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Department of the Treasury

## **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

OMB No 1545-0047 2008 Open to Public

mile	Illai Nevellue Sei	vice	The diganization may have to use a copy of this return to said		oporang rodan	Cincino	Inspection
<u> </u>	For the 2008 ca	lendar y		31/09			
В	Check if applicable	Please	c Name of organization American College of the	Build	ding	D Emplo	yer identification number
Ш	Address change	use IRS label or	Building Arts				
$\Box$	Name change	print or	Doing Business As				1075250
$\bar{\Box}$	Initial return	type. See	Number and street (or P O box if mail is not delivered to street address)		Room/suite		one number -577-5245
百	Termination	Specific	21 Magazine Street  City or town, state or country, and ZIP + 4			G Gross rece	4 455 064
$\Pi$	Amended return	Instruc- tions.	Charleston SC 29401			G Gloss lead	ipis\$
H	Application pending		e and address of principal officer			H(a) Is this	a group return for
ш	Application pending	Lt	. Gen. (Ret.) Colby M. Broadwater			affiliate	
		21	Magazine Street			H(b) Are all include	affiliates Yes No
			arleston SC 29401			If "No,"	attach a list. (see instructions)
1_	Tax-exempt state		501(c) ( <b>3</b> ) <b>◄</b> (insert no.) 4947(a)(1) or 527				
$\overline{}$			ouildingartscollege.us	1		H(c) Group	exemption number
	Type of organization		·	L Yea	ar of formation		M State of legal domicile
P		umma					<del></del>
			he organization's mission or most significant activities	: _			
92	1		ican College of the Building Arts (ACBA) i d to edicating the next generation of buil				
Activities & Governance	1		and to preserve the building arts in a ma	_			
Ve	l				5% of its asse	te	
ő			g members of the governing body (Part VI, line[4]a)	ore than 2.	5 70 OI RS 433C	3	20
တို	1		endent voting members of the governing body (Part VI, line 1b)			4	20
/Ħje	1		ompleyees (Part V. June 2a)			5	40
Ę	6 Total nu	mber of	volunteers (estimate if necessary) $\mu = 0$			6	
⋖	7a Total gro	oss unre		7a			
	b Net unre	elated bu		7b	0		
		_	d grants (Part VIII, line 1h) revenue (Part VIII, line 2g)		Prior Ye		Current Year
ē	8 Contribu		7,444	628,955			
Revenue	9 Program		14:	5,428	757,723		
. §	10 Investment 11 Other re		10:	2,134	88,383		
				5,006	1,475,061		
}—			add lines 8 through 11 (must equal Part VIII, column (A), line 12) ar amounts paid (Part IX, column (A), lines 1-3)			3,000	2/1/0/002
5	1		or for members (Part IX, column (A), line 4)				<del></del>
s		•	ompensation, employee benefits (Part IX, column (A), lines 5–10)		1,19	2,363	1,534,409
enses	1		draising fees (Part IX, column (A), line 11e)				
Expe	b Total fur	ndraising	expenses (Part IX, column (D), line 25)  106,268	8	· · · · · · · · ·		
Ш	17 Other ex	cpenses	(Part IX, column (A), lines 11a-11d, 11f-24f)			3,338	1,164,733
		-	Add lines 13-17 (must equal Part IX, column (A), line 25)			5,701	2,699,142
	19 Revenue	e less ex	penses Subtract line 18 from line 12		Beginning o	0,695	-1,224,081 End of Year
ets o	20 Total as	sats (Pa	rt X, line 16)			6,780	2,087,254
Ass	20 Total la	•	Part X, line 26)			3,770	4,088,325
Net Assets or	22 Net asse	•	nd balances Subtract line 21 from line 20			6,990	-2,001,071
			re Block	•			
	Ur	nder penfa	ties of periury. I declare that I have examined this return, including accompanying s	schedules a	nd statements, a	and to the be	st of my knowledge
	an	id belief i	s true, correct, and complete Declaration of preparer (other than officer) is based	l on all infor	mation of which	preparer has	any knowledge
Sig	gn 📗		and w I snow works can				
He	ere /	- 0	re of officer			Date	76 7010
		· <del></del>		resid	lent		26 oct 2010
_		Type o	print name and title	_	1		Preparer's identifying number
Pa	1/4	eparer's		Date	Check self-	. [	(see instructions)
	eparer's	gnature		10/26	/10 employ	T	P00724565
	•	rm's name	GlaserDuncan, CPAs	2 01	- 3	EIN	<b>▶</b> 20-5788602
	if s	self-emplo Idress, an		3 ST	e A	Phone	0/3-0/0-0655
N4-					-	no 🕨	843-849-0655
_	<u> </u>		eturn with the preparer shown above? (see instructions)  Paperwork Reduction Act Notice, see the separate instructions.				Yes No
DAA	~ FULFIVACY	ALL GITC	r aperwork iteuucuon Act House, see ule separate ilisuucuons.				1 01111 220 (2000)

Form 990 (2008)	American College	of the Building 57-1	.075250	Page 2
		ice Accomplishments (see instruction	ns)	
	be the organization's mission			
		the Building Arts (ACBA		
		the next generation of be the building arts in a		
ar crsans	and to preserve	che building arts in a	maimer	
2 Did the organ	nization undertake any significant	program services during the year which were no	t listed on	
=	n 990 or 990-EZ?			Yes X No
If "Yes," desc	cribe these new services on Sche	dule O		
3 Did the organ	nization cease conducting, or mak	e significant changes in how it conducts, any pro	ogram	
services?				Yes X No
	cribe these changes on Schedule		b	
		or each of the organization's three largest program and section 4947(a)(1) trusts are required to rep		
		evenue, if any, for each program service reported	<del>-</del>	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
4a (Code:		83,956 including grants of \$	) (Revenue \$	)
		classic building trade		
		es or Baccalaureate deg		
		aftsmanship and leaders		
	orld's architect	on, enrichment and under	rstanding	
OI CHE H	oria s architect	draf Herriage.		
Ab (Codo	\/Evnange	uncluding groups of C	\ /Perenue f	
4b (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
44.00		20)		
· -	m services (Describe in Schedule		Povonuo ¢	
(Expenses \$	m service expenses > \$	uding grants of \$ ) (F 2,083,956 (Must equal Part IX, Line	Revenue \$	
io romi progra	oc. vice expelience	= , 200 , 200 (mast oqual t art IX, Ellio		Form <b>990</b> (2008)

_ Pa	art IV Checklist of Required Schedules			_
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"		ŀ	
	complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,		İ	
	Parts VI, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the U.S?	_14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b–24d and complete Schedule K If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c	<u> </u>	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a				
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			_
	substantial contributor, or to a person related to such an <u>individual? If "Yes,"</u> complete Schedule L, Part III	27	1	X

_ P	art IV : Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part

organization? If "Yes," complete Schedule R, Part V, line 2

Form **990** (2008)

X

36

36

37

Pa	irt V Statements Regarding Other IRS Filings and Tax Compliance					
_					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			1		
	U.S. Information Returns Enter -0- if not applicable	1a	<del> </del>			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	1-			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portabl	ne			X
2-	gaming (gambling) winnings to prize winners?	1	1	1 <u>c</u>		
2a	···	1 22	40			
_	Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax retu	2a	1 40	<u> </u>		X
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			2b		
	instructions)	•				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by				
Ja	this return?	Ju Dy		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		<del></del> -
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authori	ritv	52		$\overline{}$
	over, a financial account in a foreign country (such as a bank account, securities account, or other file		-			
	account)?			4a		X
b	If "Yes," enter the name of the foreign country					A 19
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank				. *
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?		5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	<i>'</i>				
	Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or				
	gifts were not tax deductible?			6b	3000 - 2 %	- A
7	Organizations that may receive deductible contributions under section 170(c).			* * *		*
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	tnan				x
<b>L</b>	\$75?			7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	26		7b		<del></del>
С	required to file Form 8282?	<b>a</b> 5		7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	1	/ C		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	$\overline{}$	al		*	
•	benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri	act?		7f		х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-	C as				
	required?			7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec	tion		*		l `i
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spot	nsoring	9			ائـــــ ـا
	organization, have excess business holdings at any time during the year?			8		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			·		- <u>-</u>
а	Did the organization make any taxable distributions under section 4966?			9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X
10	Section 501(c)(7) organizations. Enter	ا مدا	1		*	1
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	-			ĺ .
b 14	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	l			
11	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders	11a	1			!
a b	Gross income from other sources (Do not net amounts due or paid to other sources against	1a				!
	amounts due or received from them )	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		>	12a		'
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			*	

State the name, physical address, and telephone number of the person who possesses the books and records of the

21 Magazine Street

SC 29401

843-577-5245

Charleston

20

organization ▶ Ginna Waddell

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors, institutional trustees; officers, key employees; highest <a href="mailto:compensated">compensated employees</a>, and former such persons

Check this box if the o	rganization did not compe	nsate	e any	y offi	cer,	direc	tor,	trustee, or key employee		
(A)	(B)				<b>)</b>			(D)	(E)	(F)
Name and Title	Average hours per week		_		Call t	hat ap	opiy)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	mer	the organization	organizations (W-2/1099-MISC)	compensation from the
		e tu	onal t		ploye	e moo		(W-2/1099-MISC)	(11 2 1000 111100)	organization and related
		stee	ruste		ă	pens				organizations
			Õ			ated				
Pierre Manie	ault									
Chair	4	X		X				0	0	0
Denis Drew										
Treasurer	4	X		X				0	0	0
Ben Bishop,	Jr.									
Director	1	X						0	0	0
Al Katz						1				
Director	1	X			<u> </u>			0	0	<u> </u>
John LaVerne						Ì				_
Director	1	X	<u> </u>	<u> </u>				0	0	0
	in Carrington									
Director	1	X						0	0	0
Shay McNeal					}					
Director	1	X		<u> </u>		ļ		0	0	0
Lindsay Nevi	n					i				
Director	1	X						0	0	0
A. Bert Prui	tt, Jr., MD									
Director	1	X						0	0	0
Charles T. C	ole, Jr.									
Director	1	X						0	0	0
Mary Scott	uest								:	
Director	1	X						0	0	0
Harriet Rigr	ley				ŀ					
Director	1	X						0	0	0
James L. Cok	er									
Director	11	X						0	0	<u> </u>
John Howard										
Sec	2	X	L.	X	<u>.</u>			0	0	0
Colby Broad										
President	40			X		<u> </u>		115,385	0	0
Robert Morri							1			
Dir. of Fin.	40			X		$oxed{ightarrow}$	<u> </u>	59,906	0	0
	<u> </u>			L_	<u>L</u> _		L	<u></u>		

Part VII Section A	A. Officers, Directors, Tru	stees	s, Ke	y Er	nplo	yees	, an	d Highest Compensated	Employees (continued)	Pag
(A) Name and title	(B) Average	<b>—</b>	tion (	chec	C) k all t	hat a		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
						ä				
							-			
Total  Total number of indi  organization ▶ 1	ividuals (including those in	1a) v	who	rece	ıved	mor	► e tha	175,291 an \$100,000 in reportable of		
Did the organization employee on line 1a For any individual lis the organization and individual Did any person liste	a? If "Yes," complete Sche sted on line 1a, is the sum d related organizations gre	of re ater t	J for porta han comp	suci able \$150 bens	h ind com 0,00 atior	lividu pens 0? If	al atio "Yes n an	nyee, or highest compensation and other compensation s," complete Schedule J for y unrelated organization for such person	from r such	3 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
ection B. Independent	Contractors							ractors that received more	than \$100,000 of	
compensation from	the organization (A) Name and business address							Descrip	(B) trion of services	(C) Compensation
Total number of inde	ependent contractors (incli	uding	tho	se in	1) v	vho r	ecei	ved more than \$100,000 ir	1	***
compensation from	the organization >						_			0 Form <b>990</b> (20

<u> Pa</u>	<u>rt V</u>	III Statement of R	<u>levenue</u>	<u> </u>										
1						(A) Total rev	enue	(B) Relate exem functi	pt on	(C) Unrelate busines revenue	s	exclu und	(D) Revenue ided fron ler section	n tax ons
S SS	10	Federated campaigns	1a					reven	ue			312,	513, or	514
ant	h	Membership dues	1b											
g, mo		Fundraising events	1c											1
ifts ar a	 a	Related organizations	1d									İ		1
s, g mila	· ·	Government grants (contributions)	1e		83,971							İ		
Sir		• • •	16		03,311									
buti	ı	All other contributions, gifts, grants, and similar amounts not included ab	ove 1f	5	44,984							İ		
doi	~	Noncash contributions included in life			34,809							İ		
Col	y	Total. Add lines 1a–1f	105 10-11	-	.51,505	62	28,955					į		1
ē	<del></del>	TOTAL TITLE TO THE		<del> </del>	Busn. Code		,							
Program Service Revenue   Contributions, gifts, grants and other similar amounts	2a	Turtion and Fees	s.net		Dasii. Gode	58	34,206	58	34,206	<del></del>				
Rev	b	City Jail and To		als			20,684		0,684					
ice	c	Fundralsing/Educ					2,833		2,833					
èr	d													
Ē	e													
gra	f	All other program service	revenue											
P	a	Total. Add lines 2a-2f			<u> </u>	75	7,723					ĺ		
	3	Investment income (inclu	dıng divid	ends, intere	est, and									
		other similar amounts)			•									
	4	Income from investment of	of tax-exe	mpt bond p	roceeds >									
	5	Royalties			•									
		(i) F	Real	(u) F	Personal	» «	<i>A</i>		» ·	**		į į	, . 	,
	6a	Gross Rents				. **	*	* * *		* *	, ·	İ	* . *	
	b	Less rental exps				* \$ >	4 .	>			. *		*	
	C	Rental inc or (loss)				_xx							······································	
	d	Net rental income or (loss	s)			*****						<u> </u>		
	/ a	Gross amount from sales of assets (i) Sec	unties	(11	) Other					*	Į	,		
		other than inventory	· · · · · - ·				« «	1 4	» «»	* '	]			<b>,</b>
	b	Less cost or other					* *	·				: 	3.	!
		basis & sales exps				A)	* *					į		
		Gain or (loss)		_L										
	d	Net gain or (loss)	- auanta			* .			*				4	
0	oa	Gross income from fundraisin (not including \$	g events					× ,	*				<i>y</i> ** :	,
enu		of contributions reported on li	ne 1c)					<	6	a * ·				a .
Şev.		See Part IV, line 18	•	a			., .,			/ 8		ĺ	a sk	,
er F	h	Less. direct expenses		5		\$			3			İ	4	
Other Revenu	C	Net income or (loss) from		_	<b>•</b>						term from a second	i	allomana e ma	someon or
)	_	Gross income from gaming ad					~							i
		See Part IV, line 19		a										
	b	Less. direct expenses	1	b										
	С	Net income or (loss) from	gaming a	ctivities	<b>•</b>									
	10a	Gross sales of inventory,	less											
		returns and allowances	i	a		•	*	*			>			*
	b	Less cost of goods sold	1	b				··········			<b>-</b>			
	С	Net income or (loss) from		nventory	<u> </u>									
		Miscellaneous Re		<del></del>	Busn. Code									
	11a	Miscellaneous Rev	enue				38,383					<u> </u>	88	, 383
	b													
	C													
	d	All other revenue					20 202						——	
	e	Total Revenue Add lines		. A E 64 .	7d 9c		38,383		*					
	12	Total Revenue. Add lines	> 111, ∠g, 3	o, 4, 5, 60,	ru, oc,	1 47	75,061	71	57,723		0		QΩ	, 383
		9c, 10c, and 11e				-,-	. 5,001		, . 2 3					, 555

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

Do					
7b	o not include amounts reported on lines 6b, b. 8b. 9b. and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				 
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				ć !
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				^ ;
5	Compensation of current officers, directors, trustees, and key employees	175,290	28,846	134,905	11,539
6	Compensation not included above, to disqualified	113,290	20,040	134,903	11,339
Ĭ	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,148,164	950,724	140,707	56,733
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	65,692	47,496	13,335	4,861
10	Payroll taxes	145,263	105,025	29,488	10,750
11	Fees for services (non-employees).				
a	Management	24,827		24,827	
b	LegalAccounting	10,250		10,250	
ď	Lobbying	10,230		10,230	
e	Professional fundraising services See Part IV, line 17			* *	
f	Investment management fees	•			
g	Other	9,956	9,956		
12	Advertising and promotion	4,175	2,080	2,080	15
13	Office expenses	21,323	5,226	6,693	9,404
14	Information technology	11,440	1,040	10,400	
15	Royalties Occupancy	524,230	479,603	38,043	6,584
16 17	Travel	16,808	15,349	1,459	0,304
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	160		160	
20	Interest	135,408	81,245	54,163	
21	Payments to affiliates	107 604	25 522	05.506	
22	Depreciation, depletion, and amortization	127,631 49,705	95,723 32,823	25,526 16,882	6,382
23	Insurance	49,705	32,823	10,002	
24	Other expenses Itemize expenses not	* * * /	`	, ·	
	covered above (Expenses grouped together		\$		ļ
	and labeled miscellaneous may not exceed		,	*	; ; ;
	5% of total expenses shown on line 25 below )	,			* 1
а	Miscellaneous	126,383	126,383		<del></del>
b	Instructional Supplies	56,612	56,612		
C	License and Accreditation	29,562	29,562		<del></del>
d	Relocation Expense	16,263	16,263		
e f	All other expenses	-	<del></del>		
25	Total functional expenses. Add lines 1 through 24f	2,699,142	2,083,956	508,918	106,268
26		, ,	,		

<u>P</u>	<u>art X</u>	Balance Sheet					·
					(A)		(B) End of year
	r				Beginning of year	<del>                                     </del>	<del></del>
	1	Cash—non-interest bearing		-	44,388		60,260
	2	Savings and temporary cash investments		-	50.040	2	50 540
	3	Pledges and grants receivable, net			79,243	-	59,743
	4	Accounts receivable, net			44,820	4	158,674
	5	Receivables from current and former officers, directors, t	trustees	, key			
		employees, or other related parties Complete Part II of S	Schedul	le L		5	
	6	Receivables from other disqualified persons (as defined	under s	ection			1
		4958(f)(1)) and persons described in section 4958(c)(3)(I	B). Com	nplete		.  .	
		Part II of Schedule L				6	
ţ	7	Notes and loans receivable, net			220,835	7	271,115
Assets	8	Inventories for sale or use				8	
Ą	9	Prepaid expenses and deferred charges			11,162	9	12,368
	10a	Land, buildings, and equipment cost basis	10a	2,048,044			
	b	Less accumulated depreciation Complete					
		Part VI of Schedule D	10b	523,080	1,965,542		
	11	Investments—publicly traded securities			790	11	130
	12	Investments—other securities See Part IV, line 11		12			
	13	Investments—program-related See Part IV, line 11	13				
	14						
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34	16	2,087,254			
	17	Accounts payable and accrued expenses	17	1,198,205			
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
Liabilities	21	Escrow account liability Complete Part IV of Schedule D	)			21	
	22	Payables to current and former officers, directors, trustee	es, key		* . * * *		** **
	ľ	employees, highest compensated employees, and disqu		*		* * * * * * * * * * * * * * * * * * * *	
Ξ		persons. Complete Part II of Schedule L	1,606,101	22	1,948,557		
	23	927,433					
	24	Unsecured notes and loans payable				24	
	25	Other liabilities Complete Part X of Schedule D	18,540	25	14,130		
	26	Total liabilities. Add lines 17 through 25			3,143,770	26	4,088,325
ces		Organizations that follow SFAS 117, check here ▶ 🎇	and		*		
ဦ		complete lines 27 through 29, and lines 33 and 34.	_				
Balan	27	Unrestricted net assets			-949,180		-2,165,032
ã	28	Temporarily restricted net assets			172,190	28	163,961
pu	29	Permanently restricted net assets				29	
Fund		Organizations that do not follow SFAS 117, check her	re▶ [	]	«	~	· * *
5		and complete lines 30 through 34.				_	* . *
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building, or equipment	t fund			31	
Ş	32	Retained earnings, endowment, accumulated income, or	r other f	unds		32	
et/	33	Total net assets or fund balances			-776 <u>,</u> 990	33	-2,001,071
Net	34	Total liabilities and net assets/fund balances			2,366,780	34	2,087,254
P	art X	Financial Statements and Reporting					
							Yes No
1	Acc	counting method used to prepare the Form 990	ash	X Accrual Ot	her		
2	a We	ere the organization's financial statements compiled or rev	/iewed b	y an independent accoun	tant?		2a X
ı	) We	ere the organization's financial statements audited by an ir	ndepend	dent accountant?			2b X
		Yes" to lines 2a or 2b, does the organization have a comm			for oversight of		
		e audit, review, or compilation of its financial statements a					2c X
3	a As	a result of a federal award, was the organization required	to unde	ergo an audit or audits as	set forth in		
	the	Single Audit Act and OMB Circular A-133?					3a
_ (		Yes," did the organization undergo the required audit or a	udits?_				3b

### SCHEDULE A

(Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2008
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

American College of the Building Building Arts

Employer identification number 57–1075250

Pa	Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)															
Γhe	orga	nization is not	a private founda	tion becaus	eitıs (F	Please check of	only one	organizati	on.)					-		
1		A church, co	nvention of churc	hes, or ass	ociation	of churches d	escribed	ın sectioi	170(b)(1	I)(A)(i).						
2	X	A school des	cribed in section	170(b)(1)(	<b>A)(ii).</b> (At	tach Schedule	eE)									
3	П		a cooperative ho					ction 170	(b)(1)(A)(	iii). (Atta	ich Sche	edule H	)			
4	П		search organizat											ospital's nan	ne.	
•		city, and stat			a oo.,						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			,	
5	$\Box$	•	on operated for t	he henefit (	of a colle	ne or universi	tv owned	or operat	ed by a d	overnme	ental unu	t descri	hed in			
Ŭ	Ш		b)(1)(A)(iv). (Cor			go or amvoron	ty ownor	o. opo.ac		0.00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. 000011	50 <b>4</b>			
c		•		-	-	ntal unit doco	ribod in a	aatian 47	70/L\/4\/A	\/\						
6	Н		ite, or local gove								from the		مراطريم ا			
7	Ш	-	on that normally			-	support in	om a gove	emmenta	unit or	nom me	genera	ii public	•		
_			section 170(b)(1		-	-	alada Dawl									
8	Н		trust described													
9	Ш	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 exempt 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														
	$\Box$	-	he organization a										•			
10	Н	•	on organized and	•				•			•		•			
11	Ш	•	on organized and	•		•		•		-	•					
			one or more publ	• • •	-							-	section	1		
		509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h														
	$\Box$	a  Type I b Type II c Type III-Functionally Integrated d Type III-Other														
е	$\sqcup$	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified														
		persons other than foundation managers and other than one or more publicly supported organizations described in section														
		509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting														
f				written dete	erminatio	n from the IRS	s that it is	a Type I,	Type II,	or Type	III suppo	orting				
		_	check this box					_								
g		Since August	t 17, 2006, has th	ne organiza	tion acce	pted any gift of	or contrib	ution from	n any of th	1e						
		following per														
		(i) A persor	who directly or	indirectly co	ontrols, e	ther alone or	together	with perso	ons descr	ibed ın (	iı)			_	Yes	No
		and (III)	pelow, the govern	ning body o	f the sup	ported organiz	zation?							11g(	1)	┿
		(ii) A famıly	member of a per	rson describ	oed in (ı)	above?								11g(	iı)	┷
		(iii) A 35% c	ontrolled entity o	f a person o	described	l ın (ı) or (ıı) al	bove?							11g	iii)	
h		Provide the	following informa	tion about t	he organ	izations the o	rganızatıo	n suppor	ts							
(i)	Name	e of supported	(ii) EIN	1	(iii)	Type of organiz	ation	(iv) Is the	organization	(v) Did y	ou notify	(vi)	s the	(vii) A	mount c	 of
	org	anızatıon			,	scribed on lines			sted in your	· · · · ·	nization in	organizat			pport	
						oove or IRC sect see instruction		governing	document?		of your cort?	1 •	zed in the S ?			
					, ,		,	Yes	No	Yes	No	Yes	No			
						<del>. , </del>										
									Ì		ļ					
					<del></del>											
							-									
								+								
	-						<del></del>	-						ļ		
4																

Sche	edule A (Form 990 or 990-EZ) 2008 Ame					-10/5250	Page 2						
Pa	Support Schedule for O (Complete only if you ch				(1)(A)(iv) and	170(b)(1)(A)(vi)							
Sec	tion A. Public Support												
Cal	lendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total						
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")												
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf												
3	The value of services or facilities furnished by a governmental unit to the organization without charge												
4	Total. Add lines 1-3												
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	***	, , , , , ,		, , , , , , , , , , , , , , , , , , ,	* * *							
6	Public support. Subtract line 5 from line 4	**	; * *	, % , %	*** * *	* 1 ,	-						
	tion B. Total Support	<u> </u>	<u>"</u> 1	L		<u> </u>							
_	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total						
7	Amounts from line 4	(=,	(-)										
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources												
9	Net income from unrelated business activities, whether or not the business is regularly carried on												
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)												
11	Total support. Add lines 7 through 10			· 7 (**)	₹ 4	_ * *							
12	Gross receipts from related activities, etc	(see instructions)				12							
13	First five years. If the Form 990 is for the	organization's first	, second, third, fou	urth, or fifth tax yea	r as a section 501	(c)(3)							
	organization, check this box and stop her						<b>▶</b>						
Sec	tion C. Computation of Public Su	upport Percent	tage				<del> </del>						
14	Public support percentage for 2008 (line 6	, column (f) divided	by line 11, colum	ın (f))		14	%						
15	Public support percentage from 2007 Sch	edule A, Part IV-A,	line 26f			15	<u>%</u>						
16a	33 1/3 % support test—2008. If the organ	ization did not che	ck the box on line	13, and line 14 is 3	33 1/3 % or more,	check this box	. —						
	and stop here. The organization qualifies						▶ 📙						
b	33 1/3 % support test—2007. If the organ				5 is 33 1/3 % or m	ore, check this	, $\Box$						
	box and stop here. The organization quali		• •				▶ ⊔						
17a	10%-facts-and-circumstances test—200	-											
	more, and if the organization meets the "fa			•			, 🗀						
_	organization meets the "facts-and-circums		-	· · · · · · · · · · · · · · · · · · ·	· ·		▶						
b	10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or												
	more, and if the organization meets the "fa			•			. □						
40	organization meets the "facts-and-circums		=				₹ H						
18	Private foundation. If the organization did	not check a box o	ne 13, 16a, 16i	J, 1/a, or 1/b, che	CK (NIS DOX and Se	e instructions	— -						

Schedule A (Form 990 or 990-EZ) 2008

	edule A (Form 990 or 990-EZ) 2008 Ame					<u>7-1075250</u>	Page 3
Pa	art III Support Schedule for O				(2)		
	(Complete only if you che	ecked the box	on line 9 of P	art I.)			
	tion A. Public Support	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			<u> </u>	
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5						-
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
_	Add lines 7a and 7b						
8	Public support (Subtract line 7c from			>>			•
<del></del>	line 6.)		* ^	la a		<u> </u>	
	tion B. Total Support  lendar year (or fiscal year beginning in) ▶	(=) 2004	(L) 2005	(-) 2000	(4) 2007	1 (1) 0000	(0 T-1-1
	Amounts from line 6	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the	organization's fire	t second third fo	urth or fifth tay yes	ar as a section 50	1(c)(3)	<u></u>
1-4	organization, check this box and stop here	-	i, booona, iimo, ro	artif, or mitritiax yet	ar as a scotion st	, ((0)(0)	▶ □
Sec	tion C. Computation of Public Su		tage				
15	Public support percentage for 2008 (line 8			nn (fl)		15	%
16	Public support percentage from 2007 Scho	• • •	-	(1)/		16	<u> </u>
	tion D. Computation of Investme				<del></del>	1.10	/6
17	Investment income percentage for 2008 (li			3, column (f))	<del></del>	17	%
18	Investment income percentage from 2007			.,		18	<u> </u>
19a	33 1/3 % support tests—2008. If the orga			e 14, and line 15 is	more than 33 1/		
	17 is not more than 33 1/3 %, check this b						▶ □
b	33 1/3 % support tests—2007. If the orga	_				-	
	line 18 is not more than 33 1/3 %, check the						▶ 🗍
20	Private foundation. If the organization did	not check a box of	on line 14, 19a or	19b, check this box	and see instruct	ions	▶ 🗍

Schedule A (Form 990 or 990-EZ) 2008 American College of the Building 57-1075250 Page 4

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10;
Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Attach to Form 990.
answered "Yes," to Fo

### **Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008

Open to Public Inspection

OMB No 1545-0047

	morione Collogo of the Building		Employer identification number									
	merican College of the Building uilding Arts				57-1075250							
	art I : Organizations Maintaining Donor Advised Fu	nds o	or (	Other Similar Funds or A						if		
	the organization answered "Yes" to Form 990, I	Part I	IV,	line 6.			_					
				(a) Donor advised funds		(b)	Funds	and ot	her a	ccoun	ts	
1	Total number at end of year	Ĺ										
2	Aggregate contributions to (during year)											
3	Aggregate grants from (during year)											
4	Aggregate value at end of year											
5	Did the organization inform all donors and donor advisors in writing that	t the as	sse	ts held in donor advised				_		_	_	
	funds are the organization's property, subject to the organization's excl	usive l	lega	il control?				∐ Yo	es	L	_ No	
6	Did the organization inform all grantees, donors, and donor advisors in	writing	g th	at grant funds may be								
	used only for charitable purposes and not for the benefit of the donor of	r donoi	r ac	lvisor or other				_		_	_	
	ımpermissible private benefit?							_	es		No	
<u>∗Pa</u>	art II* Conservation Easements. Complete if the organic	niza	tio	n answered "Yes" to Forr	m 99	<u> 10, F</u>	<u>²art</u>	<u>IV, lir</u>	<u>ne 7</u>	<u>'.                                    </u>		
1	Purpose(s) of conservation easements held by the organization (check	all tha	at a	oply)								
	Preservation of land for public use (e g , recreation or pleasure)	<u> </u>	Į P	reservation of an historically imp	portai	nt lar	ıd are	а				
	Protection of natural habitat		J P	reservation of certified historic s	structi	ure						
	Preservation of open space											
2	Complete lines 2a-2d if the organization held a qualified conservation of	contrib	utic	n in the form of a conservation	easer	ment						
	on the last day of the tax year				_							
					_		Held	at the	<u> Enc</u>	d of t	he Year	
а	Total number of conservation easements				L	2a						
b	Total acreage restricted by conservation easements				L	2b						
C	Number of conservation easements on a certified historic structure incl	uded i	n (a	)	L	2c						
d	Number of conservation easements included in (c) acquired after 8/17/6	06			L	2đ						
3	Number of conservation easements modified, transferred, released, ex	tınguıs	hec	s, or terminated by the organizat	tion d	นททg	ļ					
	the taxable year ▶											
4	Number of states where property subject to conservation easement is l	ocated	j	<b>-</b>								
5	Does the organization have a written policy regarding the periodic moni	torıng,	, ins	pection, violations, and							7	
	enforcement of the conservation easements it holds?			_				Y€	es		_l No	
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing	-				- –	_	_				
7	Amount of expenses incurred in monitoring, inspecting, and enforcing e					- —	_	_				
8	Does each conservation easement reported on line 2(d) above satisfy t	he req	uire	ements of section				П.,		г	٦	
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?							Y€	es	L	_  No	
9	In Part XIV, describe how the organization reports conservation easem			•								
	balance sheet, and include, if applicable, the text of the footnote to the the organization's accounting for conservation easements	organi	ızat	on s financial statements that o	escrit	es						
Da	art III Organizations Maintaining Collections of Art,	<b>∐iet</b> c	ari/	cal Treasures or Other 9	Simi	lar	Acc.					
	Complete if the organization answered "Yes" to	Forn	n S	990, Part IV, line 8.	J	1 <b>u</b> 1 1	7336	,				
12	If the organization elected, as permitted under SFAS 116, not to report	ın ıts r	reve	nue statement and balance she	eet wo	orks (	of					
	art, historical treasures, or other similar assets held for public exhibition											
	provide, in Part XIV, the text of the footnote to its financial statements t				•							
	, , , , , , , , , , , , , , , , , , , ,											
b	If the organization elected, as permitted under SFAS 116, to report in it	s reve	nue	statement and balance sheet v	works	of a	rt.					
-	historical treasures, or other similar assets held for public exhibition, ed											
	provide the following amounts relating to these items		, '				•					
	(i) Revenues included in Form 990, Part VIII, line 1					<b>•</b>	\$					
	(ii) Assets included in Form 990, Part X					•	\$	_				
2	If the organization received or held works of art, historical treasures, or	other s	sım	ilar assets for financial dain, pro	ovide	the	· —	_				
_	following amounts required to be reported under SFAS 116 relating to t			<u> </u>		-						
а	Revenues included in Form 990, Part VIII, line 1					<b>&gt;</b>	\$					
b	Assets included in Form 990, Part X					<b>&gt;</b>	\$	_			-	
_												

Sche		College of th				75250			Page 2
Pa	rt III Organizations Maintaining	Collections of Art, I	Historical Treas	sures,	or Other	Similar .	Ass <u>ets</u>	(contir	nued)
3	Using the organization's accession and other items (check all that apply)	records, check any of the	following that are a	signıfica	int use of its	collection			
а	Public exhibition	d Loan o	r exchange progran	ns					
b	Scholarly research	e 🗌 Other							
С	Preservation for future generations	_							
4	Provide a description of the organization's coll Part XIV	ections and explain how the	ney further the orga	nızatıon'	s exempt pı	urpose in			
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	be maintained as part of the	he organization's co	ollection	?			Yes	☐ No
Pa	Trust, Escrow and Custodi Part IV, line 9, or reported a				n answer	ed "Yes'	to Forr	n 990,	
1a	Is the organization an agent, trustee, custodia	n or other intermediary for	contributions or oth	ner asse	ts not				
	included on Form 990, Part X?	·						Yes	No
b	If "Yes," explain the arrangement in Part XIV a	and complete the following	table				_		
	, ,							Amoun	nt .
С	Beginning balance					10	:		
	Additions during the year					10			
e	Distributions during the year					16			
f	Ending balance					1f	7		
2a	Did the organization include an amount on For	rm 990, Part X, line 21?						Yes	No
b	If "Yes," explain the arrangement in Part XIV								
Pa	rt V Endowment Funds. Comple	ete if organization ar	swered "Yes" t	o Forn	n 990, Pa	rt IV, line	<del>≥</del> 10.		
		(a) Current year	(b) Prior year	(c) Two	years back	(d) Three y	ears back	(e) Fou	r years back
1a	Beginning of year balance	["							
b	Contributions								** 1
С	Investment earnings or losses		÷	×					
d	Grants or scholarships		٨,	3 "	8	4			
е	Other expenditures for facilities		* .4	(r 100p)	The second second	17	*		
	and programs		* · / · ?	/ 40°		* **	_ a å. ,	- A.	og 36 ,
f	Administrative expenses		>		,		· * ;	. **	*44
g	End of year balance		•					*	₩ a, a ½
2	Provide the estimated percentage of the year	end balance held as							
а	Board designated or quasi-endowment > _	%							
b	Permanent endowment  %								
С	Term endowment ▶ %								
3a	Are there endowment funds not in the possess	sion of the organization tha	at are held and adm	nnistere	d for the				
	organization by.								Yes No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(II), are the related organizations	listed as required on Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the								,
Pa	rt VI Investments—Land, Buildin	ngs, and Equipment	. See Form 99	<u>0, Part</u>	X, line 1	0.			
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other		(c) De	preciation		(d) Book	value
1a	Land								
b	Buildings								
	Leasehold improvements								
	Equipment								
	Other		2,048	,044		523,0	30	1,5	24,964
	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, column (E					<b>&gt;</b>		24,964

Schedule D (Form 990) 2008 American College of t		57-1075250	Page 3
Part VII Investments—Other Securities. See Form 99			
(a) Description of security or category	(b) Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year market value	<del></del>
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
<del></del>			-
<del> </del>			
	·	<del></del>	
T. ( 1. (O-lune /L) about an al Fance 000 Part V and /P) (and 40 )	<del> </del>		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 9  (a) Description of investment type		(a) Mathematical valuation	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
		obstal and or your market value	
	<del>-     -   -   -   -   -   -   -  </del>		
<del></del>		<del></del>	, ,
<del></del>			
		·	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		» » «	* .
Part IX : Other Assets. See Form 990, Part X, line 15.			
(a) Description		(b) Boo	ok value
Total. (Column (b) should equal Form 990, Part X, col. (B) line 15 )	)E	<b>&gt;</b>	
Part X Other Liabilities. See Form 990, Part X, line 2		* *	-
	(b) Amount	,	
Federal income taxes Line of Credit	14,130		
Officer Loan	14,130		
Officer hoan	<del></del>		
	<del>- </del>		
	<del>                                     </del>		4
	<del>   </del>		
		, , , , , , , , , , , , , , , , , , ,	*
			*
<del></del>			`
	<del>                                     </del>	*	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	14,130		*
In Part XIV provide the text of the footnote to the organization's financial st		anization's liability for	-

uncertain tax positions under FIN 48

	dule D (Form 990) 2008 American College of the Build		57-107525	0	Page 4
	rt XI Reconciliation of Change in Net Assets from Form 990 to	Finai	ncial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4-8			9	<del> </del>
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10	
	rt XII Reconciliation of Revenue per Audited Financial Stateme	nts W	ith Revenue per Re		
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1	1		
а	Net unrealized gains on investments	2a		1 1	
b	Donated services and use of facilities	2b		<b>↓</b>	
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	_2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	r .	1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		,	
b	Other (Describe in Part XIV)	4b		Ann	
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12.)		<u> </u>	5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents \	With Expenses per l	Retur	n
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		1	X."	
а	Donated services and use of facilities	2a		62.	
b	Prior year adjustments	_2b			
С	Losses reported on Form 990, Part IX, line 25	2c		* *	
d	Other (Describe in Part XIV)	2d	_	\$ 12% Y	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	r	•	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		.	
b	Other (Describe in Part XIV)	4b		, . 	
С	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	
	rt XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lin	es 1a	and 4, Part IV, lines 1b		
and 2	2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d	and 4b	1		•
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Schedule I	D (Fo	m 99	30) 200	8 2	Am∈	eri	cai	n C	ol	<u>le</u>	ge	0	f	the	e I	<u>Bui</u>	ld:	ing	<u> </u>		57	-10	75	250	)					Р	age	5
Part X	V	Sup	plem	<u>enta</u>	ıl İn	<u>forn</u>	<u>nati</u>	on (	conti	nued	<u>)                                    </u>																					_
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#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

### **Schools**

▶ To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

American College of the Building

Employer identification number 57-1075250 Building Arts VEG NO

			TEO	NO
1	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?	1	<u> </u>	
2	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,		X	
3	programs, and scholarships?  Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media	2		-
J	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	i		
	describe If "No," please explain	3	X	
	Website and enrollment materials			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially			
	nondiscriminatory basis?	4b	X	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	<u> X</u>	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	ļ
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			<u>.</u>
		* *		s
5	Does the organization discriminate by race in any way with respect to	- 3		<u></u>
а	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		х
С	Employment of faculty or administrative staff?	_5c		X
d	Scholarships or other financial assistance?	5d		X
e	Educational policies?	_5e		x
_				<b>.</b>
f	Use of facilities?	_5f		X
g	Athletic programs?	5g		X
		1		
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a		x
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
-	If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of			<u> </u>
	Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	7	X	

### SCHEDULE L (Form 990 or 990-EZ)

**Transactions With Interested Persons** 

Attach to Form 990 or Form 990-EZ.

► Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered

"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

2008

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Name of the organization American College of the Building

Employer identification number

Building Arts						!	<u>57-</u>	<u> 107</u>	<u> 52</u>	<u>50                                    </u>			
Part I Excess Benefit Transactions (sec							00 F3	, D	437.1.	40			
To be completed by organizations that answ	verea "Y	res" or	n Form 990, P	aπ IV, line 2	5a or 25b, or F	orm 9	90-EZ	., Par	t V, III	ne 40	1		
1 (a) Name of disqualified person					(b) Description of	of transa	action				(c) C	Correct	ed?
											Yes	<u> </u>	4o
												+-	
												+-	
					· · · ·							$\top$	
									-			$\neg$	
					• •								
2 Enter the amount of tax imposed on the organization is under section 4958	J			sons during	the year			<b>▶</b> \$					
3 Enter the amount of tax, if any, on line 2, above, reimb		-	organization					▶ \$					
Part II Loans to and/or From Interested To be completed by organizations that answ			n Form 990, P	art IV, line 2	6, or Form 990	)-EZ, F	Part V,	, line	38a				
(a) Name of interested person and purpose	1 ' '	oan to	(c) Ong		(d) Balanc	e due		( <b>e</b> ) In d	default?		proved		/ntten
		om the ization?	pnncipal a	mount							ard or nittee?	agree	ment?
	Ť	-						Yes	No	Yes	No	Yes	No
Board Member Notes Payable #2	10	FIUIII						103	1			103	110
Facility Aquisition	X		75	50,000	1,09	95,4	451		x		x		X
Board Member Note Payable #5					•								
Working Capital	X		30	6,200	30	06,2	200		X		X		X
Board Member Advances													
Working Capital	X		34	15,147	19	30,3	383		X		X		X
Board Member Notes Payable #1													
Working Capital	X	$\sqcup$	2(	00,000	18	39,6	666		X		X		X
Board Member Note Payable #3	x		11	2,000	10	08,9	929		x		x		x
Board Member Note Payable #4	<b>—</b>	1 1											
Working Capital	X		į	7,928		57,9	928		х		X		X
Total				▶ \$	1,94	18,5	557						. ,
Part III Grants or Assistance Benefitting													
To be completed by organizations that answ	vered "Y	es" o	n Form 990, P	art IV, line 2	7								
(a) Name of interested person			(b) Relation	•	en interested pers anization	on and	l the	(c)	Amoi		grant o tance	r type	of
<del> </del>													
<b>Part</b> ·IV Business Transactions Involving To be completed by organizations that answ				art IV, line 2	8a, 28b, or 28d	3							
(a) Name of interested person			nship between	T	nount of		Descri	ption o	of trans	saction	,		hanng
/-/		rested	person and the	, , ,	saction	ι-/	1					of reve	org nues?
	ļ	orga	nization	ļ								Yes	No
	<del> </del>			<del>                                     </del>								ļ	<u> — </u>
	<del> </del>			<del> </del>									<u> </u>
	<del> </del> -			<del> </del>								<u> </u>	$\vdash$

## SCHEDULE M (Form 990)

NonCash Contributions

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Open To Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

American College of the Building Building Arts

Employer identification number 57–1075250

Types of Property (a) (b) (c) (d) Method of determining Check if Number of Contributions Revenues reported on applicable Form 990, Part VIII, line 1g revenues Art-Works of art 1 Art-Historical treasures Art-Fractional interests 3 Books and publications Clothing and household goods 6 Cars and other vehicles Boats and planes Intellectual property 8 9 Securities-Publicly traded Securities-Closely held stock 10 Securities—Partnership, LLC, or trust interests Securities-Miscellaneous 12 13 Qualified conservation contribution (historic structures) Qualified conservation 14 contribution (other) Real estate—Residential 15 16 Real estate—Commercial Real estate-Other 17 18 Collectibles Food inventory 19 Drugs and medical supplies 20 Taxidermy 21 22 Historical artifacts Scientific specimens 23 24 Archeological artifacts 134,809 X 3 25 Other ►( 26 Other ▶( 27 Other ►( Other ▶( 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be 30<u>a</u> used for exempt purposes for the entire holding period? If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any non-standard 31 31 contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash 32a X contributions?

If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

If "Yes," describe in Part II

describe in Part II

Page 2

Schedule M (Form 990) 2008 American College of the Building 57-1075250

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

**SCHEDULE O** (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Open to Public Inspection

Name of the organization

American College of the Building **Building Arts** 

**Employer identification number** 57-1075250

Form 990 - Organization's Mission or Most Significant Activities never seen before in America.

Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990 Copy is emaied to the board members for comment prior to filing.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy The Board openly discusses conflicts of interest during the board orientation period, and then annually thereafter.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Compensation for the President and other management officers is reviewed, discussed and approved by the board.

Form 990, Part VI, Line 15b - Compensation Process for Officers The board approves as part of the annual budgetary process.

Totals

Forms 990 / 990-PF	Oth	ner Notes an	d Loans Receiv	able		2008
	For calendar year 2008, o	or tax year beginnin	g 8/01/08	and ending	7/31/09	
Name				<b>M</b>		entification Numb
	lege of the Bui	.lding			 	5050
Building Art	<u> </u>				57-107	5250
Form 990. Par	rt X, Line 7 -	Additiona	1 Information	n		
202 550, 24.				<del></del>		
	Name of borrower			Relationship to	disqualified perso	on
(1) ACBA Loan	··					
(2) Achievement	t Loan					<del></del> -
(3)						
( <del>4</del> ) (5)						
(6)			· · · · · · · · · · · · · · · · · · ·			
(7)						
(8)						
(9)	<del></del>					
(10)	* *					
Original amount		Maturity				Interest
borrowed	Date of loan	date	Re	payment terms		rate
(1)						
(2)						
(3)						
(4) (5)			<del></del>			-
(6)						
(7)						
(8)						
(9)				<u>-</u>		
(10)						
	<u>,, **, '</u>	*A+ A ● · · · ·				
Sec	curity provided by borrower			Purpose	e of loan	
(1)						
(2)						
(3)		<del></del>	<del>-  </del>		<del>.</del>	
(4) (5) (6) (7)		<u></u>	_	<u> </u>		
(6)						
(7)						
(8) (9)						
(9)						
(10)	à •å <sub>*</sub>	<i>8</i> 2			,	
	ation furnished by lender		Balance due at beginning of year	Balance due		ur market value (990-PF only)
(1)	ation (armonou by foliation		87,408	ond or yea	<del></del>	1000 11 01117)
(2)			133,427	271	,115	
(3)						
(4)				·		
(5) (6)						
(2) (3) (4) (5) (6) (7)	<del></del>					
(8)	·					
(8)						
(10)						
Totals			220,835	271	,115	

Forms 990 / 990-PF

Building Arts\_

### Loans from Officers, Directors, Trustees, and **Key Employees or Other Disqualified Persons**

For calendar year 2008, or tax year beginning 8/01/08, and ending

2008

(10)

American College of the Building

Employer Identification Number

57-1075250

7/31/09

F	orm 990, Part X, Line 22 - Additional	Information
	Name of lender	Title
(1)	Board Member Notes Payable #1	Board Members
(2)	Board Member Notes Payable #2	Board Member
(3)	Board Member Note Payable #3	Board Member
(4)	Board Member Advances	Board members
(5)	Board Member Note Payable #4	Board Member
(6)	Board Member Note Payable #5	Board Member
(7)		
(8)		
(9)		

<u> </u>	. 4 ** \ 1	*			* > * * * .
	Original amount		Maturity		Interest
	borrowed	Date of loan	date	Repayment terms	rate
(1)	200,000	5/11/06	8/24/10	Interest Only	4.000
(2)	750,000	11/17/04	12/13/11	Interest Only	4.000
(3)	112,000	10/29/07	5/24/10	Interest Only	6.000
(4)	345,147	Various	Various	Interest Only	0.000
(5)	57,928	3/11/09	4/06/10	Interest Only	6.000
(6)	306,200	4/03/09	4/06/10	Interest Only	
(7)					
(8)					
(9)					
(10)					

Security provided by borrower	Purpose of loan
(1)	Working Capital
(2)	Facility Aquisition
(3)	
(4)	Working Capital
(5)	Working Capital
(6)	Working Capital
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	
(1)	189,666	189,666	
2)	1,100,000	1,095,451	
3)	111,801	108,929	
4)	204,634	190,383	
5)		57,928	
5)		306,200	
7)			
3)			
9)			
10)			
Totals	1,606,101	1,948,557	

Forms	<b>-</b> 1	Mortgages and Other Notes Payable					
990 / 990-PF		ar veer 2000	ir tay waar haaraa	8/01/08 , and ending	7/31/09	2008	
 Name	ror calend	aiyear∠∪∪ö,0	or tax year beginning	o, or, oo , and ending	<del></del>	ification Number	
American Co		the Bui	lding				
Building Arts				57-10752	250		
Form 990, 1	?art X, Li	ne 23 -	Additional	Information			
	Name of ter	ler		Polotionabie A-	disqualified person		
Name of lender  1) Carolina First Bank Note			Relationship to	aisquaimeu person			
(2)							
(3)							
(4)							
(5)							
(6) (7)				<del>                                     </del>			
(8)							
(9)							
(10)	*	~~ . ×, /					
Original am borrowed	ount	ite of loan	Maturity date	Repayment terms	<del></del>	Interest rate	
		13/07	4/12/10	Interest Only		6.000	
(2)							
(3)							
(4)							
(5) (6)	-			1			
(6) (7)		+					
(8)							
(9)							
(10)		De la constant de la		,			
	> * ***	₹,	<del></del>	, , , , ,	<u> </u>		
	Security provided	i by borrower		Pumos	e of loan		
(1) Real Esta				. arpoc			
(2)							
(3)					<u> </u>		
(4) (5)							
(5) (6)							
(7)							
(8)							
(9)							
(10)						*	
			Balance due at		Balance due at		
Consideration furnished by lender  1)			beginning of year 948,873	enc	end of year 927, 433		
(2)							
(3)							
(4)							
(5)							
(6) (7)				<b> </b>			
(7)			_				
(9)							
(10)						007	
Totals				948,873		927,433	