### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

2022 Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. Inspection For the 2022 calendar year, or tax year beginning 07/01/22, and ending 06/30/23C Name of organization HABITAT FOR HUMANITY NORTHWEST D Employer identification number Check if applicable: HARRIS COUNTY Address change 76-0273510 Name change Number and street (or P.O. box if mail is not delivered to street address) 281-477-0460 Initial return P.O. BOX 682785 Final return/ City or town, state or province, country, and ZIP or foreign postal code HOUSTON TX 77268 7,135,175 G Gross receipts\$ Amended return Name and address of principal officer: H(a) Is this a group return for subordinates' Application pending BILLY SHIPLEY 13350 JONES ROAD H(b) Are all subordinates included? If "No," attach a list. See instructions HOUSTON TX 77070 **X** 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or Tax-exempt status: WWW. HABITATNWHC.ORG Website: H(c) Group exemption number Form of organization: X Corporation Trust Year of formation: 1989 Other M State of legal domicile: Part I Summarv 1 Briefly describe the organization's mission or most significant activities: Activities & Governance TO CREATE DECENT AND AFFORDABLE HOUSING FOR THOSE IN NEED, DEVELOP RESPONSIBLE HOME OWNERSHIP AND MAKE A DECENT SHELTER A MATTER OF CONSCIENCE EVERYWHERE. 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 15 3 Number of voting members of the governing body (Part VI, line 1a) 15 4 Number of independent voting members of the governing body (Part VI, line 1b) 37 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 1750 6 **6** Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 Prior Year Current Year 847,273 592,367 **8** Contributions and grants (Part VIII, line 1h) Revenue 3,664,553 4,204,736 **9** Program service revenue (Part VIII, line 2g) **10** Investment income (Part VIII, column (A), lines 3, 4, and 7d) -10,586 1,985,225 2,068,393 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 6,865,496 6,486,465 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 18,000 58,000 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) **14** Benefits paid to or for members (Part IX, column (A), line 4) 1,941,631 1,853,572 **15** Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) **16a**Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 4,164,609 4,439,297 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 6,036,181 6,438,928 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 450,284 426,568 19 Revenue less expenses. Subtract line 18 from line 12 End of Year Beginning of Current Year 9,069,704 13,657,706 20 Total assets (Part X, line 16) 635,622 4,818,206 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 434,082 8,839,500 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Here BILLY SHIPLEY TREASURER Type or print name and title Print/Type preparer's name Preparer's signature Check Paid 02/19/24 self-employed GREGORY O. BRATCHER GREGORY O. BRATCHER P01058294 **Preparer** 20-2733640 BENTLEY, BRATCHER & ASSOCIATES, Firm's name Firm's EIN **Use Only** 515 W GREENS RD STE 710 281-875-8181 HOUSTON, TX 77067 Firm's address

May the IRS discuss this return with the preparer shown above? See instructions

		72 73310 Page Z
	gram Service Accomplishments	. <b>_ y</b>
	O contains a response or note to any line in th	is Part III X
1 Briefly describe the organization's		TH 1777 DEFECT AD
	AFFORDABLE HOUSING FOR THOSE	
	WNERSHIP AND MAKE A DECENT SI	HELTER A MATTER OF
CONSCIENCE EVERYWH	ERE.	
2 Did the organization undertake an	y significant program services during the year which were r	not listed on the
prior Form 990 or 990-EZ?		Yes X No
If "Yes," describe these new servi	ces on Schedule O.	
3 Did the organization cease conduc	cting, or make significant changes in how it conducts, any p	orogram
services?		Yes X No
If "Yes," describe these changes of		
4 Describe the organization's progra	am service accomplishments for each of its three largest pr	ogram services, as measured by
expenses. Section 501(c)(3) and	501(c)(4) organizations are required to report the amount o	f grants and allocations to others,
	f any, for each program service reported.	
, , , , , , , , , , , , , , , , , , , ,	,, 1 3	
4a (Code: ) (Expenses \$		18,000 ) (Revenue \$ 1,693,187 )
	ED AT ENCOURAGING, PROMOTING	
	ELOPMENT OF LOW-INCOME HOUSI	
	TOMBALL SCHOOL DISTRICTS. THE	
	JGH A PRIVETELY OPERATED AND I	
	COME PERSONS AT OR BELOW ACTUA	
INTEREST-BEARING M	ORTGAGE LOANS. THE ORGANIZAT:	ION HAS COMPLETED
CONSTRUCTION OF 28	33 NEW HOMES SINCE 1989 AND TI	RANSFERRED TO QUALIFIED NEW
LOW-INCOME HOMEOWN	ÆRS.	• • • • • • • • • • • • • • • • • • • •
•		
• • • • • • • • • • • • • • • • • • • •		
4b (Code: ) (Expenses \$	4,180,534 including grants of \$	40,000 ) (Revenue \$ 5,172,309)
The state of the s	ABLISHED TO OPERATE A RESALE	
	AND TO EXTEND THE MISSION OF	
	DONATED MATERIALS FOR LOW-II	
	HOUSES. THE ORGANIZATION ACC	
	S, FURNITURE AND APPPLIANCES	
	CONSTRUCTED HOMES WHERE THE DO	
	SERVICES AND THE ORGANIZATION	ON RETAINS USABLE ITEMS FROM
THE DECONSTRUCTED	HOMES.	
4c (Code: ) (Expenses \$	including grants of \$	) (Revenue \$)
N/A		
Ad Other program conject (December	von Schodulo O )	
4d Other program services (Describe		Povenue \$
4d Other program services (Describe (Expenses \$		Revenue \$

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? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			3,5
	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)			3,5
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_ ا		x
c	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	"		22
′	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? <i>If</i> "Yes,"	+-		
Ū	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	<u> </u>		
•	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	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		X
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		X
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	1	37	
	Schedule D, Parts XI and XII	12a	X	
р	Was the organization included in consolidated, independent audited financial statements for the tax year? If	405		₹.
42	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
14a	Did the organization maintain an office, employees, or agents outside of the officed states?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	144		
b	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	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	1		<u> </u>
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
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	X	
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
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	

	n 990 (2022) HABITAT FOR HUMANITY NORTHWEST 76-0273510		Р	age 4
P	art IV Checklist of Required Schedules (continued)		I	
00	Dill		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, 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	22		
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		x
24a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b</i>			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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), 501(c)(4), and 501(c)(29) 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		x
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		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) 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 the Schedule L,			
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV			X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	<u> </u>
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		_^
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	1 20		v
22	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
J4	or IV, and Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	<del>334</del>		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
•	related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	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 VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	х	
P	art V Statements Regarding Other IRS Filings and Tax Compliance	1		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
•	Did the organization comply with backup withholding rules for reportable payments to vendors and			

1c X

reportable gaming (gambling) winnings to prize winners?

Pa	irt V Statements Regarding Other IRS Filings and Tax Compliance (conf	inue	d)		Yes	No
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	37			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Scheduler	ule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	ority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financ	ial acc	ount)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Acco	unts (FBAR).			
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
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 as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions o	r			
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods	6			
	and services provided to the payor?			. 7a	Х	<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	/as				l
	required to file Form 8282?			. 7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		ct?	. 7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con-			. 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			. 7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			. 7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintain	ed by	the			
_	sponsoring organization have excess business holdings at any time during the year?			. 8		
9	Sponsoring organizations maintaining donor advised funds.			0-		
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		-
b 40	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	100				
a	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a 10b				
ь 11	Section 501(c)(12) organizations. Enter:	וטטו		$\dashv$		
_	Gross income from members or shareholders	11a				
a b	Gross income from other sources. (Do not net amounts due or paid to other sources	11a				
~	against 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		11?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	• • • • • • • • • • • • • • • • • • • •			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	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.					
b	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	13b				
С	Enter the amount of reserves on hand	13c				
14a	Did the erganization receive any payments for indeer tenning convices during the tay year?			14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Sched			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remur					
	excess parachute payment(s) during the year?			15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	nt inco	me?	16		X
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any act	tivities				1
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

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 on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

<u>5ec</u>	ction A. Governing Body and Management					
4 -	Cutantha mushan of vating manaham of the management belong to the set of the second of the	ایدا	1 5		Yes	No
1a		1a	15	_		
	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 on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
-	any other officer, director, trustee, or key employee?			2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct			<u> </u>		
v	supervision of officers, directors, trustees, or key employees to a management company or other person?			3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi	ed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the	year by	the followin	g:		
а	The governing body?			8a	Х	
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 reached at					
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
Sec	ction B. Policies (This Section B requests information about policies not required by the	Intern	al Reven	ue Co	de.)	
					Yes	-
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		<b>—</b>
11a		ing the	form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				77	1
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	<del>                                     </del>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	rise to	conflicts?	12b	Х	<del>                                     </del>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			40-	<b>.</b>	
40	describe on Schedule O how this was done			12c	X	<b>—</b>
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	^	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision	.2				
_	The organization's CEO, Executive Director, or top management official			15a	x	
a b	Other officers or key employees of the organization			15a	X	
Б	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			130	22	
16a						
	with a taxable entity during the year?			16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			100		
-	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed <b>TX</b>					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T	(sectio	n 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website Upon request Other (explain on Schedule O)					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of it	nterest <sub>l</sub>	oolicy,			
	and financial statements available to the public during the tax year.					
20_	State the name, address, and telephone number of the person who possesses the organization's books and re	cords				
	OUG WEAVER 13350 JONES ROAD	<b>-</b> -	0.0		_ ^	
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# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

### Section A. 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

\_\_ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

<b>(A)</b> Name and title	(B) Average hours per week	bo	x, unle	Pos check ess pe nd a c	rson	than one is both an or/trustee)	<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) SOLEIL WATT									
	40.00	,,		3,			105 560	_	
EXECUTIVE DIRECTOR (2) TROY SPENCER	0.00	X		X			125,562	0	0
(2) TROI SPENCER	6.00								
PRESIDENT	0.00	x		x			0	0	0
(3) BRIAN KOLENDA	0.00	$\stackrel{\frown}{}$		^			0	0	0
(3) DICITAL TOURING	6.00								
VICE- PRESIDENT	0.00	$\mathbf{x}$		x			0	o	0
(4) BILLY SHIPLEY									
( )	6.00								
TREASURER	0.00	X		X			0	0	0
(5) BILL BRYANT									
	6.00								
SECRETARY	0.00	X		X			0	0	0
(6) CHRIS KEIRS									
	6.00							_	_
GENERAL COUNCIL	0.00	X		X			0	0	0
(7)MELODY J. WANG									
	6.00								
AT-LARGE MEMBER	0.00	X		X			0	0	0
(8) VANESSA EASON	6 00								
	6.00	7,		x			_	^	0
AT-LARGE MEMBER (9) NYSIA GASKIN	0.00	X		Λ			0	0	<u> </u>
(9) NISIA GASKIN	6.00								
AT-LARGE MEMBER	0.00	x		x			0	0	0
(10) PATICK BOURGEOI		22		22					
(10)IIIIION BOOKGEOI	6.00								
DIRECTOR	0.00	X					0	0	0
(11) CATHY DAVIS		1							
•	6.00								
DIRECTOR	0.00	X					0	0	0
									Form <b>990</b> (2022)

Part VII Section A. Officers	, Directors, Tr	uste	es,	Key	Em	ploy	ees,	, and Highest Compensa	ted Employees (continue	d)
<b>(A)</b> Name and title	(B) Average hours	bo	x, unle	Pos check ess pe	rson i	than o is both or/trust	n an	<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(12) ALANDRESS GAI		II				l °				
	6.00									•
DIRECTOR (13) GREGG HARRIS	0.00	X						0	0	0
DIRECTOR	6.00	x						0	0	0
(14) COLTER KRUCKI										
	6.00									•
DIRECTOR (15) RACHEAL PERV	0.00	X						0	0	0
(13) RACHEAL PERV.	6.00									
DIRECTOR	0.00	X						0	o	0
(16) ERIN MEADOWS										
DIDECTOR	6.00									0
DIRECTOR (17) SIAM MAXIE	0.00	X						0	0	0
DIRECTOR	6.00	X						0	0	0
(18) KENNETH KINA	RD									
DEVELOPMENT MANAGER	40.00					x		112,270	0	0
(19) CAROLYN STEVI	40.00							100.665		•
RESTORE DIRECTOR	0.00					X		109,665 347,497	0	0
1b Subtotal c Total from continuation she	ets to Part VII.	Sec	tion	Α				341,491		
d Total (add lines 1b and 1c)								347,497		
2 Total number of individuals (ir	ncluding but not	limit	ed to	tho	se li	sted	abo	ve) who received more tha	n \$100,000 of	
<ul> <li>reportable compensation from</li> <li>Did the organization list any form</li> <li>employee on line 1a? If "Yes,"</li> <li>For any individual listed on line</li> </ul>	ormer officer, di " complete Sche	irecto	or, tr	or su	ch ii	ndivi	duai	Í		Yes No
organization and related orgar individual	nizations greater	thai	n \$1	50,0	00?	If "Y	es,"	complete Schedule J for	such	4 X
5 Did any person listed on line 1 for services rendered to the o				•						5 X
Section B. Independent Contracto								,		
1 Complete this table for your fir compensation from the organi										voor
	(A) business address	JOHN	00113	auon	101	u ie c	Jaici		(B) tion of services	(C) Compensation
INAILIE AILC	Dusiliess address							Descrip	Mon or services	Compensation
2 Total number of independent								ose listed above) who	0	

	rt V		ent o	f Revenue			onse or no		in	this Part VIII		
		CHECK	1 3011	edule O con	laiiis	a respi	onse or no	(A) Total revenue		(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts		Federated camp	-		1a 1b							
s, C		Fundraising eve			1c		226,627					
Sift ar		Related organiza			1d							
s, C		Government grants (or		nns)	1e							
ion		All other contributions,										
the Et	~	and similar amounts n			1f		365,740					
Sontri and O	Ĭ	Noncash contributions lines 1a-1f			1g		28,820	592,36	57			
9		Total. Add lines	1a-11				Business Code	332,30	,			
e e	2a	DECONSTRUC	TTON	REVENIE			236000	2,977,51	13	2,977,513		
<u>ر</u> ج	b	SALE OF HO					236000			913,895		
Series	C			GAGE DISCOUN	JT		236000			255,921		
eve	d	INTEREST I					236000		-	46,604		
Program Service Revenue	е	MISCELLANE					624200		$\overline{}$	10,803		
Δ.	f	All other program		ice revenue				·		•		
		Total. Add lines						4,204,73	36			
		Investment inco										
		other similar am	ounts)	١								
	4	Income from inv	estme									
	5	Royalties										
				(i) Real		(ii) I	Personal					
	6a	Gross rents	6a									
	b	Less: rental expenses	6b									
	С	Rental inc. or (loss)	6c									
		Net rental incom Gross amount from	ne or (l			<u> </u>						
	, u	sales of assets		(i) Securities		(ii	) Other					
au		other than inventory	7a									
Revenue	b	Less: cost or other										
eve		basis and sales exps.	7b			-						
er R		Gain or (loss)	7c									
Othe		Net gain or (loss Gross income from	,	violna ovente								
٥	oa	(not including \$ of contributions rep		226,627								
		1c). See Part IV, lii		iii iiii c	8a							
	b	Less: direct exp			8b		126,403					
		Net income or (I		om fundraising			,	-126,40	03			
		Gross income fr		_				,				
		activities. See P	-	_	9a							
	b	Less: direct exp			9b							
		Net income or (I			vities							
	10a	Gross sales of it	nvento	ry, less								
		returns and allov	wance	s	10a		338,072					
	b	Less: cost of go	ods so	old	10b		143,276					
	С	Net income or (I	oss) fr	om sales of inv	entory	'		2,194,79	96	2,194,796		
Sn							Business Code					
Jeo Ne	11a											
la len	b								_			
Miscellaneous Revenue	С								_			
Ξ	d	All other revenue										
	е	Total. Add lines	: 11a–1	11d								

6,865,496

6,399,532

0

0

12 Total revenue. See instructions ...

Form 990 (2022)

### 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). Check if Schedule O contains a response or note to any line in this Part IX (A) (B) Program service (C) Management and (**D**) Fundraising Do not include amounts reported on lines 6b, 7b, Total expenses 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 58,000 58,000 Grants and other assistance to domestic individuals. See Part IV. line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 209,064 1,941,631 1,630,008 102,559 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes Fees for services (nonemployees): a Management **b** Legal 27,146 27,146 **c** Accounting **d** Lobbying e Professional fundraising services. See Part IV, line 1 Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 619,925 582,665 37,260 12 Advertising and promotion 58,748 18,374 31,358 9,016 13 Office expenses 14 Information technology 15 Royalties 750,155 717,809 16,173 16,173 16 Occupancy 89,335 8,352 80,156 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 94,678 94,678 22 Depreciation, depletion, and amortization 125,608 115,926 6,272 3,410 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 1,274,218 1,274,218 DEMOLISHING COSTS - RESTO CONSTRUCTION COST 1,050,861 1,050,861 BANK CHARGES - RESTORE 61,842 61,842 57,910 57,910 UTILITIES - RESTORE d 228,871 163,119 42,136 23,616 e All other expenses 192,861 340,501 6,438,928 5,905,566 **Total functional expenses.** Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 5,752,314 5,081,249 Cash—non-interest-bearing 2 2 Savings and temporary cash investments Pledges and grants receivable, net 3 4,714 4,682 Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 2,596,994 2,450,088 Notes and loans receivable, net 290,030 277,517 8 Inventories for sale or use Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 1,274,162 10a basis. Complete Part VI of Schedule D 986,853 333,798 287,309 10b **b** Less: accumulated depreciation 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 14 Intangible assets 14 4,885,796 762,919 15 Other assets. See Part IV, line 11 15 13,657,706 9,069,704 Total assets. Add lines 1 through 15 (must equal line 33) 508,688 378,688 Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 126,934 148,934 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 4,290,584 of Schedule D 635,622 4,818,206 26 **26 Total liabilities.** Add lines 17 through 25 Organizations that follow FASB ASC 958, check here X **Net Assets or Fund Balances** and complete lines 27, 28, 32, and 33. 8,434,082 8,839,500 27 Net assets without donor restrictions 27 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 31 31 Retained earnings, endowment, accumulated income, or other funds 8,434,082 8<u>,</u>839,500 32 Total net assets or fund balances 9,069,704 13,657,706 Total liabilities and net assets/fund balances

Form **990** (2022)

OIII	1000 (2022) 1111111111111111111111111111111111				ı uç	,c
Pa	art XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1				496
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,			<u>928</u>
3	Revenue less expenses. Subtract line 2 from line 1	3				568
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8,	43	4,(	<u> 280</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9		-2	1,1	<u> 150</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	8,	83	9,5	<u>500</u>
Pa	art XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				•	es/	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2	2b	$\mathbf{x} \mid$	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2	2c	$\mathbf{x} \mid$	
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		:	За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		· · · · · · ·			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3	3b		

Form **990** (2022)

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# 01452001 Habitat for Humanity Northwest 76-0273510 FYE: 6/30/2023

# Federal Statements

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a Qualifi
an 50% in a
<b>More Than</b>
erty Used
26 - Prope
32, Line 2
- Form 45(
Statement 1

Property Type						
Date Business %	% SS	Cost	Depr Basis	Depr Basis Period Method	Deduction	Section 179
MOBILEASE VIN805377						
5/18/23 100	100.00\$	57,003 \$	36,803	5.0 200DBMQ \$		₩.
RIPLEYS MUFFLERS - BOX TRUCK REPAIR						
11/18/22 100	100.00	7,499		5.0 200DBMQ		
2020 DODGE RA						
8/01/20	100.00	27,996	22,863	5.0 200DBHY		
2022 FORD F150 (VIN 6673)						
/22	100.00	65,182		5.0 200DBHY		
2020 CHEVROLET SILVERADO 35 (VIN 159	(96)					
12/17/21 100.00	100.00	75,022		5.0 200DBHY		
TOTAL	₩	232,702 \$	59,666	₩.	\$ 0	\$

# SCHEDULE A (Form 990)

Department of the Treasury

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

2022

Open to Public Inspection

Internal Revenue Service

Name of the organization

HABITAT FOR HUMANITY NORTHWEST

Employer identification number 76–0273510

			HWENTS COOM!	. 1			10-02	/3310		
P	art	l Reas	on for Public Charity	Status. (All organizatio	ns mus	t comple	ete this part.) See instr	uctions.	_	
The	orga	nization is not	a private foundation because	se it is: (For lines 1 through 12,	, check or	nly one bo	x.)		_	
1			•	sociation of churches describe		-	·			
2	П			(A)(ii). (Attach Schedule E (Fo						
3	П						(iii).			
4										
·		city, and stat		а сог <i>у</i> атовог тип а тоор та						
5		•		of a college or university owner	d or opera	ted by a c	overnmental unit described i			
J										
6	section 170(b)(1)(A)(iv). (Complete Part II.)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
7	X	•		substantial part of its support f			· · ·	blio		
′	21	•	section 170(b)(1)(A)(vi).		iioiii a go	Verrinterita	ar drift or from the general pu	DIIC		
8				<b>170(b)(1)(A)(vi).</b> (Complete Pa	art II)					
9	Н			scribed in section 170(b)(1)(A)		ated in co	niunction with a land-grant c	ollege		
Ü				of agriculture (see instructions						
		university:	or a riori laria grant conego	or agricultare (coe includedone	). <b>L</b> iitoi ti	io marrio, s	only, and state of the conego	01		
10		•	ion that normally receives (1	) more than 33 1/3% of its sup	port from	contribut	ions. membership fees. and	aross		
		•	,	npt functions, subject to certain				•		
		support from	gross investment income a	nd unrelated business taxable	income (le	ess sectio	n 511 tax) from businesses			
		acquired by t	the organization after June 3	30, 1975. See <b>section 509(a)(</b> 2	<b>2).</b> (Comp	lete Part I	II.)			
11		An organizat	ion organized and operated	exclusively to test for public sa	fety. See	section 5	09(a)(4).			
12		_	•	exclusively for the benefit of, to	•					
				tions described in section 509						
			ŭ	scribes the type of supporting	Ū			· ·		
	а			erated, supervised, or controlle	-			giving		
				wer to regularly appoint or elec	_	ty of the d	irectors or trustees of the			
				complete Part IV, Sections A						
	b			upervised or controlled in conn				=		
				rting organization vested in the	same per	sons that	control or manage the supp	orted		
	_		•	Part IV, Sections A and C.			ula amal firmatianally intermeter	LI		
	С			supporting organization operate structions). <b>You must comple</b>				a with,		
	d		= : : :	<b>d.</b> A supporting organization or				ation(s)		
	-			e organization generally must s						
				must complete Part ÍV, Secti						
	е	Check th	nis box if the organization red	ceived a written determination f	rom the II	RS that it	is a Type I, Type II, Type III			
				n-functionally integrated suppo						
	f	Enter the nur	mber of supported organizat	ions						
	g	Provide the f	ollowing information about th	ne supported organization(s).				_		
(	-	ne of supported	(ii) EIN	(iii) Type of organization	(iv) Is the c	organization	(v) Amount of monetary	(vi) Amount of		
	or	ganization		(described on lines 1–10 above (see instructions))		ir governing ment?	support (see	other support (see instructions)		
				above (see instructions))	Yes	No No	instructions)	instructions)		
/A					res	NO			—	
(A)	'									
<b>/</b> D					+					
(B	,									
					1					
(C	)									
					1					
(D	)									
					1					
(E	)									
r - 4	- 1					1		1		

<u>76-027351</u>0

Page 2

Schedule A (Form 990) 2022 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support	ii rano to quani	y arraor arro to	oto notou polot	v, prodoc com	proto i dit		
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 202	2	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	595,612	675,119	1,805,051	847,273	592	,367	4,515,422
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 through 3	595,612	675,119	1,805,051	847,273	592	,367	4,515,422
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							
c	shown on line 11, column (f)  Public support. Subtract line 5 from line 4							4,515,422
Sec	etion B. Total Support							4,313,422
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 202	2	(f) Total
7	Amounts from line 4	595,612	675,119	1,805,051	847,273	592	,367	4,515,422
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 VI.)							
11	<b>Total support.</b> Add lines 7 through 10							4,515,422
12	Gross receipts from related activities, etc	. (see instructions)	١				12	12,391,814
13	First 5 years. If the Form 990 is for the o	organization's first,	second, third, fou	rth, or fifth tax yea	ır as a section 501	(c)(3)		
	organization, check this box and stop he							
Sec	tion C. Computation of Public S							
14	Public support percentage for 2022 (line		=	mn (f))			14	100.00%
15	Public support percentage from 2021 Scl						15	100.00%
16a	33 1/3% support test—2022. If the orga				33 1/3% or more	, check this		37
	box and <b>stop here.</b> The organization qua	•			45: 00 4/00/			X
b	33 1/3% support test—2021. If the orga				15 is 33 1/3% or	more, checi	K	
170	this box and <b>stop here</b> . The organization				160 or 16b and li	 no 1 <i>1</i> io		
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee	=						
	Part VI how the organization meets the fa				= =			
_	organization			·				
b	10%-facts-and-circumstances test—20	_						
	15 is 10% or more, and if the organization				•	•		
	in Part VI how the organization meets the	iacts-and-circums	siances test. The o	organization qualifi	es as a publicly si	upported		
19	organization <b>Private foundation.</b> If the organization d	id not check a boy						
18	instructions							
	Illisti detions							

Page 3

### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

	ii the organization rails to	quality under	the tests liste	u below, pleas	e complete Pa	ait ii.)	
	tion A. Public Support		1 (1) 22/2		I . n		I
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(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 through 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 \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	<b>Public support.</b> (Subtract line 7c from line 6.)						
Sac	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	(4) 2010	(5) 2010	(0) 2020	(4) 2021	(6) 2022	(i) rotal
10a							
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 on 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 VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the corganization, check this box and stop her			urth, or fifth tax yea			
Sec	tion C. Computation of Public S						
15	Public support percentage for 2022 (line 8			umn (f))		15	%
16	Public support percentage from 2021 Sch						%
Sec	tion D. Computation of Investm						
17	Investment income percentage for 2022 (	line 10c, column (	(f), divided by line	13, column (f))		17	%
18	nvestment income percentage from 2021						%
19a							
_	17 is not more than 33 1/3%, check this b						
b	33 1/3% support tests—2021. If the org						
20	line 18 is not more than 33 1/3%, check t <b>Private foundation.</b> If the organization di	· ·	_	•		-	

### Part IV **Supporting Organizations**

(Complete only if you checked a box on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
2		
3a		
3b		
3c 4a		
4b		
-		
4c		
5a		
5b 5c		
6		
7		
8		
9a		
9b 9c		
10a		
10b hedule A		

Page 5

1 U	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
<u> </u>	provide detail in Part VI.	11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	1		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	4		
•	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			<u> </u>
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	_		
Soot	supported organizations played in this regard.	3		
	tion E. Type III Functionally Integrated Supporting Organizations			
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructi  The organization satisfied the Activities Test. Complete line 2 below.	oris).		
a b	The organization satisfied the Activities rest. Complete line 2 below.  The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization is the parent of each of its supported organizations. Complete time 3 below.  The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see in	etructi	one)	
2	Activities Test. <i>Answer lines 2a and 2b below.</i>	]	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Sched	ule A (Form 990) 2022 HABITAT FOR HUMANITY NORTH	WEST	76-0273	3 <b>510</b> Page 6
Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rganiz	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on	Nov. 20	, 1970 (explain in <b>Part V</b>	I). See
	instructions. All other Type III non-functionally integrated supporting organizations m	nust con	nplete Sections A through	ı E.
Sect	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
k	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	I Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integrate	ed Type	III supporting organizatio	n

Schedule A (Form 990) 2022

(see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Sect	ion D – Distributions				Current Year			
1	Amounts paid to supported organizations to accomplish exempt purpo		1					
2	Amounts paid to perform activity that directly furthers exempt purpose	es of supported						
	organizations, in excess of income from activity			2				
3	Administrative expenses paid to accomplish exempt purposes of supp	oorted organizations		3				
4	Amounts paid to acquire exempt-use assets			4				
5	Qualified set-aside amounts (prior IRS approval required—provide de	tails in <b>Part VI</b> )		5				
6	Other distributions (describe in Part VI). See instructions.			6				
7	<b>Total annual distributions.</b> Add lines 1 through 6.			7				
8	Distributions to attentive supported organizations to which the organizations	ation is responsive		8				
	(provide details in Part VI). See instructions.			$\sqcup$				
9	Distributable amount for 2022 from Section C, line 6			9				
10	Line 8 amount divided by line 9 amount	T	T	10				
Sect	ion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	ıs	(iii) Distributable Amount for 2022			
1	Distributable amount for 2022 from Section C, line 6		====		7			
2	Underdistributions, if any, for years prior to 2022							
_	(reasonable cause required–explain in <b>Part VI</b> ). See instructions.							
3	Excess distributions carryover, if any, to 2022							
а	From 2017							
	From 2018							
С	From 2019							
d	From 2020							
е	From 2021							
f	Total of lines 3a through 3e							
g	Applied to underdistributions of prior years							
h	Applied to 2022 distributable amount							
i	Carryover from 2017 not applied (see instructions)							
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.							
4	Distributions for 2022 from							
	Section D, line 7:							
a	Applied to underdistributions of prior years							
b	Applied to 2022 distributable amount							
c	Remainder. Subtract lines 4a and 4b from line 4.							
5	Remaining underdistributions for years prior to 2022, if							
	any. Subtract lines 3g and 4a from line 2. For result							
	greater than zero, explain in <b>Part VI.</b> See instructions.							
6	Remaining underdistributions for 2022. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2023. Add lines 3j							
	and 4c.							
8	Breakdown of line 7:							
	Excess from 2018							
	Excess from 2019							
	Excess from 2020							
	Excess from 2021							
е	Excess from 2022							

Schedule A (Form 990) 2022

Schedule A (Fo	Supplemental Info III, line 12; Part IV, B, lines 1 and 2; Pa 3a, and 3b; Part V,	Section A, lines 1, 2, art IV, Section C, line	e explanations requ 3b, 3c, 4b, 4c, 5a, 1; Part IV, Section n B, line 1e; Part V	ired by Part II, line 6, 9a, 9b, 9c, 11a, D, lines 2 and 3; Pa /, Section D, lines 5	76-0273510 10; Part II, line 17a or 11b, and 11c; Part IV, art IV, Section E, lines , 6, and 8; and Part V, astructions.)	Section 1c, 2a, 2b
•						

### Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

### Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. 0000

2022

OMB No. 1545-0047

Name of the organization

Organization type (check one):

HABITAT FOR HUMANITY NORTHWEST HARRIS COUNTY

Employer identification number

76-0273510

Filers of: Section: Form 990 or 990-EZ **X** 501(c)( 3 ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

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

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line

Schedule B (Form 990) (2022)

age **2** 

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

HABITAT FOR HUMANITY NORTHWEST 76-0273510 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 1 HABITAT FOR HUMANITY INTERNATIONAL X Person 121 HABITAT STREET **Payroll** 121,116 Noncash GA 31709 **AMERICUS** (Complete Part II for noncash contributions.) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 ST. JOHN VIANNEY CATHOLIC CHURCH X Person 625 NOTTINGHAM OAKS TRAIL Pavroll 20,000 Noncash TX 77079 HOUSTON (Complete Part II for noncash contributions.) (b) (c) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution WOODFOREST CHARITABLE FOUNDATION 3 Person X 21 WATERWAY AVE. **Payroll** 30,500 Noncash THE WOODLANDS TX 77380 (Complete Part II for noncash contributions.) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. JOHN WESLEY UNITED METHODIST CHURCH 4 Person X 5830 BERMUDA DUNES DR. **Payroll** 21,000 Noncash HOUSTON TX 77069 (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 5 BLACKBAUD GIVING FUND  $\mathbf{X}$ Person 65 FAIRCHILD STREET **Payroll** 18,201 Noncash SC 29492 CHARLESTON (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 6 DAIKIN X Person 19001 KERMIER RD **Payroll** 30,146 Noncash TX 77484 WALLER (Complete Part II for noncash contributions.)

age 2

Schedule B (Form 990) (2022)

Name of organization

HABITAT FOR HUMANITY NORTHWEST

Employer identification number 76-0273510

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is	s needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	GLEN MURDOCK 16317 PERRY PASS CT. KLEIN TX 77379	\$ 25,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	WELLS FARGO BANK 27702 TOMBALL PARKWAY HOUSTON TX 77375	\$ 15,016	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	ivanie, address, and zir + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

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

OMB No. 1545-0047

2022

Open to Public

Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization **Employer identification number** HABITAT FOR HUMANITY NORTHWEST HARRIS COUNTY 76-0273510 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. Total number at end of year ..... 1 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified 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 a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X.

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Page 2

Pa	art III Organizations Maintaining	Collections	of Art, Historica	al Treasures	s, or Other Si	milar Ass	ets (cor	ntinued)
3	Using the organization's acquisition, accessic collection items (check all that apply):	n, and other reco	rds, check any of th	e following that i	make significant	use of its		
а	Public exhibition	d 🗌	Loan or exchange	orogram				
b	,······	е 🗌	Other					
С	Preservation for future generations							
4	Provide a description of the organization's col XIII.	lections and expla	ain how they further	he organization	s exempt purpos	e in Part		
5	During the year, did the organization solicit or	receive donations	s of art, historical tre	asures, or other	similar			
	assets to be sold to raise funds rather than to	be maintained as	s part of the organiza	tion's collection	?		. Ye	s No
	Complete if the organization 990, Part X, line 21.	answered "Y				ed an amo	unt on F	orm
							X Ye	s No
b	If "Yes," explain the arrangement in Part XIII a	and complete the	following table:				Amount	
	Paginning balance					1c		,934
ч С						1d	804	,236
u _	Additions during the year Distributions during the year					1e	782	,236
f	Ending balance					1f		934
2a	Did the organization include an amount on Fo						X Ye	
	If "Yes," explain the arrangement in Part XIII.							<b>X</b>
Pa	art V Endowment Funds.							
	Complete if the organization	answered "Y	es" on Form 990	<u>, Part IV, line</u>	e 10.			
		(a) Current year	(b) Prior year	(c) Two year	s back (d) Th	ree years back	(e) Four	years back
	Beginning of year balance							
	Contributions							
С	Net investment earnings, gains, and							
لم	losses Grants or scholarships							
u	Other expenditures for facilities and							
٠	programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the curre	ent year end balar	nce (line 1g, column	(a)) held as:	•			
а	Board designated or quasi-endowment	%						
	Permanent endowment %							
С	Term endowment %							
	The percentages on lines 2a, 2b, and 2c show	•						
3a	Are there endowment funds not in the posses	ssion of the organi	ization that are held	and administere	d for the		Г	1
	organization by:							Yes No
h	(ii) Related organizations  If "Yes" on line 3a(ii), are the related organiza		uired on Schodule E					
4	Describe in Part XIII the intended uses of the			· f			. [30]	
Pa	art VI Land, Buildings, and Equi		downnent fands.					
	Complete if the organization		es" on Form 990	. Part IV. line	e 11a. See Fo	orm 990. P	art X. lir	ne 10.
	Description of property	(a) Cost or other (investment	basis (b) Cost	or other basis	(c) Accumulate		(d) Book	
	Land	<u> </u>			-			
	Buildings							
	Leasehold improvements			324,589	256	,514	6	8,075
d				949,573		,339	21	9,234
	Other				-			
Tota	<b>II.</b> Add lines 1a through 1e. <i>(Column (d) must</i> e	equal Form 990, F	Part X, column (B), I	ine 10c.)			28	7,309

Schedule D (F	Form 990) 2022 HABITAT FOR HUMANITY	NORTHWEST	76-0273510	Page 3
Part VII	Investments – Other Securities.			<u> </u>
	Complete if the organization answered "Yes" of	on Form 990, Part IV,	line 11b. See Form 990,	Part X, line 12.
	(a) Description of security or category	(b) Book value	(c) Method of valu	uation:
	(including name of security)		Cost or end-of-year ma	arket value
(1) Financial	derivatives			
	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
i	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments – Program Related.			
	Complete if the organization answered "Yes" of	<u>on Form 990, Part IV,</u>	line 11c. See Form 990,	Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valu	uation:
			Cost or end-of-year ma	arket value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" of	on Form 990, Part IV,	line 11d. See Form 990,	Part X, line 15.
	(a) Description			(b) Book value
(1)	RIGHT-OF-USE ASSETS			4,213,412
(2)	LAND HELD FOR FUTURE C			531,203
(3)	CONSTRUCTION IN PROGRE	SS		141,181
(4)				
(5)				
(6)				
_(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)			4,885,796
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" of	on Form 990, Part IV,	line 11e or 11f. See Forn	n 990, Part X,
	line 25.			
1.	(a) Description of liability			(b) Book value
(1) Federal	income taxes			
(2) <b>OPER</b>	ATING LEASE LIABILITIES			4,290,584
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total (Colum	on (h) must aqual Form 000 Part V col (R) line 25 )			4 290 584

<sup>2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

P	art XI Reconciliation of Revenue per Audited Financia				
	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, II	ne 12a.	4	7 125 175
1	Total revenue, gains, and other support per audited financial statements			1	7,135,175
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ما			
a		2a   2b			
b					
c d			269,679		
e				2e	269,679
3				3	6,865,496
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	I			0,000,100
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b		415			
C	Add lines <b>4a</b> and <b>4b</b>		***	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	6,865,496
P	art XII Reconciliation of Expenses per Audited Financia			Retu	
	Complete if the organization answered "Yes" on Fo				
1	Total expenses and losses per audited financial statements			1	6,729,757
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				,
а	Donated services and use of facilities	2a			
b		2b			
С	Other losses	0-			
d	Other (Describe in Part XIII.)	2d	290,829		
е				2e	290,829
3	Subtract line 2e from line 1			3	6,438,928
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а		4a			
b	(	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	
5	Add lines <b>4a</b> and <b>4b</b> Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, lin			4c	6,438,928
5 P	Add lines <b>4a</b> and <b>4b</b> Total expenses. Add lines <b>3</b> and <b>4c</b> . <i>(This must equal Form 990, Part I, lin</i> <b>art XIII Supplemental Information.</b>	e 18.)		5	
Prov 2; P	Add lines <b>4a</b> and <b>4b</b> Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, lin	d 4; Part IV, lines 1b a to provide any addition	nd 2b; Part V, line 4; nal information. TRIBUTIONS	5 Part X,	line ASSETS
2; P Prov 2; P	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information.  Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ART IV, LINE 1B - EXPLANATION FOR UNK	d 4; Part IV, lines 1b a to provide any addition	nd 2b; Part V, line 4; nal information. TRIBUTIONS	5 Part X,	line ASSETS
Prov Prov 2; P P	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information.  Fide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ART IV, LINE 1B - EXPLANATION FOR UNR.  ABITAT FOR HUMANITY NORTHWEST HARRIS	e 18.)  d 4; Part IV, lines 1b a to provide any addition EPORTED CON	nd 2b; Part V, line 4; nal information. TRIBUTIONS SCROW ACCOU	5 Part X,	line ASSETS
Prov 2; P P	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information.  Fide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ART IV, LINE 1B - EXPLANATION FOR UNK.  ABITAT FOR HUMANITY NORTHWEST HARRIS INSURANCE.	e 18.)  d 4; Part IV, lines 1b a to provide any addition EPORTED CONMAINTAINS E	nd 2b; Part V, line 4; nal information. TRIBUTIONS SCROW ACCOU	5 Part X, OR JNTS	line ASSETS FOR
Prov 2; P P	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information.  Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ART IV, LINE 1B - EXPLANATION FOR UNK.  ABITAT FOR HUMANITY NORTHWEST HARRIS INTO COMEOWNER'S TAXES AND INSURANCE.  ART IV, LINE 2B - ESCROW LIABILITY ART	e 18.)  d 4; Part IV, lines 1b a to provide any addition EPORTED CONMAINTAINS E	nd 2b; Part V, line 4; nal information. TRIBUTIONS SCROW ACCOU	5 Part X, OR JNTS	line ASSETS FOR
Prov Prov 2; P P H H	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information.  Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ART IV, LINE 1B - EXPLANATION FOR UNK.  ABITAT FOR HUMANITY NORTHWEST HARRIS INTO COMEOWNER'S TAXES AND INSURANCE.  ART IV, LINE 2B - ESCROW LIABILITY ART	e 18.)  d 4; Part IV, lines 1b a to provide any addition EPORTED CONMAINTAINS E	nd 2b; Part V, line 4; nal information. TRIBUTIONS SCROW ACCOU	5 Part X, OR JNTS	line ASSETS FOR
Prov Prov 2; P P H H	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lines 1 and XIII Supplemental Information.  Fide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ART IV, LINE 1B - EXPLANATION FOR UNK ABITAT FOR HUMANITY NORTHWEST HARRIS IN OMEOWNER'S TAXES AND INSURANCE.  ART IV, LINE 2B - ESCROW LIABILITY ARE ABITAT FOR HUMANITY NORTHWEST HARRIS IN ABITAT FOR HUMANITY NORTHWEST HARRIS HUMANITY HUMANITY HUMANITY HUMANITY H	e 18.)  d 4; Part IV, lines 1b a to provide any addition EPORTED CONMAINTAINS E	nd 2b; Part V, line 4; nal information. TRIBUTIONS SCROW ACCOU	5 Part X, OR JNTS	line ASSETS FOR
Prov Prov 2; P P H H	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lines 1 and XIII Supplemental Information.  Fide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ART IV, LINE 1B - EXPLANATION FOR UNK ABITAT FOR HUMANITY NORTHWEST HARRIS IN OMEOWNER'S TAXES AND INSURANCE.  ART IV, LINE 2B - ESCROW LIABILITY ARE ABITAT FOR HUMANITY NORTHWEST HARRIS IN ABITAT FOR HUMANITY NORTHWEST HARRIS HUMANITY HUMANITY HUMANITY HUMANITY H	e 18.)  d 4; Part IV, lines 1b a to provide any addition EPORTED CONMAINTAINS E	nd 2b; Part V, line 4; nal information. TRIBUTIONS SCROW ACCOU	5 Part X, OR JNTS	line ASSETS FOR
Prov 2; P P H H	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lines 1 and XIII Supplemental Information.  Fide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ART IV, LINE 1B - EXPLANATION FOR UNK ABITAT FOR HUMANITY NORTHWEST HARRIS IN OMEOWNER'S TAXES AND INSURANCE.  ART IV, LINE 2B - ESCROW LIABILITY ARE ABITAT FOR HUMANITY NORTHWEST HARRIS IN ABITAT FOR HUMANITY NORTHWEST HARRIS HUMANITY HUMANITY HUMANITY HUMANITY H	e 18.)  d 4; Part IV, lines 1b a to provide any addition EPORTED CON MAINTAINS E	nd 2b; Part V, line 4; nal information. TRIBUTIONS SCROW ACCOUNTY XPLANATION SCROW ACCOUNTY	Part X, OR JNTS	Ine ASSETS FOR
Prov 2; P P H H H	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information.  Fide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ART IV, LINE 1B - EXPLANATION FOR UNK  ABITAT FOR HUMANITY NORTHWEST HARRIS IN OMEOWNER'S TAXES AND INSURANCE.  ART IV, LINE 2B - ESCROW LIABILITY ART  ABITAT FOR HUMANITY NORTHWEST HARRIS IN OMEOWNER'S TAXES AND INSURANCE.	e 18.)  d 4; Part IV, lines 1b a to provide any addition EPORTED CON MAINTAINS E	nd 2b; Part V, line 4; nal information. TRIBUTIONS SCROW ACCOUNTY XPLANATION SCROW ACCOUNTY NANCIALS -	Part X, OR JNTS	line ASSETS FOR FOR
Prov 2; P P H H H	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, liner XIII Supplemental Information.  Indeethe descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ART IV, LINE 1B - EXPLANATION FOR UNK  ABITAT FOR HUMANITY NORTHWEST HARRIS  OMEOWNER'S TAXES AND INSURANCE.  ART IV, LINE 2B - ESCROW LIABILITY ARE  ABITAT FOR HUMANITY NORTHWEST HARRIS  OMEOWNER'S TAXES AND INSURANCE.  ART XI, LINE 2D - REVENUE AMOUNTS INCOMEOUS OF SALES	e 18.)  d 4; Part IV, lines 1b a to provide any addition EPORTED CON MAINTAINS E	nd 2b; Part V, line 4; nal information. TRIBUTIONS SCROW ACCOUNTY XPLANATION SCROW ACCOUNTY NANCIALS -	Part X, OR JNTS OTH	ine ASSETS FOR FOR  ER 143,276
Prov 2; P P H H H	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information.  Add lines 3 and 4c. (This must equal Form 990, Part II, line art XIII Supplemental Information.  Add lines 2d and 9; Part III, lines 3, 5, and 9; Part III, lines 1a and art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ART IV, LINE 1B - EXPLANATION FOR UNK.  ABITAT FOR HUMANITY NORTHWEST HARRIS INC.  ART IV, LINE 2B - ESCROW LIABILITY AR.  ABITAT FOR HUMANITY NORTHWEST HARRIS INC.  ABITAT FOR HUMANITY NORTHWEST HARRIS INC.  ART XI, LINE 2D - REVENUE AMOUNTS INC.	e 18.)  d 4; Part IV, lines 1b a to provide any addition EPORTED CON MAINTAINS E	nd 2b; Part V, line 4; nal information. TRIBUTIONS SCROW ACCOUNTY XPLANATION SCROW ACCOUNTY NANCIALS -	Part X, OR JNTS	ine ASSETS FOR FOR  ER 143,276
Prov 2; P P H H H	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, liner XIII Supplemental Information.  Indeethe descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ART IV, LINE 1B - EXPLANATION FOR UNK  ABITAT FOR HUMANITY NORTHWEST HARRIS  OMEOWNER'S TAXES AND INSURANCE.  ART IV, LINE 2B - ESCROW LIABILITY ARE  ABITAT FOR HUMANITY NORTHWEST HARRIS  OMEOWNER'S TAXES AND INSURANCE.  ART XI, LINE 2D - REVENUE AMOUNTS INCOMEOUS OF SALES	e 18.)  d 4; Part IV, lines 1b a to provide any addition EPORTED CON MAINTAINS E	nd 2b; Part V, line 4; nal information. TRIBUTIONS SCROW ACCOUNTY XPLANATION SCROW ACCOUNTY NANCIALS -	Part X, OR JNTS OTH	ine ASSETS FOR FOR  ER 143,276
Prov 2; P P H H H	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, liner XIII Supplemental Information.  Indeethe descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ART IV, LINE 1B - EXPLANATION FOR UNK  ABITAT FOR HUMANITY NORTHWEST HARRIS  OMEOWNER'S TAXES AND INSURANCE.  ART IV, LINE 2B - ESCROW LIABILITY ARE  ABITAT FOR HUMANITY NORTHWEST HARRIS  OMEOWNER'S TAXES AND INSURANCE.  ART XI, LINE 2D - REVENUE AMOUNTS INCOMEOUS OF SALES	e 18.)  d 4; Part IV, lines 1b a to provide any addition EPORTED CON MAINTAINS E	nd 2b; Part V, line 4; nal information. TRIBUTIONS SCROW ACCOUNTY XPLANATION SCROW ACCOUNTY NANCIALS -	Part X, OR JNTS OTH	ine ASSETS FOR FOR  ER 143,276

Schedule D (Form 990) 2022 HABLITAT FOR HUMANLITY NORTHWEST	76-0273510	Page <b>5</b>
Part XIII Supplemental Information (continued)		
PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN	FINANCIALS -	OTHER
COST OF SALES	\$	143,276
DIRECT EXPENSE FOR FUNDRAISING	\$	126,403
BOOK / TAX DEPRECIATION DIFFERENCE	\$	21,150
• • • • • • • • • • • • • • • • • • • •		

## SCHEDULE G (Form 990)

**Supplemental Information Regarding Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.
BITAT FOR HUMANITY NORTHWEST

2022

Open to Public

Internal Revenue Service

Name of the organization

Department of the Treasury

HABITAT FOR HUMANITY NORTHWEST

Employer identification number

76-0273510 HARRIS COUNTY Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fund-(v) Amount paid to (vi) Amount paid to raiser have (i) Name and address of individual (iv) Gross receipts (or retained by) (or retained by) custody or (ii) Activity or entity (fundraiser) from activity fundraiser listed in organization control of ontributions? col. (i) Yes No 1 2 3 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990) 2022 76-0273510 HABITAT FOR HUMANITY NORTHWEST Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events TOOL BASH NONE (add col. (a) through col. (c)) (event type) (event type) (total number) 226,627 226,627 1 Gross receipts 226,627 226,627 2 Less: Contributions 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 126,403 126,403 9 Other direct expenses 126,403 10 Direct expense summary. Add lines 4 through 9 in column (d) -126,40311 Net income summary. Subtract line 10 from line 3, column (d) ... Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than Part III \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes **Direct Expenses** 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses No 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: Is the organization licensed to conduct gaming activities in each of these states? If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Sche	edule G (Form 990) 2022 HABITAT FOR HUMANITY NORTHWEST 76-0273510			Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?		Y	'es No
2	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity			
	formed to administer charitable gaming?		Y	'es No
3	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		%
		13b		<del></del> %
4	Enter the name and address of the person who prepares the organization's gaming/special events books and	100		
-	records:			
	records.			
	Nama			
	Name			
	Address			
	Address			
· -				
ısa	Does the organization have a contract with a third party from whom the organization receives gaming		П.	
_	revenue?		Y	es No
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the			
	amount of gaming revenue retained by the third party \$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address			
6	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Y	'es No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or			
	spent in the organization's own exempt activities during the tax year \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns	(iii) an	d (v);	and
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional	inform	ation	
	See instructions.			

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2/19/2024
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SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

2022 OMB No. 1545-0047

> Go to www.irs.gov/Form990 for the latest information. Attach to Form 990.

Open to Public Inspection

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990 **ջ** × AFFORDABLE HOUSING AFFORDABLE HOUSING (h) Purpose of grant Employer identification number or assistance Yes 76-0273510 noncash assistance (g) Description of Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) noncash assistance (e) Amount of Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 18,000 40,000 (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) 14-1815690 501 (C) 14-1815690 501 (C) HABITAT FOR HUMANITY NORTHWEST General Information on Grants and Assistance (b) EIN Enter total number of other organizations listed in the line 1 table the selection criteria used to award the grants or assistance? (1) HABITAT FOR HUMANITY INTERNATIONAL (2) HABITAT FOR HUMANITY INTERNATIONAL NY 12550 NY 12550 HARRIS COUNTY (a) Name and address of organization 125 WASHINGTON STREET 125 WASHINGTON STREET or government Name of the organization NEWBURGH NEWBURGH Part Part II ~ ල 4 3 9 8 6 0

Schedule I (Form 990) (2022)

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(a	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of noncash assistance
		recipients	cash grant	noncash assistance	FMV, appraisal, other)	
<del>-</del>						
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7						
Part IV	Supplemental Information. Provide the information	vide the information	required in Part I, li	ne 2; Part III, columr	required in Part I, line 2; Part III, column (b); and any other additional information.	onal information.

# PART IV - ADDITIONAL INFORMATION

THE ORGANIZATION ANNUALLY PERMITS A TITHE OF ITS CONTRIBUTIONS (EXCLUDING

IN-KIND AND RESTRICTED CONTRIBUTIONS) TO HABITAT FOR HUMANITY INTERNATIONAL

TO SUPPORT HABITAT AFFILIATES IN LESSER DEVELOPED COUNTRIES. THE BOARD OF

DIRECTORS IS IN CONTROL OF DISTRIBUTIONS.

# SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

### **Noncash Contributions**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open To Public Inspection

Name of the organization

Employer identification number

HARRIS COITNTY

76-0273510

	narris C	JUNII			16-02	73310
Pa	rt I Types of Property					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	<b>(d</b> Method of do noncash contrib	etermining
1	Art — Works of art					
2	Art — Historical treasures					
3	Art — Fractional interests					
4	Books and publications					
5	Clothing and household					
	goods					
6	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property					
9	Securities — Publicly traded					
10	Securities — Closely held stock					
11	Securities — Partnership, LLC,					
	or trust interests					
12	Securities — Miscellaneous					
13	Qualified conservation					
	contribution — Historic					
	structures					
14	Qualified conservation					
	contribution — Other					
15	Real estate — Residential					
16	Real estate — Commercial					
17	Real estate — Other					
18	Collectibles					
19	Food inventory					
20	Drugs and medical supplies					
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts					
25	Other ()	X	1	28,820		
26	Other ()					
27	Other ()					
28	Other (					
29	Number of Forms 8283 received by	-	•			
	which the organization completed F	orm 8283,	Part V, Donee Acknowl	edgement	29	
						Yes No
30a	During the year, did the organization					
	28, that it must hold for at least 3 years			tribution, and which isn't re	equired to be	
	used for exempt purposes for the en		ng period?			30a X
b	If "Yes," describe the arrangement i					
31	Does the organization have a gift ac	ceptance	policy that requires the r	eview of any nonstandard		
						31 X
32a	Does the organization hire or use the	ird parties	or related organizations	to solicit, process, or sell	noncash	
	contributions?					32a X
b	If "Yes," describe in Part II.					
33	If the organization didn't report an a	mount in c	olumn (c) for a type of p	roperty for which column	(a) is checked,	
	describe in Part II.					

Schedule M (Fo	rm 990) 2022 <b>HABIT</b> .	AT FOR HUMA	NITY NOE	RTHWEST	76-0273510	Page <b>2</b>
Part II	Supplemental Inf	<b>formation.</b> Provides reporting in Part	le the informa I, column (b)	ation required b ), the number o	y Part I, lines 30b, 32b, and f contributions, the number	33, and whether

#### SCHEDULE O (Form 990)

#### Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization HABITAT FOR HUMANITY NORTHWEST HARRIS COUNTY

Employer identification number

76-0273510

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS
N/A

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 FORM 990 IS PROVIDED TO THE TREASURER. THE TREASURER REVIEWS FORM 990 AND ADDRESSES ANY QUESTIONS TO THE ACCOUNTING COORDINATOR. THE APPROVED FORM 990 IS THEN PRESENTED TO THE BOARD OF DIRECTORS FOR FINAL APPROVAL.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

EMPLOYEES ARE REQUIRED TO DISCLOSE CONFLICTS OF INTEREST DURING THEIR

ANNUAL REVIEW BOARD MEMBERS AND OFFICERS ARE REQUIRED TO DISCLOSE CONFLICT

OF INTEREST MONTHLY AT THE BOARD MEETING AS THE NEED ARISES.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL HABITAT FOR HUMANITY INTERNATIONAL PROVIDES COMPARABILITY DATA TO BE USED IN DETERMINING COMPENSATION. THE EXECUTIVE COMMITTEE DELIBERATES AND DETERMINES THE COMPENSATION. THE DECISION PROCESS IS DOCUMENTED IN THE MINUTES OF THE EXECUTIVE COMMITTEE.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

HABITAT FOR HUMANITY INTERNATIONAL PROVIDES COMPARABILITY DATA TO BE USED

IN DETERMINING COMPENSATION. THE EXECUTIVE COMMITTEE DELIBERATES AND

DETERMINES THE COMPENSATION. THE DECISION PROCESS IS DOCUMENTED IN THE

MINUTES OF THE EXECUTIVE COMMITTEE

Schedule O (Form 990) 2022

Page 2

Name of the organization  HABITAT FOR HUMANITY NORTHWEST	Employer ide 76–027	ntification number 3510
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLO	SURE EX	XPLANATION
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLIC	TS OF 1	NTEREST
POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC	UPON F	REQUEST.
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS	EYDT.AN	IATTON
COST OF SALES	\$	143,276
DIRECT EXPENSE FOR FUNDRAISING	\$	126,403
COST OF SALES	\$	-143,276
DIRECT EXPENSE FOR FUNDRAISING	\$	-126,403
BOOK / TAX DEPRECIATION DIFFERENCE	\$	-21,150
TOTAL	\$	-21,150
	PAGE 1	L OF 1

Form **4562** 

Department of the Treasury Internal Revenue Service

#### **Depreciation and Amortization**

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

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

ttachment equence No. 179

Name(s) shown on return HABITAT FOR HUMANITY NORTHWEST

HARRIS COUNTY

Identifying number 76-0273510

	ness or activity to which this form r							
		cpense Certain Pro	norty Under S	oction 170				
Г		-	• •		u complete E	Dart I		
	Maximum amount (see instru	ve any listed proper	ty, complete P	ait v belole yo	u complete r	ail i.	1	1,080,000
1	•	*	oo instructions)				2	1,080,000
2	Total cost of section 179 prop Threshold cost of section 179			inctructions)			3	2,700,000
4	Reduction in limitation. Subtra		,				4	2,700,000
5	Dollar limitation for tax year. Subtr				, eas instructions		5	
6		cription of property	DI 1033, CITICI -0 II III	(b) Cost (business use		Elected cost		
	(4) 2000	p.a.a.r a. property		(2) 0001 (20011000 000	(3)			
7	Listed property. Enter the am	nount from line 29			7			
8	Total elected cost of section		ts in column (c) li	nes 6 and 7	-		8	
9	Tentative deduction. Enter the						9	
10	Carryover of disallowed dedu						10	
11	Business income limitation. E			ss than zero) or line	e 5. See instruct	tions	11	
12	Section 179 expense deduction		,	,			12	
13	Carryover of disallowed dedu				13			
	: Don't use Part II or Part III be							
Pa	art II Special Depre	ciation Allowance	and Other Der	reciation (Do	n't include lis	sted pro	pertv.	See instructions.)
14	Special depreciation allowand			•				
	during the tax year. See instr	untions					14	4,837
15	Property subject to section 10	00(6)(4) -14:					15	,
16	Other depreciation (including						16	
Pa		ciation (Don't inclu	de listed prope	erty. See instru	ctions.)			
	-	•	Section	on A				
17	MACRS deductions for asset	ts placed in service in tax	years beginning b	efore 2022			17	62,142
18	If you are electing to group any assets	placed in service during the tax y	ear into one or more gen	eral asset accounts, chec	ck here			
	Section B-	-Assets Placed in Serv	ice During 2022	Tax Year Using th	e General Dep	reciation	Syster	n
	(a) Classification of property	<b>(b)</b> Month and year placed in service	(c) Basis for deprec (business/investmen only-see instructio	it use	(e) Convention	(f) Met	hod	(g) Depreciation deduction
<u>19a</u>	3-year property							
b	5-year property							
c	7-year property							
d	10-year property							
e	15-year property							
f	20-year property							
g	25-year property			25 yrs.		S/L		
h	Residential rental			27.5 yrs.	MM	S/L		
	property			27.5 yrs.	MM	S/L		
i	Nonresidential real			39 yrs.	MM	S/L		
	property				MM	S/L		
		-Assets Placed in Servi	ce During 2022 Ta	ax Year Using the	Alternative De	-		em
<u>20a</u>	Class life					S/L		
b	12-year			12 yrs.		S/L		
<u>c</u>	30-year			30 yrs.	MM	S/L		
<u>d</u>	40-year			40 yrs.	MM	S/L	-	
	art IV Summary (See							08 600
21	Listed property. Enter amoun						21	27,699
22	<b>Total.</b> Add amounts from line						22	94,678
23	here and on the appropriate li For assets shown above and				ructions		22	94,070
	portion of the basis attributab							

	<b>ABITA</b> 4562 (202	T FOR HUI	MANITY N	ORTHWE	ST		76-0	2735	10							Page <b>2</b>
	art V	Listed Properties	nt, recreation	, or amus	emen	:.)						•			or	rage <b>L</b>
		<b>Note:</b> For any v 24b, columns (a	ehicle for which	you are using	ng the s	tándard	mileage	rate or o	deductir	ng lease	expense	e, comp	ete <b>onl</b> y	<b>/</b> 24a,		
			—Depreciation								limits fo	r passe	nger aut	omobile	s.)	
24a	Do vou hav	ve evidence to support t				<u>`</u>	Yes	No		If "Yes,"		•			Yes	X No
Туре	(a) of property ehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d Cost or oth	)	Bas	(e) sis for depr siness/inve	eciation estment	(f) Recover period	ry N	(g) Method/ Invention		(h) Depreciat	ion	(i Elected se	
25	•	depreciation allow	· ·					uring				_	27	<b>COO</b>		
		ear and used mor		•		use. Se	e instruc	cuons			2	<b>o</b>		<u>,699</u>		
<u>26</u>		used more than the common transfer than the common transfer to the common transfer than the comm	50% in a qualifie	a pusiness	use:				ı							
٠.		AIBRIENI .	<b>-</b> %	23	2,70	2	59	,666								
			70		_,,0	_		,000								
			%													
27	Property	used 50% or less		usiness use	 e:	-			l							
			%							S/L						
			%							S/L						
28	Add am	ounts in column (h	n), lines 25 throu	igh 27. Ente	er here a	nd on li	ne 21, p	age 1				В	27	,699		
29	Add am	ounts in column (i	), line 26. Enter	here and or	line 7,	page 1 .								29		
								Use of								
		section for vehicle	•		-							-	•		cles	
o yc	our employ	ees, first answer	tne questions in	Section C		you me a)		b)		eting thi		n for the		e)	1:	F)
	T-4-11	-:	barra da la		1	icle 1		icle 2		icle 3		icle 4		icle 5	ı	cle 6
30		siness/investment		ring												
24	•	d <b>on't</b> include co) mmuting miles dri	,													
31 32		ner personal (nonc		еаі												
,,	miles dr		ommung)													
33		les driven during t	he vear Add													
		through 32	, ,													
34		vehicle available	for personal		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use duri	ng off-duty hours?	?													
35	Was the	vehicle used prin	narily by a more													
	than 5%	owner or related	person?													
36	Is anoth	er vehicle available	e for personal us	se?												
		Se	ection C—Ques	tions for E	mploye	rs Who	Provid	le Vehic	les for l	Use by <sup>-</sup>	Their E	mploye	es			
		questions to deter	=	· · · · · · · · · · · · · · · · · · ·	ion to co	mpletin	g Sectio	n B for v	ehicles/	used by	employ	ees who	aren't			
		owners or related														
37		maintain a written	policy statemen	t that prohib	its all pe	ersonal i	use of ve	ehicles, i	ncluding	g commu	uting, by	•			Yes	No
38	•	ployees? maintain a written														
,,	-	es? See the instru		•	•				•	•						
39		treat all use of veh					no, ano	51013, 01	1 70 01 11	nore own						
10	-	orovide more than					rmation	from voi	ur emplo	ovees ab	out the					
		ne vehicles, and re						,	•	,						
11		meet the requirem				e demoi	nstration	use? S	ee instru	uctions						
		your answer to 37									es.					
Pa	art VI	Amortizatio	n													
		(a) Description of costs		<b>(b</b> Date amo begi	rtization			(c) able amour	nt	(d) Code se		(e) Amortiza period percent	or	Amortiza	<b>(f)</b> ation for thi	s year
12	Amortic	ation of costs that	begine during w	our 2022 to	v vear /a	ee instr	uctions)	ı•		I		POTOGIIL	~9~			
74	ATTIOI IIZ	audit of costs triat	begins during yo	Jui ZUZZ la	v A A A	11811	ucuoi is)	1.								
13	Amortiza	ation of costs that	began before vo	our 2022 tax	year	-1				1			43			
14		dd amounts in col				ere to r	eport	<u> </u>			<u> </u>		44			

### 01452001 Habitat for Humanity Northwest \*\*-\*\*\*3510 Federal Asset Report FYE: 6/30/2023 Form 990, Page 1

Asset	Description	Date I <u>n Service</u>	Cost	Bus Sec <u>%</u> 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
<u>5-year</u> 160	r <b>GDS Property:</b> Texas Pride Trailers	8/03/22 _ =	1,312 1,312	Х	0	5 MQ200DB _	0	1,312 1,312
162	r GDS Property: Dempsey Electric	10/26/22	1,015	X	0	7 MQ200DB	0	1,015
163	Credit Card Charge	7/03/22 _ =	2,510 3,525	X	0	7 MQ200DB _	0	2,510 3,525
1 2 3 4 4 5 6 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37	MACRS: HP Laptop Com 5 Computers Computer POS System HP Remarketing Computers Computers Computers Computers Computers Computers Credit Card Rea H&P Salvage - # H&P Salvage - # PC Desk PC Desk Shelving Assets from Hab Correct Fixed A 33 3X6 Store di 20 3X12 metal s 3 bay stainless s 20 5x5 metal go Drinking Fountain Warehouse Racl Warehouse Racl Warehouse Rac Warehouse Rac Fencing Fencing Fencing Fencing Fencing Fencing Fencing Fencing Fencing Racks for Warehouse Racks for Warehouse Racks for Warehouse Racl Warehouse Racl Warehouse Rac Warehouse Racl	6/19/12 7/01/12 6/30/15 6/30/15 6/30/15 7/01/13 12/04/13 1/08/14 1/22/14 6/05/14 11/30/17 12/20/17 9/10/19 1/15/19 6/08/04 6/30/09 6/30/09 1/22/12 1/22/12 1/22/12 1/22/12 1/22/12 1/22/12 1/22/12 1/22/12 1/22/13 5/27/14 6/30/15	3,525  496 250 1,017 449 1,560 1,899 695 919 647 2,013 800 1,199 1,199 4,969 6,200 3,191 1,320 1,600 400 1,600 361 375 4,980 2,881 2,526 1,320 1,239 1,239 150 120 360 3,000 2,410 5,025 2,050 5,913 3,065 27,504 1,602 2,997 5,452 1,128 1,128 1,128	X X X X X X X X X X X X X X X X X X X	248 125 509 224 780 950 348 459 324 191 80 456 360 2,485 3,100 1,595 660 800 200 800 180 1,263 660 619 75 60 1,205 2,512 1,025 2,956	5 HY 200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB 10 HY 200DB 10 HY 200DB 10 HY 200DB	496 250 1,017 449 1,560 1,899 695 919 647 1,822 720 743 839 4,969 6,200 3,191 1,320 1,600 400 1,600 361 375 4,980 2,881 2,526 1,320 1,239 1,239 1,239 1,239 1,239 1,239 1,239 1,239 1,239 1,241 1,250 1,260 2,811 1,27 1,27 1,28 1,29 1,29 1,29 1,29 1,29 1,29 1,29 1,29	3,525 0 0 0 0 0 0 0 0 0 191 80 183 240 0 0 0 0 0 0 0 0 0 0 0 0 0
44 45 46 47 48 49 50 51 52 53 54 55	Knight Security Warehouse Rac Warehouse Rac Warehouse Rac Warehouse Rac Warehouse Rac Warehouse Rac Wiring and Outl Improvements o Roofing Work o Roofing work - D Prepare flooring DEMPSEY Elect Donation Cente	9/30/13 12/16/01 2/13/14 4/15/14 5/07/14 5/13/14 7/30/15 5/04/16 5/11/16 6/21/16 4/07/17 6/30/17	2,804 3,662 2,390 1,510 2,428 360 2,049 1,179 9,500 8,250 10,000 3,011 51,590	X X X X X X X X X X X X X X X	1,402 2,563 1,195 755 1,214 180 1,025 590 4,750 4,125 5,000 1,505 25,795	5 HY 200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB 7 HY 200DB 7 HY 200DB 7 HY 200DB 7 HY 200DB 5 HY 200DB 7 HY 200DB 5 HY 200DB 5 HY 200DB 7 HY 200DB	11,517 2,804 3,662 2,390 1,510 2,428 360 1,943 1,179 8,671 7,464 7,143 3,011 45,400	0 0 0 0 0 0 106 0 829 786 0 0 4,127

FYE: 6/30/2023

#### 01452001 Habitat for Humanity Northwest \*\*-\*\*\*3510 Federal Asset Report Form 990, Page 1

Asset         Description         In Service         Cost         %         179Bonus         for Depr         PerConv Mode           57         HVAC System -         8/16/17         17,456         X         8,728         7         HY 200	
	<b>JD</b> 11,704 2,177
58 Phone Cabling - 9/01/17 1,854 X 927 7 HY 200	DB 1,255 240
59 Plumbing - Pat 11/21/01 1,200 X 840 7 HY 200	
60 Electrical - DEM 1/05/18 4,451 X 1,590 7 HY 200	
61 Donation Cente 7/11/18 25,276 X 6,066 5 HY 200 62 Dempsey Elelctr 12/31/01 1,346 X 1,058 7 HY 200	
63 Fan Kits - Big As 2/01/21 4.596 X 2.528 5 HY 200	DB 2,068 1,011
64 Doors & Openin 8/01/20 16,725 X 8,195 5 HY 200	
65 Various Work - D 2/01/21 7,500 X 4,125 5 HY 200 66 Various Work - D 3/01/21 22,041 X 12,343 5 HY 200	DB 3,375 1,650 DB 9,698 4,937
68 Cargo Craft Trai 6/30/09 4,780 X 2,390 5 HY 200	
69 2002 Internation 6/30/09 17,589 X 8,795 5 HY 200	DB 17,589 0
70 2005 Chevy Van 6/16/11 21,039 X 0 5 HY 200	
71 Decon Trailer 5/24/12 4,100 X 2,050 5 HY 200 72 18' and 20' Carg 6/27/13 9,000 X 4,500 5 HY 200	
73 Trailer Wheel an 8/14/13 4,653 X 2,326 5 HY 200	OB 4,653 0
74 Trailer Wheel an 8/14/13 4,081 X 2,041 5 HY 200	OB 4,081 0
75 AAA Banners 12/09/13 4,107 X 2,054 5 HY 200 76 AAA Banners 12/11/01 4,410 X 3,087 5 HY 200	
76 AAA Banners 12/11/01 4,410 X 3,087 5 HY 200 77 AAA Banners 1/12/14 2,929 X 1,464 5 HY 200	
78 AAA Banners 12/10/01 2,470 X 1,729 5 HY 200	OB 2,470 0
79 Box Truck 3/31/16 89,159 X 44,580 5 HY 200	
80 Carolyn's Truck 12/28/01 42,272 X 29,591 5 HY 200 81 2018 Toyota Tu 4/26/18 26,758 X 3,270 5 HY 200	
83 2017 Ford F250 11/09/17 63,381 X 5,634 5 HY 200	
85 2019 Ford F150 3/22/19 35,002 X 11,551 5 HY 200	DB 23,451 7,700
86 Lone Star Chev 3/16/20 11,147 X 4,905 5 HY 200	
87 Repairs - 2001 I 2/26/19 13,428 X 4,297 5 HY 200 90 Scissor Lift 6/30/15 6,288 X 3,144 5 HY 200	
91 Forklift 6/21/05 5,950 5,950 7 HY 200	
92 Delivery charge 6/30/05 250 250 7 HY 200	DB 250 0
93 Misc 6/30/09 7,210 X 3,605 5 HY 200	
94 Mustang Machi 7/26/12 24,000 X 12,000 7 HY 200 95 Toyota Pallet Ja 6/28/13 3,800 X 1,900 5 HY 200	
96 Toyota Pallet Ja 6/28/13 900 X 450 5 HY 200	OB 900 0
97 Mustang Machi 7/02/13 20,063 X 10,032 5 HY 200	
98 Port City Surplu 4/30/14 2,450 X 1,225 5 HY 200 99 Forklift for ware 3/31/16 26,254 X 13,127 7 HY 200	
100 Replacement Tir 3/01/17 1,485 X 743 7 HY 200	
101 F1 Technologies 8/25/98 679 679 7 HY 200	DB 679 0
102 Comp USA 9/16/98 642 642 7 HY 200 103 Computers 11/02/99 1,150 1,150 5 HY 200	
103 Computers 11/02/99 1,150 1,150 5 HY 200 104 Server 6/30/01 9,925 9,925 7 HY 200	
105 Marschel Dean 4/05/05 1,780 1,780 5 HY 200	OB 1,780 0
106 Marschel Dean 5/17/05 88 88 5 HY 200	DB 88 0
107 Greg Turner     11/21/05     100     100 7 HY 200       108 In Kind     6/30/09     2,000     X     1,000 3 HY 200	
109 Computers Offi 7/01/12 1,150 X 575 3 HY 200	DB 1,150 0
110 Battery Backup 5/27/11 124 X 0 3 HY 200	DB 124 0
111 Battery Backup       12/07/11       76       X       0       3 HY 200         112 Cable Clips Tie       2/16/12       77       X       39       5 HY 200	
112 Cable Clips Tie 2/16/12 77 X 39 5 HY 200 113 4 Nortel network 2/28/12 16,000 X 8,000 5 HY 200	OB 16,000 0
114 2 Routers 2/28/12 300 X 150 5 HY 200	DB 300 0
115 1 APC Cabinet 2/28/12 800 X 400 5 HY 200	
116 1 UPS 2/28/12 750 X 375 5 HY 200 117 AUX Monitor 2/28/12 100 X 50 5 HY 200	DB 750 0 DB 100 0
118 1 KVM & Monito 2/28/12 500 X 250 5 HY 200	DB 500 0
119 2 HP Servers wi 2/28/12 3,000 X 1,500 5 HY 200	OB 3,000 0
120 HUB for sharing 3/20/12 22 X 11 5 HY 200 121 Large format pri 6/09/12 975 X 487 5 HY 200	OB 22 0 OB 975 0
121 Large format pri 6/09/12 975 X 487 5 HY 200 122 Laptop for Seni 6/19/12 579 X 290 3 HY 200	
123 HĎMÎ Cables 7/05/12 54 X 27 5 HY 200	DB 54 0
124 6 APC AC1500 1/12/13 1,800 X 900 3 HY 200	DB 1,800 0
125 2 Laptops for C 5/23/13 1,338 X 669 3 HY 200 126 HP Computer 7/15/13 712 X 356 5 HY 200	
120 Hr Computer 7/13/13 712 X 330 3 H1 200 127 5 iPads - WI-FI 3 4/04/19 2,145 X 0 3 HY 200	DB 2,145 0
128 Equipment and Supplies for New 5/13/12 629 X 315 10 HY 200	DB 629 0
129 Equipment and Supplies for New 5/13/12 239 X 119 10 HY 200	
130 Equipment and Supplies for New 5/13/12 248 X 124 10 HY 200 131 Deadbolts 5/13/12 117 X 59 10 HY 200	
132 Dishwasher Hose 5/13/12 32 X 16 10 HY 200	

Form 990, Page 1

FYE: 6/30/2023

		Б. 1		-	•	Б.			
Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
133 134 135 136 137 138 139 140 141 142 143 144 145 146 148 150 151 153	Dual outlets Affiliate Share of Office Equipment Performance Te Amegy Bank of In Kind Cash Counting Machine Folding Chairs Office Cubicles 18' Conferencee Table Modular Space Lowe's Office Equipment Computer Equipment 1991 Box Truck Mateco Truck E 2017 Nissan Tit 2019 Ford F250 Texas Pride Trailer	5/13/12 5/13/12 6/30/98 12/30/00 7/18/06 6/30/09 5/10/12 5/10/12 2/01/12 11/05/12 7/17/13 7/22/13 10/06/19 6/27/10 9/10/13 2/26/18 6/21/19 12/08/21	13 5,827 8,400 1,926 800 4,180 509 310 5,000 6,979 5,500 168 6,890 4,175 2,050 34,332 36,500 21,455	70	X X X X X X X X X X X X X X X X X X X	6 2,913 8,400 1,926 800 2,090 254 155 2,500 3,489 2,750 84 2,687 2,087 1,025 3,815 13,140	10 HY 200DB 10 HY 200DB 5 HY 200DB 7 HY 200DB 5 HY 200DB	13 5,827 8,400 1,926 800 4,180 509 310 5,000 6,979 5,500 168 4,203 4,175 2,050 30,517 23,360 21,455	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
154 155	Chevrolet 3500 Engine Replacement Warehouse Building Improvement	6/29/22 12/31/21	13,497 50,024		X X	0	· 111 -00DD	13,497 50,024	0
			1,036,725			420,919		925,303	62,142
Listed 159 161 152 157 158	Mobilease Vin805377 Ripleys Mufflers - Box Truck Repair 2020 Dodge Ra 2022 Ford F150 (Vin 6673) 2020 Chevrolet Silverado 35 (Vin 1596)	5/18/23 11/18/22 8/01/20 1/14/22 12/17/21	57,003 7,499 27,996 65,182 75,022 232,702		X X X X X	36,803 0 22,863 0 0 59,666	5 MQ200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB	0 0 5,133 65,182 75,022 145,337	20,200 7,499 0 0 0 27,699
	Grand Totals Less: Dispositions and Transf Less: Start-up/Org Expense	ers	1,274,264 0 0			480,585 0 0		1,070,640 0 0	94,678 0 0
	<b>Net Grand Totals</b>		1,274,264		=	480,585		1,070,640	94,678

01452001 Habitat for Humanity Northwest

TX Asset Report

FYE: 6/30/2023

#### Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	TX Prior	TX Current	Federal Current	Difference Fed - TX
<u>5-year</u> 160	GDS Property: Texas Pride Trailers	8/03/22	1,312	1,312	0	459	1,312	853
100	Texas Tride Trancis	6/03/22 _	1,312	1,312	0	459	1,312	853
7	CDC Down out							
162	r GDS Property: Dempsey Electric Credit Card Charge	10/26/22 7/03/22	1,015 2,510	1,015 2,510	0	181 628	1,015 2,510	834 1,882
		=	3,525	3,525	0	809	3,525	2,716
Prior	MACRS:							
1 2	HP Laptop Com 5 Computers	6/19/12 7/01/12	496 250	496 250	496 <b>25</b> 0	0	0	0
3 4	Computer Computer	6/30/15 6/30/15	1,017 449	1,017 449	1,017 449	0	0	0
6	POS System HP Remarketing	7/01/13 12/04/13	1,560 1,899	1,560 1,899	1,560 1,899	0	0	0
7 8	Computers Computers	1/08/14 1/22/14	695 919	695 919	695 919	0	0	0
	Credit Card Rea H&P Salvage - #	6/05/14 11/30/17	647 2,013	647 2,013	647 1,897	0 116	0 191	0 75
	H&P Salvage - # PC Desk	12/20/17 9/10/19	800 1,199	800 1,199	754 854	46 138	80 183	34 45
14	PC Desk Shelving	1/15/19 6/08/04	1,199 4,969	1,199 4,969	992 4,969	138	240	102 0
15 16	Assets from Hab Correct Fixed A	6/30/09 6/30/09	6,200 3,191	6,200 3,191	6,200 3,191	0	0	0
17 18	33 3X6 Store di 20 3X12 metal s	1/22/12 1/22/12	1,320 1,600	1,320 1,600	1,320 1,600	0	0	0
	3 bay stainless s 20 5x5 metal go	1/22/12 1/22/12	400 1,600	400 1,600	400 1,600	0	0	0
21 22	Drinking Fountain Warehouse Racl	4/01/12 7/30/12	361 375	361 375	361 375	0	0	0
23 24	Warehouse Racl Warehouse Racl	7/30/12 10/01/12	4,980 2,881	4,980 2,881	4,980 2,881	0	0	0
26	Fencing Warehouse Rac	6/30/15 12/20/13	2,526 1,320	2,526 1,320	2,526 1,320	0	0	0
27 28	Warehouse Rac Fencing	5/27/14 6/30/15	1,239 150	1,239 150	1,239 150	0	0	0
29 30	Fencing Fencing	6/30/15 6/30/15	120 360	120 360	120 360	0	0	0
32	Racks for Warehouse Racks for Warehouse	1/05/16 1/06/16	3,000 2,410	3,000 2,410	3,000 2,410	0	0	0
33 34	Warehouse Racl Warehouse Racl	2/20/17 1/19/14	5,025 2,050	5,025 2,050	5,025 2,050	0	0	0
35 36	Warehouse Build Warehouse Rac	6/30/15 6/30/15	5,913 3,065	5,913 3,065	5,913 2,563	201	0	-201
37 38	Buildout expens Perimeter Fence	6/29/12 6/29/12	27,504 1,602	27,504 1,602	27,504 1,602	0	0	0
39 40	Knight Security Knight Security	10/01/12 12/28/01	2,997 5,452	2,997 5,452	2,899 5,452	98 0	112	14 0
42	New Primary Bo New Primary Bo	9/05/13 9/16/13	1,128 1,128	1,128 1,128	1,128 1,128	0	0	0
43 44	Knight Security Knight Security	9/30/13 9/30/13	11,917 2,804	11,917 2,804	11,917 2,804	0	0	0
45 46	Warehouse Rac Warehouse Rac	12/16/01 2/13/14	3,662 2,390	3,662 2,390	3,662 2,390	0	0	0
47 48	Warehouse Rac Warehouse Rac	4/15/14 5/07/14	1,510 2,428	1,510 2,428	1,510 2,428	0	0	0
49 50	Warehouse Rac Wiring and Outl	5/13/14 7/30/15	360 2,049	360 2,049	360 1,957	0 92	0 106	0 14
51 52	Improvements o Roofing Work o	5/04/16 5/11/16	1,179 9,500	1,179 9,500	1,179 9,076	0 424	829 829	0 405
53 54	Roofing work - D Prepare flooring	6/21/16 6/21/16	8,250 10,000	8,250 10,000	7,882 10,000	368	786 0	418 0
55 56	DEMPSEY Elect Donation Cente	4/07/17 6/30/17	3,011 51,590	3,011 51,590	3,011 44,684	0 4,604	4,127	0 -477

### 01452001 Habitat for Humanity Northwest \*\*-\*\*\*3510 FYF: 6/30/2023 TX Asset Report Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	TX Prior	TX Current	Federal Current	Difference Fed - TX
57	HVAC System -	8/16/17	17,456	17,456	13,561	1,558	2,197	639
58 59	Phone Cabling - Plumbing - Pat	9/01/17 11/21/01	1,854 1,200	1,854 1,200	1,440 1,200	166 0	240	74 0
60	Electrical - DEM	1/05/18	4,451	4,451	3,458	397	636	239
61	Donation Cente	7/11/18	25,276	25,276	20,908	2,912	4,044	1,132
62 63	Dempsey Elelctr Fan Kits - Big As	12/31/01 2/01/21	1,346 4,596	1,346 4,596	1,346 2,390	0 882	1.011	0 129
64	Doors & Openin	8/01/20	16,725	16,725	8,697	3,211	3,278	67
65 66	Various Work - D Various Work - D	2/01/21 3/01/21	7,500 22,041	7,500 22,041	3,900 11,461	1,440 4,232	1,650 4,937	210 705
68	Cargo Craft Trai	6/30/09	4,780	4,780	4,780	0	0	0
69 70	2002 Internation 2005 Chevy Van	6/30/09 6/16/11	17,589 21,039	17,589 21,039	17,589 21,039	0	0	0
71	Decon Trailer	5/24/12	4,100	4,100	4,100	0	0	0
72	18' and 20' Carg	6/27/13	9,000	9,000	9,000	0	0	0
73 74	Trailer Wheel an Trailer Wheel an	8/14/13 8/14/13	4,653 4,081	4,653 4,081	4,653 4,081	0	0	0
75	AAA Banners	12/09/13	4,107	4,107	4,107	0	0	0
76 77	AAA Banners AAA Banners	12/11/01 1/12/14	4,410 2,929	4,410 2,929	4,410 2,929	0	0	0
78	AAA Banners	12/10/01	2,470	2,470	2,470	0	ő	0
79 80	Box Truck Carolyn's Truck	3/31/16 12/28/01	89,159 42,272	89,159 42,272	89,159	0	0	0
81	2018 Toyota Tu	4/26/18	26,758	26,758	42,272 25,217	1,541	3,270	1,729
83	2017 Ford F250	11/09/17	63,381	63,381	59,730	3,651	5,634	1,983
85 86	2019 Ford F150 Lone Star Chev	3/22/19 3/16/20	35,002 11,147	35,002 11,147	28,953 7,937	4,032 1,284	7,700 1,962	3,668 678
87	Repairs - 2001 I	2/26/19	13,428	13,428	11,108	1,547	2,865	1,318
90 91	Scissor Lift Forklift	6/30/15 6/21/05	6,288 5,950	6,288 5,950	6,288 5,950	0	0	0
92	Delivery charge	6/30/05	250	250	250	0	0	ő
93	Misc Mustana Mashi	6/30/09	7,210	7,210	7,210	0	0	0
94 95	Mustang Machi Toyota Pallet Ja	7/26/12 6/28/13	24,000 3,800	24,000 3,800	24,000 3,800	0	0	0
96	Toyota Pallet Ja	6/28/13	900	900	900	0	0	0
97 98	Mustang Machi Port City Surplu	7/02/13 4/30/14	20,063 2,450	20,063 2,450	20,063 2,450	0	0	0
99	Forklift for ware	3/31/16	26,254	26,254	25,082	1,172	2,188	1,016
100 101	Replacement Tir F1 Technologies	3/01/17 8/25/98	1,485 679	1,485 679	1,286 679	132	226 0	94 0
102	Comp USA	9/16/98	642	642	642	0	0	0
103	Computers	11/02/99	1,150	1,150	1,150	0	0	0
104 105	Server Marschel Dean	6/30/01 4/05/05	9,925 1,780	9,925 1,780	9,925 1,780	0	0	0
106	Marschel Dean	5/17/05	88	88	88	0	0	0
107 108	Greg Turner In Kind	11/21/05 6/30/09	100 2,000	100 2,000	100 2,000	0	0	0
109	Computers Offi	7/01/12	1,150	1,150	1,150	0	0	0
110 111	Battery Backup Battery Backup	5/27/11 12/07/11	124 76	124 76	124 76	0	0	0
112	Cable Clips Tie	2/16/12	77	77	77	0	0	Ö
	4 Nortel network 2 Routers	2/28/12	16,000	16,000	16,000	0	0	0
	1 APC Cabinet	2/28/12 2/28/12	300 800	300 800	300 800	0	0	0
116	1 UPS	2/28/12	750	750	750	0	0	0
117 118	AUX Monitor 1 KVM & Monito	2/28/12 2/28/12	100 500	100 500	100 500	0	0	0
119	2 HP Servers wi	2/28/12	3,000	3,000	3,000	0	0	0
120 121	HUB for sharing Large format pri	3/20/12 6/09/12	22 975	22 975	22 975	0	0	0
121	Large format pir Laptop for Seni	6/19/12	579	579	579	0	0	0
123	HĎMĨ Cables	7/05/12	54	54	54	0	0	0
124 125	6 APC AC1500 2 Laptops for C	1/12/13 5/23/13	1,800 1,338	1,800 1,338	1,800 1,338	0	0	0
126	HP Computer	7/15/13	712	712	712	0	0	0
127 128	5 iPads - WI-FI 3 Equipment and Supplies for New	4/04/19 5/13/12	2,145 629	2,145 629	2,145 629	$\begin{array}{c} 0 \\ 0 \end{array}$	0	0
128	Equipment and Supplies for New	5/13/12	239	239	239	0	0	0
130	Equipment and Supplies for New	5/13/12	248	248	248	0	0	0
131 132	Deadbolts Dishwasher Hose	5/13/12 5/13/12	117 32	117 32	117 32	0	0	0
		· <del>-</del>				-		-

### 01452001 Habitat for Humanity Northwest \*\*-\*\*\*3510 TX Asset Report FYE: 6/30/2023 Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	TX Prior	TX Current	Federal Current	Difference Fed - TX
133	Dual outlets	5/13/12	13	13	13	0	0	0
134	Affiliate Share of	5/13/12	5,827	5,827	5,827	0	0	0
135	Office Equipment	6/30/98	8,400	8,400	8,400	0	0	0
136	Performance Te	12/30/00	1,926	1,926	1,926	0	0	0
137	Amegy Bank of	7/18/06	800	800	800	0	0	0
138	In Kind	6/30/09	4,180	4,180	4,180	0	0	0
139	Cash Counting Machine	5/10/12	509	509	509	0	0	0
140	Folding Chairs	5/10/12	310	310	310	0	0	0
141	Office Cubicles	2/01/12	5,000	5,000	5,000	0	0	0
142 143	18' Conference Table Modular Space	11/05/12 7/17/13	6,979	6,979	6,979	0	0	0
143	Lowe's Office Equipment	7/17/13	5,500 168	5,500 168	5,500 168	0	0	0
144	Computer Equipment	10/06/19	6,890	6,890	4,906	793	1,075	282
146	1991 Box Truck	6/27/10	4,175	4,175	4,175	0	1,073	0
148	Mateco Truck E	9/10/13	2,050	2,050	2,050	ő	ő	ő
150	2017 Nissan Tit	2/26/18	34,332	34,332	32,354	1,978	3,815	1,837
151	2019 Ford F250	6/21/19	36,500	36,500	30,193	4.205	8,760	4,555
153	Texas Pride Trailer	12/08/21	21,455	21,455	4,291	6,866	0	-6,866
154	Chevrolet 3500 Engine Replacement	6/29/22	13,497	13,497	2,699	4,320	0	-4,320
155	Warehouse Building Improvement	12/31/21	50,024	50,024	10,005	16,007	0	-16,007
			1,036,725	1,036,725	897,145	68,551	62,142	-6,409
Listed	l Property:							
159	Mobilease Vin805377	5/18/23	57,003	57,003	0	2,850	20,200	17,350
161	Ripleys Mufflers - Box Truck Repair	11/18/22	7,499	7,499	0	1,875	7,499	5,624
152	2020 Dodge Ra	8/01/20	27,996	27,996	11,198	6,719	0	-6,719
157	2022 Ford F150 (Vin 6673)	1/14/22	65,182	65,182	13,036	20,859	0	-20,859
158	2020 Chevrolet Silverado 35 (Vin 1596)	12/17/21	75,022	75,022	15,004	24,008	0	-24,008
			232,702	232,702	39,238	56,311	27,699	-28,612
	<b>Grand Totals</b>		1,274,264	1,274,264	936,383	126,130	94,678	-31,452
	Less: Dispositions		0	0	0	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	<b>Net Grand Totals</b>		1,274,264	1,274,264	936,383	126,130	94,678	-31,452

### 01452001 Habitat for Humanity Northwest \*\*-\*\*\*3510 Bonus Depreciation Report

FYE: 6/30/2023

Form	990,	Page	1
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Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
	HP Laptop Com	6/19/12	496	100	0	0	248	248
2	5 Computers Computer	7/01/12 6/30/15	250 1,017	100 100	$0 \\ 0$	0 0	125 508	125 509
4	Computer	6/30/15	449	100	0	0	225	224
	POS System HP Remarketing	7/01/13 12/04/13	1,560 1,899	100 100	$0 \\ 0$	0	780 949	780 950
7	Computers	1/08/14	695	100	0	0	347	348
	Computers	1/22/14	919	100	0	0	460	459
9 10	Credit Card Rea H&P Salvage - #	6/05/14 11/30/17	647 2,013	100 100	$0 \\ 0$	0	323 1,822	324 191
	H&P Salvage - #	12/20/17	800	100	0	0	720	80
	PC Desk PC Desk	9/10/19 1/15/19	1,199 1,199	100 100	$0 \\ 0$	0	743 839	456 360
13	Shelving	6/08/04	4,969	100	0	0	2,484	2,485
	Assets from Hab	6/30/09	6,200	100	0	0	3,100	3,100
16 17	Correct Fixed A 33 3X6 Store di	6/30/09 1/22/12	3,191 1,320	100 100	$0 \\ 0$	0	1,596 660	1,595 660
18	20 3X12 metal s	1/22/12	1,600	100	0	ő	800	800
	3 bay stainless s	1/22/12	400	100	0	0	200	200
20 21	20 5x5 metal go Drinking Fountain	1/22/12 4/01/12	1,600 361	100 100	$0 \\ 0$	0	800 181	800 180
22	Warehouse Racl	7/30/12	375	100	0	0	188	187
23 24	Warehouse Racl	7/30/12 10/01/12	4,980 2,881	100 100	0	0	2,490 1,441	2,490 1,440
	Warehouse Racl Fencing	6/30/15	2,526	100	0	0	1,441	1,263
26	Warehouse Rac	12/20/13	1,320	100	0	0	660	660
27 28	Warehouse Rac Fencing	5/27/14 6/30/15	1,239 150	100 100	0	0	620 75	619 75
	Fencing	6/30/15	120	100	0	0	60	60
	Fencing	6/30/15	360	100	0	0	180	180
31 32	Racks for Warehouse Racks for Warehouse	1/05/16 1/06/16	3,000 2,410	100 100	0	0	1,500 1,205	1,500 1,205
33	Warehouse Racl	2/20/17	5,025	100	ő	ŏ	2,513	2,512
34	Warehouse Racl	1/19/14	2,050	100	0	0	1,025	1,025
35 36	Warehouse Build Warehouse Rac	6/30/15 6/30/15	5,913 3,065	100 100	0	0	2,957 1,533	2,956 1,532
37	Buildout expens	6/29/12	27,504	100	0	0	13,752	13,752
38 39	Perimeter Fence Knight Security	6/29/12 10/01/12	1,602 2,997	100 100	$0 \\ 0$	0	801 1,498	801 1,499
40	Knight Security Knight Security	12/28/01	5,452	100	0	0	1,498	3,816
41	New Primary Bo	9/05/13	1,128	100	0	0	564	564
	New Primary Bo Knight Security	9/16/13 9/30/13	1,128 11,917	100 100	$0 \\ 0$	0	564 5,958	564 5,959
44	Knight Security	9/30/13	2,804	100	ő	ŏ	1,402	1,402
45	Warehouse Rac	12/16/01	3,662	100	0	0	1,099	2,563
46 47	Warehouse Rac Warehouse Rac	2/13/14 4/15/14	2,390 1,510	100 100	$0 \\ 0$	$0 \\ 0$	1,195 755	1,195 755
48	Warehouse Rac	5/07/14	2,428	100	0	0	1,214	1,214
	Warehouse Rac	5/13/14 7/30/15	360 2,049	100 100	0	0	180 1,024	180 1,025
51	Wiring and Outl Improvements o	5/04/16	1,179	100	0	0	589	590
52	Roofing Work o	5/11/16	9,500	100	0	0	4,750	4,750
	Roofing work - D Prepare flooring	6/21/16 6/21/16	8,250 10,000	100 100	0	0	4,125 5,000	4,125 5,000
55	DEMPSEY Elect	4/07/17	3,011	100	0	ő	1,506	1,505
	Donation Cente	6/30/17	51,590	100	0	0	25,795	25,795
	HVAC System - Phone Cabling -	8/16/17 9/01/17	17,456 1,854	100 100	$0 \\ 0$	0	8,728 927	8,728 927
59	Plumbing - Pat	11/21/01	1,200	100	0	0	360	840
	Electrical - DEM Donation Cente	1/05/18 7/11/18	4,451 25,276	100 100	$0 \\ 0$	$0 \\ 0$	2,861 19,210	1,590 6,066
	Dempsey Elelctr	12/31/01	1,346	100	0	0	288	1,058
63	Fan Kits - Big As	2/01/21	4,596	100	0	0	2,068	2,528
	Doors & Openin Various Work - D	8/01/20 2/01/21	16,725 7,500	100 100	$0 \\ 0$	0 0	8,530 3,375	8,195 4,125
66	Various Work - D	3/01/21	22,041	100	0	0	9,698	12,343
	Cargo Craft Trai	6/30/09	4,780	100	0	0	2,390	2,390
	2002 Internation 2005 Chevy Van	6/30/09 6/16/11	17,589 21,039	100 100	$0 \\ 0$	0 0	8,794 21,039	8,795 0
71	Decon Trailer	5/24/12	4,100	100	0	0	2,050	2,050
72	18' and 20' Carg	6/27/13	9,000	100	0	0	4,500	4,500

#### 01452001 Habitat for Humanity Northwest \*\*-\*\*\*3510 Bonus Depreciation Report Form 990, Page 1

FYE: 6/30/2023

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
73	Trailer Wheel an	8/14/13	4,653	100	0	0	2,327	2,326
74 75	Trailer Wheel an AAA Banners	8/14/13 12/09/13	4,081 4,107	100 100	0	0	2,040 2,053	2,041 2,054
76	AAA Banners	12/11/01	4,410	100	0	0	1,323	3,087
	AAA Banners	1/12/14	2,929	100	0	0	1,465	1,464
78 79	AAA Banners Box Truck	12/10/01 3/31/16	2,470 89,159	100 100	0	0	741 44,579	1,729 44,580
80	Carolyn's Truck	12/28/01	42,272	100	0	0	12,681	29,591
81 83	2018 Toyota Tu 2017 Ford F250	4/26/18 11/09/17	26,758 63,381	100 100	0	0	23,488 57,747	3,270 5,634
	2019 Ford F150	3/22/19	35,002	100	0	ŏ	23,451	11,551
	Lone Star Chev	3/16/20	11,147	100	0	0	6,242	4,905
87 90	Repairs - 2001 I Scissor Lift	2/26/19 6/30/15	13,428 6,288	$\frac{100}{100}$	0	0	9,131 3,144	4,297 3,144
93	Misc	6/30/09	7,210	100	0	0	3,605	3,605
94 95	Mustang Machi Toyota Pallet Ja	7/26/12 6/28/13	24,000 3,800	$\frac{100}{100}$	0	0	12,000 1,900	12,000 1,900
96	Toyota Pallet Ja	6/28/13	900	100	0	0	450	450
	Mustang Machi Port City Surplu	7/02/13 4/30/14	20,063 2,450	100 100	0	0	10,031 1,225	10,032 1,225
	Forklift for ware	3/31/16	26,254	100	0	0	13,127	13,127
	Replacement Tir	3/01/17	1,485	100	0	0	742	743
	In Kind Computers Offi	6/30/09 7/01/12	2,000 1,150	100 100	0	0	1,000 575	1,000 575
110	Battery Backup	5/27/11	124	100	0	0	124	0
	Battery Backup Cable Clips Tie	12/07/11 2/16/12	76 77	$\frac{100}{100}$	0	0	76 38	0 <b>3</b> 9
	4 Nortel network	2/16/12 2/28/12	16,000	100	0	0	8,000	8,000
	2 Routers	2/28/12	300	100	0	0	150	150
	1 APC Cabinet 1 UPS	2/28/12 2/28/12	800 750	100 100	0	0	400 375	400 375
117	AUX Monitor	2/28/12	100	100	0	0	50	50
	1 KVM & Monito 2 HP Servers wi	2/28/12 2/28/12	500 3,000	100 100	0	0	250 1,500	250 1,500
	HUB for sharing	3/20/12	22	100	0	0	1,300	1,500
121	Large format pri	6/09/12	975	100	0	0	488	487
	Laptop for Seni HDMI Cables	6/19/12 7/05/12	579 54	100 100	0	0	289 27	290 27
124	6 APC AC1500	1/12/13	1,800	100	0	0	900	900
	2 Laptops for C HP Computer	5/23/13 7/15/13	1,338 712	100 100	0	0	669 356	669 <b>35</b> 6
	5 iPads - WI-FI 3	4/04/19	2,145	100	0	0	2,145	0
	Equipment and Supplies for New	5/13/12	629	100	0	0	314	315
129 130	Equipment and Supplies for New Equipment and Supplies for New	5/13/12 5/13/12	239 248	100 100	0	0	120 124	119 124
131	Deadbolts	5/13/12	117	100	0	0	58	59
	Dishwasher Hose Dual outlets	5/13/12 5/13/12	32 13	100 100	0	$0 \\ 0$	16 7	16 6
134	Affiliate Share of	5/13/12	5,827	100	0	ŏ	2,914	2,913
	In Kind	6/30/09 5/10/12	4,180	100	0	0	2,090	2,090
	Cash Counting Machine Folding Chairs	5/10/12	509 310	100 100	0	0	255 155	254 155
141	Office Cubicles	2/01/12	5,000	100	0	0	2,500	2,500
	18' Conferencee Table Modular Space	11/05/12 7/17/13	6,979 5,500	100 100	0	0	3,490 2,750	3,489 2,750
144	Lowe's Office Equipment	7/22/13	168	100	0	0	84	84
	Computer Equipment 1991 Box Truck	10/06/19 6/27/10	6,890 4,175	100 100	0	$0 \\ 0$	4,203 2,088	2,687 2,087
	Mateco Truck E	9/10/13	2,050	100	0	0	1,025	1,025
	2017 Nissan Tit	2/26/18	34,332	100	0	0	30,517	3,815
	2019 Ford F250 2020 Dodge Ra	6/21/19 8/01/20	36,500 27,996	$\frac{100}{100}$	0	$0 \\ 0$	23,360 5,133	13,140 22,863
153	Texas Pride Trailer	12/08/21	21,455	100	0	0	21,455	0
	Chevrolet 3500 Engine Replacement	6/29/22 12/31/21	13,497 50,024		0	0	13,497 50,024	0
157	Warehouse Building Improvement 2022 Ford F150 (Vin 6673)	1/14/22	65,182	100	0	0	65,182	0
158	2020 Chevrolet Silverado 35 (Vin 1596)	12/17/21	75,022	100	0	0	75,022	0
	Mobilease Vin805377 Texas Pride Trailers	5/18/23 8/03/22	57,003 1,312	100	0	20,200 1,312	0	36,803 0
161	Ripleys Mufflers - Box Truck Repair	11/18/22	7,499	100	0	7,499	0	0
162	Dempsey Electric	10/26/22	1,015		0	1,015	0	0

01452001 Habitat for Humanity Northwest

\*\*-\*\*\*3510 Bonus Depreciation Report

FYE: 6/30/2023 Form 990, Page 1

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Asset _	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
163 C	redit Card Charge	7/03/22	2,510		0	2,510	0	0
		Grand Total	1.242.574			32.536	761.143	448.895

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Tax

 $\mathsf{AMT}$ 

FYE: 6/30/2023

Form Unit Asset

01452001 Habitat for Humanity Northwest

\*\*-\*\*\*3510 **Depreciation Adjustment Report All Business Activities** 

AMT
Adjustments/
Preferences

There are no assets that meet the criteria of this report

Description

<u>Asset</u>	Description	Date In Service	Cost	Tax	AMT
Prior M	IACRS:				
	·	6/19/12 7/01/12 6/30/15 6/30/15 6/30/15 7/01/13 12/04/13 1/08/14 1/22/14 6/05/14 11/30/17 12/20/17 9/10/19 1/15/19 6/08/04 6/30/09 6/30/09 6/30/09 1/22/12 1/01/12 6/30/15	496 250 1,017 449 1,560 1,899 695 919 647 2,013 800 1,199 1,199 4,969 6,200 3,191 1,320 1,600 400 1,600 361 375 4,980 2,881 2,526 1,320 1,239 150 120 360 3,000 2,410 5,025 2,050 5,913 3,065 27,504 1,602 2,997 5,452 1,128 1,128	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	O O O O O O O O O O O O O O O O O O O
42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 68	New Primary Bo Knight Security Knight Security Warehouse Rac Warehouse Rac Warehouse Rac Warehouse Rac Warehouse Rac Wiring and Outl Improvements o Roofing Work o Roofing Work o Roofing Work - D Prepare flooring DEMPSEY Elect Donation Cente HVAC System - Phone Cabling - Plumbing - Pat Electrical - DEM Donation Cente Dempsey Elelctr Fan Kits - Big As Doors & Openin Various Work - D Various Work - D Cargo Craft Trai	9/16/13 9/30/13 12/16/01 2/13/14 4/15/14 5/07/14 5/13/14 7/30/15 5/04/16 6/21/16 6/21/16 6/21/16 6/21/16 4/07/17 8/16/17 9/01/17 11/21/01 1/05/18 7/11/18 12/31/01 2/01/21 8/01/20 2/01/21 3/01/21 6/30/09	1,128 11,917 2,804 3,662 2,390 1,510 2,428 360 2,049 1,179 9,500 8,250 10,000 3,011 51,590 17,456 1,854 1,200 4,451 25,276 1,346 4,596 16,725 7,500 22,041 4,780	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

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FYE: 6/30/2023

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
69	2002 Internation	6/30/09	17,589		0
70	2005 Chevy Van	6/16/11	21,039	0	0
71 72	Decon Trailer	5/24/12 6/27/13	4,100	0	0
72 73	18' and 20' Carg Trailer Wheel an	6/27/13 8/14/13	9,000 4,653	0	0
74	Trailer Wheel an	8/14/13	4,081	ŏ	ŏ
75	AAA Banners	12/09/13	4,107	Ö	Ō
76	AAA Banners	12/11/01	4,410	0	0
77	AAA Banners	1/12/14	2,929	0	0
78 79	AAA Banners Box Truck	12/10/01 3/31/16	2,470 89,159	0	0
80	Carolyn's Truck	12/28/01	42,272	0	0
81	2018 Toyota Tu	4/26/18	26,758	ŏ	ŏ
83	2017 Ford F250	11/09/17	63,381	0	0
85	2019 Ford F150	3/22/19	35,002	3,851	0
86	Lone Star Chev	3/16/20	11,147	1,962	0
87 90	Repairs - 2001 I Scissor Lift	2/26/19 6/30/15	13,428 6,288	1,432	0
91	Forklift	6/21/05	5,950	0	0
92	Delivery charge	6/30/05	250	Õ	Ö
93	Misc	6/30/09	7,210	0	0
94	Mustang Machi	7/26/12	24,000	0	0
95 96	Toyota Pallet Ja	6/28/13 6/28/13	3,800 900	0	0
90 97	Toyota Pallet Ja Mustang Machi	7/02/13	20,063	0	0
98	Port City Surplu	4/30/14	2,450	ő	ŏ
99	Forklift for ware	3/31/16	26,254	0	0
100	Replacement Tir	3/01/17	1,485	114	0
101	F1 Technologies	8/25/98	679	0	0
102 103	Comp USA	9/16/98 11/02/99	642 1,150	0	0
103	Computers Server	6/30/01	9,925	0	0
105	Marschel Dean	4/05/05	1,780	ŏ	ŏ
106	Marschel Dean	5/17/05	88	0	0
107	Greg Turner	11/21/05	100	0	0
108 109	In Kind	6/30/09	2,000 1,150	0	0
110	Computers Offi Battery Backup	7/01/12 5/27/11	1,130	0	0
111	Battery Backup	12/07/11	76	ŏ	ŏ
112	Cable Clips Tie	2/16/12	77	0	0
113	4 Nortel network	2/28/12	16,000	0	0
114	2 Routers	2/28/12	300	0	0
115 116	1 APC Cabinet 1 UPS	2/28/12 2/28/12	800 750	$0 \\ 0$	0
117	AUX Monitor	2/28/12	100	0	0
118	1 KVM & Monito	2/28/12	500	ŏ	Ŏ
119	2 HP Servers wi	2/28/12	3,000	0	0
120	HUB for sharing	3/20/12	22	0	0
121 122	Large format pri Laptop for Seni	6/09/12 6/19/12	975 579	0	0
123	HDMI Cables	7/05/12	54	0	0
124	6 APC AC1500	1/12/13	1,800	ŏ	ŏ
125	2 Laptops for C	5/23/13	1,338	0	0
126	HP Computer	7/15/13	712	0	0
127	5 iPads - WI-FI 3	4/04/19 5/13/12	2,145 629	$0 \\ 0$	0
128 129	Equipment and Supplies for New Equipment and Supplies for New	5/13/12	239	0	0
130	Equipment and Supplies for New	5/13/12	248	ŏ	ŏ
131	Deadbolts	5/13/12	117	0	0
132	Dishwasher Hose	5/13/12	32	0	0
133	Dual outlets	5/13/12	13	0	0
134 135	Affiliate Share of Office Equipment	5/13/12 6/30/98	5,827 8,400	$0 \\ 0$	0
136	Performance Te	12/30/00	1,926	0	0
137	Amegy Bank of	7/18/06	800	ŏ	ŏ
138	In Kind	6/30/09	4,180	0	0
139	Cash Counting Machine	5/10/12	509	0	0
140	Folding Chairs	5/10/12	310	0	0
141 142	Office Cubicles 18' Conference Table	2/01/12 11/05/12	5,000 6,979	0	0
142	Modular Space	7/17/13	5,500	0	0
	· · · · · · · · · · · · · · · · · · ·		-,	Ÿ	v

Asset	Description	Date In Service	Cost	Tax	AMT
144	Lowe's Office Equipment	7/22/13	168		0
145	Computer Equipment	10/06/19	6,890	1,075	ŏ
146	1991 Box Truck	6/27/10	4,175	1,075	ŏ
148	Mateco Truck E	9/10/13	2,050	ŏ	ŏ
150	2017 Nissan Tit	2/26/18	34,332	Ō	Õ
151	2019 Ford F250	6/21/19	36,500	4,380	0
153	Texas Pride Trailer	12/08/21	21,455	0	0
154	Chevrolet 3500 Engine Replacement	6/29/22	13,497	0	0
155	Warehouse Building Improvement	12/31/21	50,024	0	0
160	Texas Pride Trailers	8/03/22	1,312	0	0
162	Dempsey Electric	10/26/22	1,015	0	0
163	Credit Card Charge	7/03/22	2,510	0	0
			1,041,562	26,800	0
Listed	Property:				
159	Mobilease Vin805377	5/18/23	57,003	14,721	0
161	Ripleys Mufflers - Box Truck Repair	11/18/22	7,499	14,721	0
152	2020 Dodge Ra	8/01/20	27,996	ŏ	ŏ
157	2022 Ford F150 (Vin 6673)	1/14/22	65,182	ŏ	ŏ
158	2020 Chevrolet Silverado 35 (Vin 1596)	12/17/21	75,022	ŏ	ő
				14.721	
			232,702 _	<u>14,721</u> =	0
	Grand Totals		1,274,264	41,521	0

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01452001 Habitat for Humanity Northwest

\*\*-\*\*\*3510 TX Future Depreciation Report

FYF: 6/30/2023 Form 990, Page 1

Prior MACRS:	Asset	Description	Date In Service	Cost	TX
2 5 Computers	Prior M	IACRS:			
54         Prepare flooring         6/21/16         10,000         0           55         DEMPSEY Elect         4/07/17         3,011         0           56         Donation Cente         6/30/17         51,590         2,302           57         HVAC System -         8/16/17         17,456         1,558           58         Phone Cabling -         9/01/17         1,854         165           59         Plumbing - Pat         11/21/01         1,200         0           60         Electrical - DEM         1/05/18         4,451         397           61         Donation Cente         7/11/18         25,276         1,456           62         Dempsey Elelctr         12/31/01         1,346         0           63         Fan Kits - Big As         2/01/21         4,596         530	Prior M  1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52	HP Laptop Com 5 Computers Computer Computer POS System HP Remarketing Computers Comput	6/19/12 7/01/12 6/30/15 6/30/15 7/01/13 12/04/13 1/08/14 1/22/14 6/05/14 11/30/17 12/20/17 9/10/19 1/15/19 6/08/04 6/30/09 6/30/09 6/30/09 1/22/12 1/001/12 6/30/15	496 250 1,017 449 1,560 1,899 695 919 647 2,013 800 1,199 1,199 4,969 6,200 3,191 1,320 1,600 400 1,600 361 375 4,980 2,881 2,526 1,320 1,239 150 120 360 3,000 2,410 5,025 2,050 5,913 3,065 27,504 1,602 2,997 5,452 1,128 1,128 1,128 1,128 1,128 1,128 1,128 1,128 1,128 1,128 1,128 1,128 1,128 1,128 1,128 1,129 1,199 1,199 1,199 1,199 1,199 1,199 1,199 1,199 1,299 1,299 1,299 1,299 1,299 1,299 1,602 2,997 5,452 1,128 1,128 1,128 1,128 1,128 1,129 1,199	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
65 Various Work - D 2/01/21 7,500 864 66 Various Work - D 3/01/21 22,041 2,539	55 56 57 58 59 60 61 62 63 64 65	DEMPSEY Elect Donation Cente HVAC System - Phone Cabling - Plumbing - Pat Electrical - DEM Donation Cente Dempsey Elelctr Fan Kits - Big As Doors & Openin Various Work - D	4/07/17 6/30/17 8/16/17 9/01/17 11/21/01 1/05/18 7/11/18 12/31/01 2/01/21 8/01/20 2/01/21	3,011 51,590 17,456 1,854 1,200 4,451 25,276 1,346 4,596 16,725 7,500	0 2,302 1,558 165 0 397 1,456 0 530 1,927 864

02/19/2024 10:29 AM **FYE: 6/30/24** 

01452001 Habitat for Humanity Northwest

\*\*-\*\*\*3510 TX Future Depreciation Report

FYF: 6/30/2023 Form 990, Page 1

Asset	Description	Date In Service	Cost	TX
69	2002 Internation	6/30/09	17,589	0
70	2005 Chevy Van	6/16/11	21,039	0
71 72	Decon Trailer 18' and 20' Carg	5/24/12 6/27/13	4,100 9,000	0
73	Trailer Wheel an	8/14/13	4,653	0
74	Trailer Wheel an	8/14/13	4,081	0
75 76	AAA Banners	12/09/13	4,107	0
76 77	AAA Banners AAA Banners	12/11/01 1/12/14	4,410 2,929	0
78	AAA Banners	12/10/01	2,470	0
79	Box Truck	3/31/16	89,159	0
80	Carolyn's Truck	12/28/01	42,272	0
81 83	2018 Toyota Tu 2017 Ford F250	4/26/18 11/09/17	26,758 63,381	0
85	2017 Fold F250 2019 Ford F150	3/22/19	35,002	2,017
86	Lone Star Chev	3/16/20	11,147	1,284
87	Repairs - 2001 I	2/26/19	13,428	773
90 91	Scissor Lift Forklift	6/30/15 6/21/05	6,288 5,950	0
92	Delivery charge	6/30/05	250	0
93	Misc	6/30/09	7,210	0
94	Mustang Machi	7/26/12	24,000	0
95 96	Toyota Pallet Ja Toyota Pallet Ja	6/28/13 6/28/13	3,800 900	0
97	Mustang Machi	7/02/13	20,063	0
98	Port City Surplu	4/30/14	2,450	0
99	Forklift for ware	3/31/16	26,254	0
100 101	Replacement Tir F1 Technologies	3/01/17 8/25/98	1,485 679	67 0
101	Comp USA	9/16/98	642	0
103	Computers	11/02/99	1,150	0
104	Server	6/30/01	9,925	0
105 106	Marschel Dean Marschel Dean	4/05/05 5/17/05	1,780 88	0
107	Greg Turner	11/21/05	100	0
108	In Kind	6/30/09	2,000	Ö
109	Computers Offi	7/01/12	1,150	0
110 111	Battery Backup	5/27/11 12/07/11	124 76	0
111	Battery Backup Cable Clips Tie	2/16/12	70 77	0
113	4 Nortel network	2/28/12	16,000	Ö
114	2 Routers	2/28/12	300	0
115 116	1 APC Cabinet 1 UPS	2/28/12 2/28/12	800 750	0
117	AUX Monitor	2/28/12	100	0
118	1 KVM & Monito	2/28/12	500	0
119	2 HP Servers wi	2/28/12	3,000	0
120 121	HUB for sharing Large format pri	3/20/12 6/09/12	22 975	0
122	Laptop for Seni	6/19/12	579	0
123	HDMI Cables	7/05/12	54	0
124	6 APC AC1500	1/12/13	1,800	0
125 126	2 Laptops for C	5/23/13 7/15/13	1,338 712	0
120	HP Computer 5 iPads - WI-FI 3	4/04/19	2,145	0
128	Equipment and Supplies for New	5/13/12	629	ŏ
129	Equipment and Supplies for New	5/13/12	239	0
130 131	Equipment and Supplies for New Deadbolts	5/13/12 5/13/12	248 117	0
131	Dishwasher Hose	5/13/12	32	0
133	Dual outlets	5/13/12	13	Ö
134	Affiliate Share of	5/13/12	5,827	0
135 136	Office Equipment	6/30/98	8,400 1,926	0
136 137	Performance Te Amegy Bank of	12/30/00 7/18/06	1,926 800	0
138	In Kind	6/30/09	4,180	0
139	Cash Counting Machine	5/10/12	509	0
140	Folding Chairs	5/10/12	310	0
141 142	Office Cubicles 18' Conference Table	2/01/12 11/05/12	5,000 6,979	0
143	Modular Space	7/17/13	5,500	ő

01452001 Habitat for Humanity Northwest

\*\*-\*\*\*3510 TX Future Depreciation Report 02/19/2024 10:29 AM **FYE: 6/30/24** 

Form 990, Page 1

FYE: 6/30/2023

Asset	Description	Date In Service	Cost	TX
144 145	Lowe's Office Equipment Computer Equipment	7/22/13 10/06/19	168 6,890	0 794
145	1991 Box Truck	6/27/10	4,175	0
148	Mateco Truck E	9/10/13	2,050	0
150	2017 Nissan Tit	2/26/18	34,332	ő
151	2019 Ford F250	6/21/19	36,500	2,102
153	Texas Pride Trailer	12/08/21	21,455	4,119
154	Chevrolet 3500 Engine Replacement	6/29/22	13,497	2,591
155	Warehouse Building Improvement	12/31/21	50,024	9,605
160	Texas Pride Trailers	8/03/22	1,312	341
162	Dempsey Electric	10/26/22	1,015	238
163	Credit Card Charge	7/03/22	2,510	537
			1,041,562	36,614
Listed 1	Property:			
159	Mobilease Vin805377	5/18/23	57,003	19,500
161	Ripleys Mufflers - Box Truck Repair	11/18/22	7,499	2,249
152	2020 Dodge Ra	8/01/20	27,996	4,032
157	2022 Ford F150 (Vin 6673)	1/14/22	65,182	12,515
158	2020 Chevrolet Silverado 35 (Vin 1596)	12/17/21	75,022	14,404
	,		232,702	52,700
				32,700
	Grand Totals		1,274,264	89,314

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# 01452001 Habitat for Humanity Northwest 76-0273510 FYE: 6/30/2023

## Federal Statements

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Form 9

Description	_	Total Expenses		Program Service	Management & General		Fund Raising
CONTRACT SERVICES CONTRACT SERVICES - RESTORE	₩.	50,435 569,490	₩	13,175 569,490	ু জ	₩	37,260
TOTAL	₩	619,925	₩.	582,665	\$	₩	37,260

# Form 990, Part IX, Line 24e - All Other Expenses

Description	"	Total Expenses		Program Service	Man	/lanagement & General		Fund Raising
DUES AND SUBSCRIPTIONS REPAIRS - RESTORE	₩	3,2	₹∕≻	3,63 6,59	₩	29,376	₩	20,270
  - 		25,000 25,001 20,120 19,661		20,373 22,118 20,120 19,661		3,543		
EOU		0000		88,03		91		
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LICENSES – RESTORE TOTAL	₩.	67 228,871	₩	163,119	₩	42,136	₩	23,616

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# 01452001 Habitat for Humanity Northwest 76-0273510 FYE: 6/30/2023

## Federal Statements

## Schedule A, Part II, Line 1(e)

Amount	\$ 365,740	197,807 28,820	\$ 592,367
Description	CONTRIBUTIONS	CASH CONTRIBUTION IN-KIND CONTRIBUTION	TOTAL

# Schedule A, Part II, Line 12 - Current year

Description		Amount
SALE OF HOMES Amort, of mortgage discoint	<b>ं</b>	913,895
DECONSTRUCTION REVENUE		2,977,513
INTEREST INCOME		46,604
RESTORE MERCHANDISE SALES TOOL BASH		2,338,072
TOTAL	w.	6,542,808