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Form **990**

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)

benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements.

2011
Open to Public Inspection

	AF	or th	e 2011 Calendar year, or tax year beginning and	enaing					
	В	heck if pplicat	C Name of organization HOME BUILDERS ASSOCIATION OF GREATER	- -	D Employer ide	entification	number		
	Г	Addre	ess COLUMBIA						
	<u> </u>	Name Chang			57	7-04270	060		
	F	Initial	No. 1. Control of the state of	Room/suite	· · · · · · · · · · · · · · · · · · ·				
		Termi				303)256	5-6238		
		Amer	ded Oh and a second of the sec		G Gross receipts \$		1,263,235.		
		Appli			H(a) Is this a gro				
		pend	F Name and address of principal officer EARL MCLEOD, JR.		for affiliates		Yes X No		
			625 TAYLOR STREET, COLUMBIA, SC 29201	-2740	H(b) Are all affiliat	es included?			
	1 1	ax-ex	empt status:	or 527	7		ee instructions)		
			te: ► N/A		H(c) Group exer	nption numb	per ▶		
	KF	orm o	forganization X Corporation	L Year	of formation 195	8 M State	of legal domicile SC		
	Ρε	rt I	Summary						
	Activities & Governance	1	Briefly describe the organization's mission or most significant activities: ${\color{blue}{\rm TO}}$ ${\color{blue}{\rm ADVANTAGE}}$ & COOPERATION	SSOCIA	TE BUILDE	RS FOR	R MUTUAL		
	rra	2	Check this box ▶ ☐ if the organization discontinued its operations or disposit	sed of more	than 25% of its r	et assets.			
	ove.	3	Number of voting members of the governing body (Part VI, line 1a)			3	0		
	Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			4	0		
	sa &	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)			5	0		
	Ϋ́	6	Total number of volunteers (estimate if necessary)			6	0		
	cţi	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	10,615.		
	•	b	Net unrelated business taxable income from Form 990-T, line ECEIVED			7b	-912.		
				'	Prior Year		Current Year		
	ø	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) MAY 1 8 2017	RS-OSC	401,79		355,230.		
	nua	9	Program service revenue (Part VIII, line 2g) MAY 1 8 2012		53,19	1.	115,236.		
	Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 70)	781	2,87		2,080.		
	ш.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 100 and Dan, UT	-= <u>_</u>	653,24		771,273.		
		12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)-		1,111,10	5. 1	1,243,819.		
		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		***************************************	0.	0.		
		14	Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.		
	Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		407,15		447,306.		
^	ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)		·····	0.	0.		
7	ď	b	Total fundralsing expenses (Part IX, column (D), line 25) 522,5	34.	 				
			Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	817,07		889,816.		
1 8			Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,224,22		1,337,122.		
		19	Revenue less expenses. Subtract line 18 from line 12		-113,12	2.	-93,303.		
SUN	ts or			Be	ginning of Current Y		End of Year		
_	sset 3ala		Total assets (Part X, line 16)		879,47		799,242.		
Щ	et A		Total liabilities (Part X, line 26)	ļ		9.	0.		
Ş	즲		Net assets or fund balances Subtract line 21 from line 20		879,40	5.	799,242.		
SCANNED		rt II							
ပ္က			ilties of perjury, I declare that I have examined this return, including accompanying schedule:			of my knowle	edge and belief, it is		
40	true,	Correc	t, and complete Deglaration of preparer (other than officer) is based on all information of wh	nen preparer	nas any knowledge		·		
	C:		Signature of officer		Date				
	Sign		EARL MSZEOD, JR., EXECUTIVE DIRECTOR		24.0				
	Here	•	Type or print name and title						
			Print/Type preparer's name Pregarer's signature		Date / Chec	:k	PTIN		
	Paid		RUSSELL K GRANT, CPA	5/14/12 5811		0131069			
	Prep	arer	Firm's name Hughes, Sealey, Grant & Assoc.	, LLC	Firm's EIN	57-	-0512452		
	Use		Firm's address PO Box 767	,	Tanna Elly	<u> </u>			
		•	Irmo, SC 29063		Phone no	(803)	407-0490		
	—— Mav	the II	RS discuss this return with the preparer shown above? (see instructions)		Li none no		Yes No		
		1 01-2		ons.	····		Form 990 (2011)		

HOME BUILDERS ASSOCIATION OF GREATER COLUMBIA

	rm 990 (2011) ' COLUMBIA '57-04270	60 Page 2
	art III Statement of Program Service Accomplishments	rage Z
	Check if Schedule O contains a response to any question in this Part III	X
1	Briefly describe the organization's mission:	<u> [A)</u>
•	TO ASSOCIATE BUILDERS FOR MUTUAL ADVANTAGE & COOPERATION	
	TO ADDOCIATE DUIDDERD TOK NOTOAL ADVANTAGE & COOLEKATTON	
2	Did the organization undertake any significant program services during the year which were not listed on	T (57)
	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by exp	oenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations	tions to
	others, the total expenses, and revenue, if any, for each program service reported.	
4a	4 254)
	SUMMER OUTING-A GATHERING OF MEMBERS & GUESTS WHERE EVERYONE CAN	
	EXCHANGE IDEAS & THOUGHTS ABOUT ANY NEW DEVELOPMENTS IN THE HOME	
	BUILDING INDUSTRY	
		
4b	/ (Expenses 4 / (Expenses 4 / (Revolute 4 / Revolute 4 / Revolu)
	BIG THURSDAY-GATHERING OF MEMBERS & GUESTS WHERE AWARDS OF RECOG	NITION
	ARE PRESENTED TO OUTSTANDING MEMBERS FOR THEIR ACHIEVEMENTS	
4c	(Code) (Expenses \$	
4c	(Code) (Expenses \$7,637. including grants of \$) (Revenue \$	UTE,
4c	C-CORE IS A MENTORING PROGRAM, SPONSORED BY HOME BUILDERS INSTIT	
4c		
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	C-CORE IS A MENTORING PROGRAM, SPONSORED BY HOME BUILDERS INSTIT THAT THE HBA MANAGES IN GREENVILLE, COLUMBIA, FLORENCE AND CHARL Other program services (Describe in Schedule O.)	
	C-CORE IS A MENTORING PROGRAM, SPONSORED BY HOME BUILDERS INSTIT THAT THE HBA MANAGES IN GREENVILLE, COLUMBIA, FLORENCE AND CHARL Other program services (Describe in Schedule O.)	
	C-CORE IS A MENTORING PROGRAM, SPONSORED BY HOME BUILDERS INSTIT THAT THE HBA MANAGES IN GREENVILLE, COLUMBIA, FLORENCE AND CHARL Other program services (Describe in Schedule O.) (Expenses \$ 18,924 • including grants of \$) (Revenue \$)	

Form 990 (2011) COLUMBIA
Part 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, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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	_		v
•	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			Х
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	-	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	10		х
11	endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
''	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D,			
ŭ	Part VI	11a	х	
ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		<u>X</u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV			v
45		14b		<u>X</u>
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, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	-'0-		
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь		

Form 990 (2011) COLUMBIA

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States 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 of grants and other assistance to individuals in the United States on Part IX,			ĺ
	column (A), line 2° If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		l	
	and former officers, directors, trustees, key employees, and highest compensated employees? 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 lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		X
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		ļ
C	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
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	ļ	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			.,
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			v
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Λ_
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? 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		Λ.
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			Х
04	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?			Х
20	If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20		Х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?	33		
J	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	338		
•	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000	-	
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	50		
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	 		- -
	Note. All Form 990 filers are required to complete Schedule O	38	х	
			990 (2011)

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Pai				
	Check if Schedule O contains a response to any question in this Part V			<u> </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	-i		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	ļ	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a	1		
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	ļ	ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a		3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь	X	 _
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country. ▶			
	See instructions for 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
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	 	Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		Х
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	ļ	
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 Cross received as Force 900, Red VIII, line 10, for each line for the foreign and th			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:	İ		
	Gross income from members or shareholders 11a			
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
10-	amounts due or received from them.)	.		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		-
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(a)(20) qualified approach househ increase increases			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O		1	
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	ele alle organization receive any payments for indust tallfilling services duffing the lax year?	1744	ı	41

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI				X
Sec	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	la ()		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	ıь ()		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship v	vith any other			
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the c	lirect supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?		3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990	was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asset	s?	5		Х
6	Did the organization have members or stockholders?		6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appo	oint one or			
	more members of the governing body?		7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stor	kholders, or			
	persons other than the governing body?		7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year b	v the following			,
а	The governing body?	•	8a	x	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach	ed at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reve	enue Code)			
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chap	ters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body b	efore filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		Х
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,	" describe			
	In Schedule O how this was done		12c		
13	Did the organization have a written whistleblower policy?		13		X
14	Did the organization have a written document retention and destruction policy?		14		<u>X</u>
15	Did the process for determining compensation of the following persons include a review and approval b	y independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a		X
b	Other officers or key employees of the organization		15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	nt with a		1	
	taxable entity during the year?		16a	- 1	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate r	ts participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization	ition's			
	exempt status with respect to such arrangements?		16ь	1	
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed None				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (S	ection 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply	,			
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, confli	ct of interest policy, an	d finan	cıal	
	statements available to the public during the tax year.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
20	State the name, physical address, and telephone number of the person who possesses the books and	ecords of the organiza	lion: 🕨		
	OFFICE - 803-256-6238				
	COLUMBIA, SC 29202				

57-0427060

Form 990 (2011) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- 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 compensated employees; and former such persons.

(A) Name and Title	(B) Average	(C) Position (do not check more than one				i than	one	ed any current officer, o (D) Reportable	(E) Reportable	(F) Estimated
	hours per week	box, unless person is both an officer and a director/trustee)			is bot or/trus	h an tee)	compensation from	compensation from related	amount of other	
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) EARL McLEOD, JR.	40.00				.,			162 640	0.	6 244
EXECUTIVE DIRECTOR	40.00	-			Х	<u> </u>		163,648.	0.	6,344.
(2) HAL VON NESSEN								0.	0.	0.
ASSOCIATE VICE PRESIDENT (3) WADE McGUINN						<u> </u>		· ·	0.	
								0.	0.	0.
PRESIDENT (4) TONY THOMPSON		-				 -		0.		
VICE PRESIDENT								0.	0.	0.
(5) DAVID CLARK										
TREASURER								0.	0.	0.
(6) JOHN COVERT										
SECRETARY								0.	0.	0.
								-		
			-			\vdash				

Page 8

Part VII Section A. Officers, Directors, Trustees, Key Employees, and High							est	Compensated Employ	ees (continued)	<u> </u>		_		
	(A)	(B)				C)			(D)	(E)		ļ	(F)	
	Name and title	Average	(do	not c		itior	1 than	оле	Reportable	Reportabl	1		stımat	ed
		hours per	box	, unle	ss pe	rson	is bot	th an	compensation	compensati	on	a	mount	of
		week	\vdash	cer ar	no a o	irecto	or/trus	stee)	from	from relate			other	
		(describe	director					ŀ	the	organization		1	npens	
		hours for related	6	8		ļ	zated		organization	(W-2/1099-M	ISC)	1	rom th	
		organizations	trustee	f trustee		8	Highest compensated employee		(W-2/1099-MISC)			1 7	ganıza ıd rela	
		ın Schedule		Institutional	١.	Key employee	st co					ı	anizat	
		O)	Individual	nstft	Officer	ey en	age a	E				0.9	a, nzat	0110
			_	Ť	<u> </u>		-	 -						
	· · · · · · · · · · · · · · · · · · ·		-	 	1		H						-	
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				<u> </u>		-	├	<u> </u>						
			L				Ļ_	L	162 640	 ·				4.4
	Sub-total								163,648.	· · · · ·	0.		6,3	
	Total from continuation sheets to Part VI	I, Section A							0.		0.		~ ~	0.
	Total (add lines 1b and 1c)								163,648.		0.		6,3	44.
2	Total number of individuals (including but n	ot limited to th	ose	liste	ed at	oove	e) wł	no re	eceived more than \$100	,000 of reportab	ole			
	compensation from the organization	 								·····				
_											1		Yes	No
3	Did the organization list any former officer,		istee	e, ke	y en	nplo	yee,	or i	highest compensated er	mployee on	1			
	line 1a? If "Yes," complete Schedule J for se											3	ļ	X
4	For any individual listed on line 1a, is the su									the organization	ĺ			
	and related organizations greater than \$150			•								4	X	ļ
5	Did any person listed on line 1a receive or a							elate	ed organization or indivi	dual for services	\$			l .
	rendered to the organization? If "Yes," com	<u>olete Schedule</u>	e J f	or st	ıch j	oers	on					5_		<u> </u>
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest con										npens	ation f	from	
	the organization. Report compensation for t	he calendar ye	ear e	endii	ng w	/ith o	or w	<u>ithin</u>	the organization's tax y	ear				
	(A)							- 1	(B)			(0		
	Name and business	address	NC	NE	<u> </u>			_	Description of s	ervices	С	ompe	nsatio	n
	· · · · · · · · · · · · · · · · · · ·							_		· · · · · · · · · · · · · · · · · · ·				
								- 1						
												· <u> </u>	-	
								\perp						
2	Total number of independent contractors (in	ncluding but no	ot lin	nited	of to	thos	se lis	ted	above) who received m	ore than				
	\$100,000 of compensation from the organiz	ation 🕨				C)							

57-0427060 Form 990 (2011) COLUMBIA Page 9 Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Unrelated Total revenue Related or excluded from exempt function husiness tax under sections 512, 513, or 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 355,230. **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 9 Noncash contributions included in lines 1a-1f \$ 355,230 h Total. Add lines 1a-1f Business Code 94,376. 94,376. 2 a C-CORE 531390 Program Service Revenue 9,745. **b** SUMMER OUTING 531390 8,040. 8,040. c BIG THURSDAY 531390 3,075. 3,075. 531390 OTHER EVENTS е f All other program service revenue 115,236. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 2,080. 2,080. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 5 (i) Real (II) Personal 30,031. 6 a Gross rents 19,416. b Less: rental expenses 10,615.c Rental income or (loss) 10,615 10,615 d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV. line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses **>** c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a HOME AND GARDEN SHOW 531390 268,715. 268,715 97,407. 97,407. 2012 EVENTS 531390 531390 64,627. 64,627. PARADE OF HOMES 531390 329,909. 329,909. d All other revenue 760,658. e Total. Add lines 11a-11d

243,819.

>

877,974.

Total revenue See instructions

0.

10,615.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a respon	se to any question in this	e Part IX		X
	not include amounts reported on lines 6b, 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 United States See Part IV, line 21				
2	Grants and other assistance to individuals in				, .
	the United States. See Part IV, line 22				47
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members		· ·		
5	Compensation of current officers, directors,	140 044	14 004	122 060	
	trustees, and key employees	148,844.	14,884.	133,960.	-
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	231,669.		231,669.	
7	Other salaries and wages	231,009.		231,009.	 -
8	Pension plan accruals and contributions (include	7.764		7 761	
9	section 401(k) and section 403(b) employer contributions) Other employee benefits	7,764.		7,764.	
10	Payroll taxes	25,127.		25,127.	
11	Fees for services (non-employees):	23/12/		20/12/0	
	Management				
b	[*]		· · · · · · · · · · · · · · · · · · ·		
С	Accounting	4,900.		4,900.	
đ	·				~ ~
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				2
9	Other	29,590.		29,590.	
12	Advertising and promotion				
13	Office expenses	44,553.		44,553.	
14	Information technology				
15	Royalties				·
16	Occupancy				<u></u> .
17	Travel	21,947.		21,947.	
18	Payments of travel or entertainment expenses				
_	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	661		CCA	
20	Interest Programme to office to a	664.		664.	
21	Payments to affiliates	18,580.		18,580.	
22 23	Depreciation, depletion, and amortization Insurance	5,586.		5,586.	
24	Other expenses Itemize expenses not covered	3,300.		3,300.	
_7	above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0)			1	
а	STATE & NATIONAL DUES	184,676.		184,676.	
b	HOME REMODEL SHOW	159,914.			159,914.
С	PARADE OF HOMES	79,195.			79,195.
d	REDO/REMIX SHOW	49,377.			49,377.
е	All other expenses See Sch O	290,834.	23,243.	33,543.	234,048.
25	Total functional expenses Add lines 1 through 24e	1,337,122.	38,127.	776,461.	522,534.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	İ			
	educational campaign and fundraising solicitation				
	Check here If following SOP 98-2 (ASC 958-720)				

COLUMBIA

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Pa	rt X	Balance Sheet	_				
					(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing				1	69,527. 357,266.
	2	Savings and temporary cash investments			511,039.	2	357,266.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			4		
	5	Receivables from current and former officers, di					
		employees, and highest compensated employe	es. Com	plete Part II			
		of Schedule L				_ 5	
	6	Receivables from other disqualified persons (as	under section			"	
		4958(f)(1)), persons described in section 4958(c	nd contributing				
		employers and sponsoring organizations of sec					
		employees' beneficiary organizations (see instru				6	
Assets	7	Notes and loans receivable, net	•			7	
Ass	8	Inventories for sale or use				8	
•	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other	i		,		
		basis. Complete Part VI of Schedule D	10a	575,969.			
	Ь		10Ь	575,969. 315,446.	284,044.	10c	260,523.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line		12			
	13	investments · program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		84,391.	15	111,926.	
	16	Total assets. Add lines 1 through 15 (must equ	879,474.	16	799,242.		
	17	Accounts payable and accrued expenses	69.	17			
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
Ś	21	Escrow or custodial account liability. Complete I	Part IV o	f Schedule D		21	
Liabilities	22	Payables to current and former officers, director			***************************************		
abil		highest compensated employees, and disqualifi					
ت		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ated third	diparties		23	
	24	Unsecured notes and loans payable to unrelated		·	·	24	
	25	Other liabilities (including federal income tax, pa	·-		······································		
		parties, and other liabilities not included on lines					
		Schedule D	,	•		25	
	26	Total liabilities. Add lines 17 through 25			69.	26	0.
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
S		lines 27 through 29, and lines 33 and 34.		·	<u>.</u>		
ĕ	27	Unrestricted net assets			826,171.	27	746,008.
<u>a</u>	28	Temporarily restricted net assets			53,234.	28	53,234.
ВР	29	Permanently restricted net assets				29	
5		Organizations that do not follow SFAS 117, cl	heck hei	re 🕨 🔲 and			***************************************
o.		complete lines 30 through 34.					
sts	30	Capital stock or trust principal, or current funds				30	
SS	31	Paid-in or capital surplus, or land, building, or eq	ulpment	fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances	-,		879,405.	33	799,242.
	34	Total liabilities and net assets/fund balances			879,474.	34	799,242.

HOME BUILDERS ASSOCIATION OF GREATER COLUMBTA

Form	990 (2011) COLUMBIA	57-04	27060	Page 12	
	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI			X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,819.	
2	Total expenses (must equal Part IX, column (A), line 25)	2		7,122.	
3	Revenue less expenses. Subtract line 2 from line 1	3	-93	3,303.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	879,405		
5	Other changes in net assets or fund balances (explain in Schedule O)	5	13	3,140.	
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	799	,242.	
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes No	
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		.		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit			
	Act and OMB Circular A-133?		3a	X	
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audit			

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

► See separate instructions.

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations. Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B Do not complete Part II-A.

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	itions: Complete Part III		_	
		ILDERS ASSOCIATI	ON OF GREAT	ER Emp!	oyer identification number
	COLUMBI	.A			57-0427060
Pa	art I-A Complete if the or	ganization is exempt und	er section 501(c)	or is a section 527 o	rganization.
1 2 3	Provide a description of the organic Political expenditures Volunteer hours	zation's direct and indirect politic	al campaign activities	in Part IV. ▶\$	
Pa	ort I-B Complete if the or	ganization is exempt und	er section 501(c)	(3).	
1	Enter the amount of any excise tax			▶\$	
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	▶ \$	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
4 a	Was a correction made?				Yes No
t	If "Yes," describe in Part IV.		<u></u>		
Pa	ort I-C Complete if the or	ganization is exempt und	er section 501(c)	, except section 501(c)(3).
1	Enter the amount directly expende	d by the filing organization for se	ction 527 exempt func	tion activities	
2	Enter the amount of the filing organ	nization's funds contributed to ot	her organizations for s	ection 527	
	exempt function activities			▶\$	<u>-</u>
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here a	ind on Form 1120-POL		
	line 17b			. ▶\$	
4	Did the filing organization file Form	· · · · · · · · · · · · · · · · · · ·			Yes No
5	Enter the names, addresses and en				
	made payments. For each organiza				
	contributions received that were pi political action committee (PAC). If				te segregated fund or a
		T		7	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 C	OLUME	BIA			· 57–	0427060 Page 2
Part II-A Complete if the orga			mpt under section	on 501(c)(3) and file		
(election under secti	on 501	(h)).				
A Check ► ☐ If the filing organization	on belong	s to an aff	lliated group (and list	ın Part IV each affiliated	group member's na	me, address, EIN,
expenses, and share	of excess	slobbying	expenditures)			
B Check ▶ if the filing organization	on checke	ed box A a	nd "limited control" pi	rovisions apply.		
		ying Expe	nditures Ints paid or incurred	l.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	nce publi	c opinion (arass roots lobbying)			
b Total lobbying expenditures to influe				-		<u> </u>
c Total lobbying expenditures (add line			dy (direct lobbyllig)			
d Other exempt purpose expenditures		10,				
e Total exempt purpose expenditures		1c and 1c	4)	ļ		
f Lobbying nontaxable amount. Enter	•		•	th columns		
If the amount on line 1e, column (a) or (bying nontaxable an			
Not over \$500,000	ω) is.		the amount on line 1			
Over \$500,000 but not over \$1,000,0	200		00 plus 15% of the ex			
Over \$1,000,000 but not over \$1,500,000				cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,00			00 plus 5% of the exc			
Over \$17,000,000	30,000	\$1,000,	•	ess over \$1,500,000.		
Over \$17,000,000	I	\$1,000,	000.			
g Grassroots nontaxable amount (ente	r 25% of	line 1f)				
g Grassroots nontaxable amount (enteh Subtract line 1g from line 1a. If zero of		•				
i Subtract line 1f from line 1c. If zero o						
i If there is an amount other than zero			line 11 did the erecoi	L zation file Form 4720		4,,
reporting section 4911 tax for this ye		inte tii oi	ane ii, did the organiz	Zation lile Form 4720		Yes No
reporting section 4911 tax for this ye		L-Voor Ave	eraging Period Under	r Section 501(b)		
	ions that	made a s	ection 501(h) electio	on do not have to comp es 2a through 2f on pag		
	Lobby	/ing Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 20	800	(b) 2009	(c) 2010	(d) 2011	(e) Total
(or nood) your boghtming my	_					
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
d Constants and the little constants						
d Grassroots nontaxable amount			<u></u>			-
e Grassroots ceiling amount (150% of line 2d, column (e))						
(1507) of time 20, column (e))				1		
f Grassroots lobbying expenditures						

57-042706<u>0 Page 3</u>

Schedule C (Form 990 or 990 EZ) 2011 COLUMBIA 57-042706 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a))	(t)
of th	e lobbying activity	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
9	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)(5), or se	ction	
	301(0)(0).			Yes	No
•	Were substantially all (90% or more) dues received nondeductible by members?		1		X
1 2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	Х	
3	Did the organization make only inflicuse loopying expenditures of \$2,000 or less. Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X
	t III-B Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)(ction	·
,	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."				e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures).	tical			
2	expenses for which the section 527(f) tax was paid).	licai			
_	·		2a		
	Current year		2b		
	Carryover from last year				
_	Total		2c		
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e	VOORE		-	
*	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?	political	4		
_	Taxable amount of lobbying and political expenditures (see instructions)		5		
5 Par	t IV Supplemental Information	-			
		David II As a sad F) II D 1	- 4	
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5;	Part II-A; and F	art II-B, IIn	e i Also, c	compie
ns J	part for any additional information.				
					
					

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization

HOME BUILDERS ASSOCIATION OF GREATER COLUMBIA

Employer identification number 57-0427060

Pa	TI Organizations Maintaining Donor Advise	d Funds or Other Similar Funds of	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
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 the assets held in donor advised	I funds
	are the organization's property, subject to the organization's	•	Yes No
6	Did the organization inform all grantees, donors, and donor a	-	ed only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose co	nferring
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Par	t IV, line 7.
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an histor	rically important land area
	Protection of natural habitat	Preservation of a certifie	ed historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of	a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the o	rganization during the tax
	year ►		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		[] [
	violations, and enforcement of the conservation easements if		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	re satisfy the requirements of section 170(h)	
_	and section 170(h)(4)(B)(ii)?		└ Yes └ No
9	In Part XIV, describe how the organization reports conservati	-	
	include, if applicable, the text of the footnote to the organization	lion's financial statements that describes the	e organization's accounting for
Da	t III Organizations Maintaining Collections of	f Art Historical Transuras or Oth	or Similar Assats
1 6	Complete if the organization answered "Yes" to Form		ei Oilillai Assets.
10	If the organization elected, as permitted under SFAS 116 (AS		at and balance sheet works of art
Ia	historical treasures, or other similar assets held for public ext	·	
	the text of the footnote to its financial statements that descri		or public service, provide, in rail Art,
ь	If the organization elected, as permitted under SFAS 116 (AS		nd halance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	,	•
	relating to these items:	public	s service, provide the lonoving amounts
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical treations	asures, or other similar assets for financial o	
_	the following amounts required to be reported under SFAS 1:		
а	Revenues included in Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		\$

1	edule D (Form 990) 2011 COLUMBI	 							2/060	
Pa	rt III Organizations Maintaining C									
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following the	at are a s	ignificant	use of its	collection	items
	(check all that apply):									
а	Public exhibition		<u>. </u>	Loan or exc	change progr	rams				
b	Scholarly research	•	• 🗀	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ın how tl	hey further t	the organizat	ion's exe	mpt purp	ose in Pai	t XIV.	
5	During the year, did the organization solicit of	r receive donations	of art, h	istorical trea	asures, or oth	ner sımıla	r assets			
	to be sold to raise funds rather than to be ma	aintained as part of	the orga	inization's c	ollection?				Yes	No_
Pa	rt IV Escrow and Custodial Arran reported an amount on Form 990, Par		ete if the	e organizatio	on answered	"Yes" to	Form 990), Part IV,	line 9, or	
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	ns or other a	ssets not	ıncluded			
	on Form 990, Part X?		•						Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table [.]						
		•	ŭ						Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e	-		
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	212						Yes	No No
b	If "Yes," explain the arrangement in Part XIV.									
Pa	rt V Endowment Funds. Complete r	f the organization ar	nswered	"Yes" to Fo	rm 990, Part	IV, line 1	0			
		(a) Current year	(b) P	rior year	(c) Two year	rs back	(d) Three y	ears back	(e) Four	ears back
1a	Beginning of year balance									***
ь	Contributions									
c	Net investment earnings, gains, and losses								,	
d	Grants or scholarships							•		
е	Other expenditures for facilities .									
	and programs									
f	Administrative expenses									
9	End of year balance									
2	Provide the estimated percentage of the curr	ent year end baland	e (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		%							
ь	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should	ld equal 100%.								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	ind administe	ered for t	he organiz	ation	_	
	by:									es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organizations	listed as required o	n Sched	dule R?					3ь	
4	Describe in Part XIV the intended uses of the	organization's endo	<u>wment</u>	funds						
Par	t VI Land, Buildings, and Equipm	ent. See Form 990), Part X	, line 10.		,				
	Description of property	(a) Cost or o basis (investr			or other (other)		ccumulate preciation	ed	(d) Book	value
1a	Land .	148,	008.		·				148	,008.
b	Buildings			32	1,073.	2	225,18	89.		,884.
	Leasehold improvements			-						
	Equipment			10	6,888.		90,25	57.	16	,631.
е	Other									****
Total	. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part	X, colun	nn (B), line 1	0(c))			•	260	,523.

Part VII Investments - Other Securities.	See Form 990, Part X, I	ine 12	
(a) Description of security or category	(b) Book value		Method of valuation
(including name of security)	(2) 2001(10.00	Cost or	r end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
<u>(F)</u>			
(G)			
(H)			
(0)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments - Program Related.		line 13.	
(a) Description of investment type	(b) Book value	(c)	Method of valuation r end-of-year market value
(1)			
(2)			-
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total (Col (b) must equal Form 990, Part X, col (B) line 13)	•		······································
Part IX Other Assets. See Form 990, Part X, III			
	a) Description		(b) Book value
(1) CASH SURRENDER VALUE OF		NCE	111,926.
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)		•	
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col (B) I	ine 15)		▶ 111,926.
Part X Other Liabilities. See Form 990, Part			
1. (a) Description of liability	74, 4170 201	(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
	(25)		
Total. (Column (b) must equal Form 990, Part X, col (B) II FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote FIN 48 (ASC 740)	e to the organization's financial	statements that reports the organization	's liability for uncertain tax positions under

57-0427060 Page 4 COLUMBIA Schedule D (Form 990) 2011 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Total revenue (Form 990, Part VIII, column (A), line 12) 1 2 Total expenses (Form 990, Part IX, column (A), line 25) 2 3 3 Excess or (deficit) for the year. Subtract line 2 from line 1 Net unrealized gains (losses) on investments 4 4 5 Donated services and use of facilities Investment expenses 6 6 7 Prior period adjustments 7 8 Other (Describe in Part XIV.) 8 9 9 Total adjustments (net) Add lines 4 through 8 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2a Net unrealized gains on investments 2b b Donated services and use of facilities 2c c Recoveries of prior year grants 2d d Other (Describe in Part XIV.) 2e e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4b b Other (Describe in Part XIV.) 4c c Add lines 4a and 4b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: 2a a Donated services and use of facilities 2b **b** Prior year adjustments 2c c Other losses 2đ d Other (Describe in Part XIV.) 2e e Add lines 2a through 2d 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIV) 4ь 4c c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part IV, lines 1b and 2b; Part V, line 4; Part IV, lines 1b and 2b; Part V, line 4; Part IV, lines 1b and 2b; Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

 Complete if the organization answered "Yes" to Form 990, Part IV, line 23. **2011**

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

► Attach to Form 990. ► See separate instructions.

HOME BUILDERS ASSOCIATION OF GREATER

COLUMBIA

Employer identification number 57-0427060

Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990. Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees Tax indemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III. Compensation committee Written employment contract Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization. a Receive a severance payment or change-of-control payment? 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4Ь c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? 5a 5Ь b Any related organization? If "Yes" to line 5a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? 6a b Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III 7 For persons listed in Form 990, Part VII. Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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

Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2011

57-0427060

Page 2

HOME BUILDERS ASSOCIATION OF GREATER COLUMBIA

Schedule J (Form 990) 2011 COLUMBIA

Part if Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (ii) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported as deferred in prior Form 990
	Θ	158,648.	5,000.	0	0	6,344.	169,992.	0
1 EARL MCLEOD, JR.	: 3	0	0	0	0	0	0	0
	Θ							
2	(ii)							
	Ξ							
6	Ξ							
	ε							
4	E							
	Θ							
2	€							
	(i)							
9	(E)			1				
	(i)							
7	(ii)							
	ε							
8	(ii)							
	(1)							
6	(ii)							
	Θ							
10	(ii)							
	Θ							
11	⊕							
	Θ							
12	Œ							
	ε							•
13	Ξ							
	Ξ							
14	Ξ							
	Ξ							
15	Ξ							
	ε							
16								

Schedule J (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service HOME BUILDERS ASSOCIATION OF GREATER Name of the organization **Employer identification number** COLUMBIA 57-0427060 Form 990, Part III, Line 4d, Other Program Services: OTHER EVENTS-GATHERINGS OF MEMBERS & GUESTS WHERE CAN EXCHANGE IDEAS & THOUGHTS ABOUT ANY NEW DEVELOPMENTS IN THE HOME BUILDING INDUSTRY Expenses \$ 18,924. including grants of \$ 0. Revenue \$ 0. Form 990, Part VI, Section B, line 11: THE ORGANIZATION REVIEWS THE FORM 990 BY COMPARING IT TO FINANCIAL DATA USED TO PREPARE THE RETURN. Form 990, Part VI, Section C, Line 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS/POLICIES AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. Form 990, Part IX, Line 24f, All Other Functional Expenses: 2010 EVENTS: 0. Program service expenses 0. Management and general expenses Fundraising expenses 46,586. Total expenses 46,586. REGAL AWARDS SHOW:

MEALS & HOSPITALITY COUNCIL:

Program service expenses

Fundraising expenses

Total expenses

Management and general expenses

0.

0.

37,916.

37,916.

Schedule O (Form 990 or 990-EZ) (2011) Name of the organization HOME BUILDERS ASSOCIATION OF GREATER COLUMBIA	Page 2 Employer identification number 57-0427060
Program service expenses	0.
Management and general expenses	0.
Fundraising expenses	37,064.
Total expenses	37,064.
TOUR OF HOMES:	
Program service expenses	0.
Management and general expenses	0.
Fundraising expenses	34,377.
Total expenses	34,377.
SALES & MARKETING COUNCIL:	
Program service expenses	0.
Management and general expenses	0.
Fundraising expenses	21,570.
Total expenses	21,570.
OTHER EVENTS:	
Program service expenses	4,040.
Management and general expenses	0.
Fundraising expenses	11,601.
Total expenses	15,641.
TELEPHONE:	
Program service expenses	0.
Management and general expenses	13,244.
Fundraising expenses	0.
Total expenses 132212 01-23-12 Sc	13,244. hedule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-EZ) (2011) Name of the organization HOME BUILDERS ASSOCIATION OF GREATER COLUMBIA	Employer identification number 57-0427060
POSTAGE:	
Program service expenses	0.
Management and general expenses	10,111.
Fundraising expenses	0.
Total expenses	10,111.
CASINO NIGHT:	
Program service expenses	0.
Management and general expenses	0.
Fundraising expenses	9,650.
Total expenses	9,650.
REMODELER COUNCIL:	
Program service expenses	0.
Management and general expenses	0.
Fundraising expenses	9,526.
Total expenses	9,526.
GREEN BUILDING COUNCIL:	
Program service expenses	0.
Management and general expenses	0.
Fundraising expenses	9,227.
Total expenses	9,227.
C-CORE:	
Program service expenses	7,637.
Management and general expenses	0

Schedule O (Form 990 or 990-EZ) (2011) Name of the organization HOME BUILDERS ASSOCIATION OF GREATER COLUMBIA	Page 2 Employer identification number 57-0427060
Fundraising expenses	0.
Total expenses	7,637.
BIG THURSDAY:	100-00-00-00-00-00-00-00-00-00-00-00-00-
Program service expenses	7,312.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	7,312.
2012 EVENTS:	
Program service expenses	0.
Management and general expenses	0.
Fundraising expenses	5,243.
Total expenses	5,243.
FISHING TOURNAMENT:	
Program service expenses	0.
Management and general expenses	0.
Fundraising expenses	4,266.
Total expenses	4,266.
SUMMER OUTING:	
Program service expenses	4,254.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	4,254.
HOLIDAY BALL:	0.000
132212 01-23-12	Schedule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization HOME BUILDERS ASSOCIATION OF GREATER COLUMBIA	Employer identification number 57-0427060
Program service expenses	0.
Management and general expenses	0.
Fundraising expenses	4,054.
Total expenses	4,054.
UTILITIES:	
Program service expenses	0.
Management and general expenses	3,896.
Fundraising expenses	0.
Total expenses	3,896.
MISCELLENEOUS:	
Program service expenses	0.
Management and general expenses	3,332.
Fundraising expenses	0.
Total expenses	3,332.
DUES:	
Program service expenses	0.
Management and general expenses	1,824.
Fundraising expenses	0.
Total expenses	1,824.
SPEED DATING:	
Program service expenses	0.
Management and general expenses	0.
Fundraising expenses	1,791.
Total expenses	1,791.
132212 01-23-12	Schedule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization HOME BUILDERS ASSOCIATION OF GREATER COLUMBIA	Employer identification number 57-0427060
MAVEC AND LICENCEC.	
TAXES AND LICENSES:	
Program service expenses	0.
Management and general expenses	1,136.
Fundraising expenses	0.
Total expenses	1,136.
ADVERTISING:	
Program service expenses	0.
Management and general expenses	0.
Fundraising expenses	617.
Total expenses	617.
LAND DEV. COUNCIL: Program service expenses	0.
Management and general expenses	0.
Fundraising expenses	560.
Total expenses	560.
Total Other Expenses on Form 990, Part IX, line 24f, Co	1 A 290,834.
Form 990, Part XI, line 5, Changes in Net Assets:	
2010 INCREASE IN CASH VALUE OF LIFE INSURANCE	13,140.
· .	