	18,666.	1,158.
BRIAN OLSON 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING, #900	CHAIRMAN 1.00	0.	0.	0.
D. LESLIE WINTER 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING, #900	SECRETARY 1.00	0.	0.	0.
KELLY WACHOWICZ 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING, #900	TREASURER 1.00	0.	0.	0.
MIMI CORCORAN 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING, #900	BOARD MEMBER 1.00	0.	0.	0.
BRAHM CRAMER 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING, #900	BOARD MEMBER 1.00	0.	0.	0.
JORDAN MERANUS 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING, #900	BOARD MEMBER 1.00	0.	0.	0.
J. DAVID SWEENY 160 BROADWAY, EAST NEW YORK, NY 10038	BUILDING, #900	BOARD MEMBER 1.00	0.	0.	0.

CIVIC BUILDERS, INC.			04	-3635313
MARK VAN BRUNT 160 BROADWAY, EAST BUILDING, # NEW YORK, NY 10038	BOARD MEMBER #900 1.00	0.	0.	0.
JAMES WILCOX 160 BROADWAY, EAST BUILDING, # NEW YORK, NY 10038	BOARD MEMBER #900 1.00	0.	0.	0.
AMY WOLF 160 BROADWAY, EAST BUILDING, # NEW YORK, NY 10038	BOARD MEMBER #900 1.00	0.	0.	0.
DAVID WOO 160 BROADWAY, EAST BUILDING, # NEW YORK, NY 10038	BOARD MEMBER #900 1.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990, F	PART V-A	215,000.	18,666.	1,158.
	ELATIONSHIP OF ACTI HMENT OF EXEMPT PUR		STATE	MENT 9
LINE EXPLANATION OF RELATION  93A CONSULTING FEES WERE GE	<del>.</del>	-		

9 3 A	CONSULTING FEES WERE GENERATED INCOUGH SERVICES PROVIDED TO CHARTER
93A	SCHOOLS AND NOT-FOR-PROFITS THAT CONTRIBUTED TO THE ORGANIZATION'S
93A	EXEMPT PURPOSE.
93B	DEVELOPMENT FEE WAS GENERATED IN CONNECTION WITH THE BUILDING LOCATED
93B	AT INTERVALE AVENUE. THE DEVELOPMENT FEE WAS IN CONNECTION WITH THE
93B	ORGANIZATION'S EXEMPT PURPOSE.

SCHEDULE A

EXPLANATION OF TRANSACTIONS PART III, LINE 2D

**STATEMENT** 

10

DAVID UMANSKY, CEO/EXCUTIVE DIRECTOR, RECEIVED A SALARY OF \$215,000. HIS SALARY IS APPROVED BY THE BOARD AND DEEMED TO BE COMENSURATE WITH HIS DUTIES.

SCHEDULE A	OTHER INC		STATEMENT 11	
DESCRIPTION	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT	2002 AMOUNT
MISCELLANEOUS	0.	1,536.	0	2,834.
TOTAL TO SCHEDULE A, LINE 22	0.	1,536.	0	2,834.

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization**

(Including Information on Listed Property) See separate instructions. Attach to your tax return.

990

OMB No. 1545-017.

Sequence No 67

Name(s) shown on return Business or activity to which this form relates Identifying number CIVIC BUILDERS, INC. FORM 990 PAGE 2 04-3635313 Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 108,000. 1 Maximum amount. See the instructions for a higher limit for certain businesses 2 2 Total cost of section 179 property placed in service (see instructions) 430,000. 3 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If marned filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 10 Carryover of disallowed deduction from line 13 of your 2005 Form 4562 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2007 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 185,506. 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2006 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2006 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and (d) Recovery (a) Classification of property (e) Convention (f) Method (a) Depreciation deduction vear placed penod in service only - see instructions) 19a 3-year property h 5-year property C 7-year property 10-year property đ 15-year property 20-year property 25-year property 25 yrs. S/L 9 27.5 yrs. MM S/L Residential rental property 27.5 yrs. MM S/L MM 39 yrs. S/L Nonresidential real property MM Section C - Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs. S/L 40-vear 40 yrs. ММ S/L Part IV | Summary (see instructions) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 185,506. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23 616251 10-17-06 LHA For Paperwork Reduction Act Notice, see separate instructions. Form 4562 (2006)

year (do not include commuting miles) 31 Total commuting miles driven during the year 2 Total other personal (noncommuting) miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle available for personal use during off-duty hours? 36 Was the vehicle available for personal use during off-duty hours? 37 Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees  Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 50 owners or related persons.  37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?  38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees?  39 Do you treat all use of vehicles by employees about the use of the vehicles, and retain the information received?  40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?  41 Do you maintain a written policy described by the properties of the vehicles.  42 Amortization of costs that begins during your 2006 tax year:  43 Amortization of costs that began before your 2006 tax year.  43 Amortization of costs that began before your 2006 tax year.	, \		0.717	TO DUT	DEDC								0.4	2625	2= 2"		
recordation, or anuscream? (her you are vary the standard mission rate or deducting lease expensa, complete only 24a, 24b, column transport of control of								Jular tolo	nhone	e certain	computer	m and					
Section A - Depreciation and Other Information (Caution: See the Instructions for limits for passenger automobiles).  42 By vol. 19 April 19 Dist (1) Copy (1) Dist (	Falt	recreation, or a <b>Note</b> : For any v	musement) ehicle for wh	hich you are ι	ising the	standar	d mileag	e rate or			-		-	-			
24a D voys have endonce to support the business/investment use claimed?   Yes   No   24b If Yes, Is the evidence within?   Ves   10   10   10   10   10   10   10   1	Section								mits fr	or nasseno	er autom	obiles	· · · · ·				
(c) Type of property (part of party) (party of party) (party of party) (party of party) (party of party) (party) -								<del></del>	T				tten?	Ves	No		
Type of Typoparty (1984 vehicles first ) Placed in Service (1984 vehicles (1984 v					1		<u> T</u>			T	Г '		100 1111				
25 Speal allowance for qualified New York Unerly or Guif Opportunity Zone property placed in service during the tax year 25 and used more than 50% in a qualified business use:  26 Proporty used more than 50% in a qualified business use:  27 Property used 50% or less in a qualified business use.  28 Add amounts in column (in), lines 25 through 27. Enter here and on line 21, page 1  29 Add amounts in column (in), lines 25 through 27. Enter here and on line 21, page 1  29 Add amounts in column (in), line 26. Enter here and on line 7, page 1  29 Add amounts in column (in), line 26. Enter here and on line 7, page 1  29 Add amounts in column (in), line 26. Enter here and on line 7, page 1  29 Add amounts in column (in), line 26. Enter here and on line 7, page 1  29 Add amounts in column (in), line 26. Enter here and on line 7, page 1  29 Add amounts in column (in), line 26. Enter here and on line 7, page 1  29 Ventole this section for vehicles used by a sole proprietor, partner, or orther 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  30 Total business/investment miles driven during the year 20 Total other personal (monocommuting) miles of the year (do not include commuting) miles of the year 20 Total other personal (monocommuting) miles of year 20 Total other personal (monocommuting) miles of year 20 Total other personal (monocommuting) miles of year 20 Total other personal (monocommuting) miles of year 20 Total other personal (monocommuting) miles of year 20 Total other personal (monocommuting) miles of year 20 Total other personal (monocommuting) miles of year 20 Total other personal (monocommuting) miles of year 20 Total other personal (monocommuting) miles of year 20 Total other personal (monocommuting) miles of year 20 Total other personal (monocommuting) miles of year 20 Total other personal (monocommuting) miles of year 20 Total other personal (monocommu		pe of property	placed in	investmen	t	Cost or Basis for depreciation (business/investment		stment	Recovery	Method/			epreciation Ele deduction secti		cted on 179		
Property used more than 50% in a qualified business use:					Opportun	ity Zone p	roperty (	placed in s	service	during the	tax year	25					
95					ess use:	•					-	1 20	<u> </u>		L		
Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by a more than 5% owners or related personal use?    Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing because of vehicles are not or related person.	·															<del></del>	
Property used 50% or less in a qualified business use.   56					%												
SAL   SAL					%												
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1  29 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1  29 Add amounts in column (h), lines 25 through 27. Enter here and on line 7, page 1  29 Add amounts in column (h), lines 25 through 27. Enter here and on line 7, page 1  29 Section 8 — Information on Use of Vehicles  Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  (a) (b) (c) (d) (e) (f) (vehicle vehicle veh	27 Pro	perty used 50% or le	ess in a quali	fied business	use.												
28 Add amounts in column (ii), lines 25 through 27. Enter here and on line 21, page 1  29 Add amounts in column (iii), lines 25 through 27. Enter here and on line 21, page 1  29 Section B - Information on Use of Vehicles  Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.  If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  (a) (b) (c) (d) (e) (f)  Vehicle V					%						S/L -		ļ				
29 Add amounts in column (i), lines 25 through 27. Enter here and on line 21, page 1  29 Add amounts in column (i), line 26. Enter here and on line 7, page 1  Section 8 - Information on Use of Vehicles  Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or leated person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  (a) (b) (c) (d) (e) (f) (e) (f) (vehicle Vehicle				%						1		ļ	_				
Section 6 - Information on Use of Vehicles  Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.  If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  (a) (b) (c) (d) (e) (f)  Vehicle Veh										<u> </u>	S/L·	_	<u></u>				
Section B - Information on Use of Vehicles  Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.  If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  (a) (b) (c) (d) (e) (yhicle Vehicle			• •	_				, page 1				_28	<u> </u>				
Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.  If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  30 Total business/investment miles driven during the year (do not include commuting miles)  31 Total commuting miles driven during the year 22 Total other personal (noncommuting) miles driven during the year.  Add lines 30 through 32  33 Was the vehicle available for personal use during off-duty hours?  35 Was the vehicle available for personal use during off-duty hours?  36 Is another vehicle available for personal use?  Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees  Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related person?  37 Do you maintain a written policy statement that prohibits all personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners  39 Do you treat all use of vehicles to you employees, obtain information from your employees about the use of the vehicles, and retain the information received?  40 Do you meet the requirements concerning qualified automobile demonstration use?  Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.  42 Amortization of costs that begins during your 2006 tax year.  43 Amortization of costs that begins during your 2006 tax year.	<b>29</b> Add	amounts in column	(ı), line 26. E	•										29	<u> </u>		
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