

Form **990**

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

OMB No. 1545-0047

**2002**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A For the 2002 calendar year, or tax year beginning** 07/01, 2002, and ending 06/30/2003

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

**C Name of organization**  
**HABITAT FOR HUMANITY INTERNATIONAL, INC.**  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**121 HABITAT STREET**  
 City or town, state or country, and ZIP + 4  
**AMERICUS, GA 31709-3498**

**D Employer identification number**  
**91-1914868**

**E Telephone number**  
**(800) HAB-ITAT**

**F Accounting method:**  Cash  Accrual  
 Other (specify) \_\_\_\_\_

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

H and I are not applicable to section 527 organizations.

**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** If "Yes," enter number of affiliates \_\_\_\_\_  
**H(c)** Are all affiliates included?  Yes  No  
 (If "No," attach a list. See instructions.)  
**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Enter 4-digit GEN **8545**

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

**G Web site:** WWW.HABITAT.ORG

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

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

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **160,821,231.**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 17 of the instructions.)

<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received:				
	<b>a</b> Direct public support	<b>1a</b>	127,019,180.		
	<b>b</b> Indirect public support	<b>1b</b>			
	<b>c</b> Government contributions (grants)	<b>1c</b>	16,520,849.		
	<b>d</b> Total (add lines 1a through 1c) (cash \$ 133,259,521. noncash \$ 10,280,508.)	<b>1d</b>		143,540,029.	
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>		3,297,159.	
	<b>3</b> Membership dues and assessments	<b>3</b>			
	<b>4</b> Interest on savings and temporary cash investments	<b>4</b>		106,738.	
	<b>5</b> Dividends and interest from securities	<b>5</b>		219,582.	
	<b>6a</b> Gross rents	<b>6a</b>	46,074.		
	<b>b</b> Less: rental expenses	<b>6b</b>			
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	<b>6c</b>		46,074.	
<b>Revenue</b>	<b>7</b> Other investment income (describe <b>STMT 1</b> )	<b>7</b>		149,159.	
	<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities	7,486,415.	(B) Other	78,472.
		<b>8a</b>			
	<b>b</b> Less: cost or other basis and sales expenses	<b>8b</b>	7,471,300.	29,716.	
	<b>c</b> Gain or (loss) (attach schedule) <b>STMT. 22</b>	<b>8c</b>	15,115.	48,756.	
	<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	<b>8d</b>		63,871.	
	<b>9</b> Special events and activities (attach schedule)	<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1a)	<b>9a</b>		
		<b>b</b> Less: direct expenses other than fundraising expenses	<b>9b</b>		
		<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	<b>9c</b>		
	<b>10a</b> Gross sales of inventory, less returns and allowances <b>STMT. 2</b>	<b>10a</b>		-395,190.	
<b>b</b> Less: cost of goods sold		<b>10b</b>			
<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		<b>10c</b>		-395,190.	
<b>11</b> Other revenue (from Part VII, line 103)	<b>11</b>		6,292,793.		
<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	<b>12</b>		153,320,215.		
<b>Expenses</b>	<b>13</b> Program services (from line 44, column (B))	<b>13</b>		115,207,911.	
	<b>14</b> Management and general (from line 44, column (C))	<b>14</b>		5,307,884.	
	<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>		40,940,748.	
	<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>			
	<b>17</b> Total expenses (add lines 16 and 44, column (A))	<b>17</b>		161,456,543.	
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	<b>18</b>		-8,136,328.	
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>		71,125,416.	
	<b>20</b> Other changes in net assets or fund balances (attach explanation) <b>STMT. 3</b>	<b>20</b>		1,132,796.	
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	<b>21</b>		64,121,884.	

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2002)

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 21 of the instructions.)

Table with 5 columns: (A) Total, (B) Program services, (C) Management and general, (D) Fundraising. Rows include: 22 Grants and allocations, 23 Specific assistance to individuals, 24 Benefits paid to or for members, 25 Compensation of officers, directors, etc., 26 Other salaries and wages, 27 Pension plan contributions, 28 Other employee benefits, 29 Payroll taxes, 30 Professional fundraising fees, 31 Accounting fees, 32 Legal fees, 33 Supplies, 34 Telephone, 35 Postage and shipping, 36 Occupancy, 37 Equipment rental and maintenance, 38 Printing and publications, 39 Travel, 40 Conferences, conventions, and meetings, 41 Interest, 42 Depreciation, depletion, etc., 43 Other expenses not covered above (itemize), 44 Total functional expenses.

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

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

Part III Statement of Program Service Accomplishments (See page 24 of the instructions.)

What is the organization's primary exempt purpose? STMT 6

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

Table with 2 columns: Description, Amount. Rows include: a AFFILIATED PROGRAMS - U.S. (STATEMENT 6A), b AFFILIATED PROJECTS - INTERNATIONAL (STATEMENT 6A), c PUBLIC AWARENESS AND EDUCATION (STATEMENT 6A), d, e Other program services (attach schedule), f Total of Program Service Expenses (should equal line 44, column (B), Program services).

**Part IV Balance Sheets** (See page 24 of the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)	
		Beginning of year		End of year	
Assets	45	Cash - non-interest-bearing	13,796,420.	45	10,885,545.
	46	Savings and temporary cash investments		46	
	47a	Accounts receivable	47a 651,912.		
	b	Less: allowance for doubtful accounts	47b 126,347.	47c	525,565.
	48a	Pledges receivable	48a 43,414,055.		
	b	Less: allowance for doubtful accounts	48b 5,755,410.	48c	37,658,645.
	49	Grants receivable		49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a	Other notes and loans receivable (attach schedule)	STMT 7 51a 24,392,837.		
	b	Less: allowance for doubtful accounts	51b	51c	24,392,837.
	52	Inventories for sale or use	2,246,960.	52	1,083,115.
	53	Prepaid expenses and deferred charges	1,085,041.	53	959,876.
	54	Investments - securities (attach schedule) STMT 8. <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	12,504,110.	54	19,856,232.
	55a	Investments - land, buildings, and equipment: basis	55a		
	b	Less: accumulated depreciation (attach schedule)	55b	55c	
56	Investments - other (attach schedule)		56		
57a	Land, buildings, and equipment: basis	57a 20,456,538.			
b	Less: accumulated depreciation (attach schedule) SEE STATEMENT 23	57b 11,086,128.	57c	9,370,410.	
58	Other assets (describe <input type="checkbox"/> STMT 9 )	8,377,445.	58	7,358,880.	
<b>59 Total assets</b> (add lines 45 through 58) (must equal line 74)		112,889,045.	<b>59</b>	112,091,105.	
Liabilities	60	Accounts payable and accrued expenses	10,736,035.	60	16,507,806.
	61	Grants payable		61	
	62	Deferred revenue		62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a	Tax-exempt bond liabilities (attach schedule)		64a	
	b	Mortgages and other notes payable (attach schedule) STMT 10	31,027,594.	64b	31,461,415.
	65	Other liabilities (describe <input type="checkbox"/> )		65	
<b>66 Total liabilities</b> (add lines 60 through 65)		41,763,629.	<b>66</b>	47,969,221.	
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>				
	67	Unrestricted	9,228,526.	67	4,622,602.
	68	Temporarily restricted	61,896,890.	68	59,499,282.
	69	Permanently restricted		69	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.</b>				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
	73	<b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	71,125,416.	<b>73</b>	64,121,884.
	74	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	112,889,045.	<b>74</b>	112,091,105.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.



Part VI Other Information (See page 27 of the instructions.)

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .	76	X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? . . . . . If "Yes," attach a conformed copy of the changes.	77	X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	78a	X
b If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	78b	N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement . . . . .	79	X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? . . . . .	80a	X
b If "Yes," enter the name of the organization <b>HABITAT FOR HUMANITY MIDDLE EAST</b> and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a Enter direct or indirect political expenditures. See line 81 instructions . . . . . 81a NONE		
b Did the organization file Form 1120-POL for this year? . . . . .	81b	X
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? . . . . .	82a	X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) . . . . . 82b 1,124,569.		
83 a Did the organization comply with the public inspection requirements for returns and exemption applications? . . . . .	83a	X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? . . . . .	83b	X
84 a Did the organization solicit any contributions or gifts that were not tax deductible? . . . . .	84a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	84b	N/A
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? . . . . .	85a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . . . .	85b	N/A
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c Dues, assessments, and similar amounts from members . . . . . 85c N/A		
d Section 162(e) lobbying and political expenditures . . . . . 85d N/A		
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . . . . . 85e N/A		
f Taxable amount of lobbying and political expenditures (line 85d less 85e) . . . . . 85f N/A		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? . . . . .	85g	N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? . . . . .	85h	N/A
86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 . . . . . 86a N/A		
b Gross receipts, included on line 12, for public use of club facilities . . . . . 86b N/A		
87 501(c)(12) orgs. Enter: a Gross income from members or shareholders . . . . . 87a N/A		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . . 87b N/A		
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX . . . . .	88	X
89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> NONE ; section 4912 <input type="checkbox"/> NONE ; section 4955 <input type="checkbox"/> NONE		
b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction . . . . .	89b	X
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . <input type="checkbox"/> NONE		
d Enter: Amount of tax on line 89c, above, reimbursed by the organization . . . . . <input type="checkbox"/> NONE		
90 a List the states with which a copy of this return is filed <input checked="" type="checkbox"/> GEORGIA		
b Number of employees employed in the pay period that includes March 12, 2002 (See instructions) . . . . . 90b 746		
91 The books are in care of <input checked="" type="checkbox"/> DENISE DEVENNY Telephone no. <input checked="" type="checkbox"/> 229-924-6935 Located at <input checked="" type="checkbox"/> 121 HABITAT STREET, AMERICUS, GA ZIP + 4 <input checked="" type="checkbox"/> 31709		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . 92 N/A		

**Part VII Analysis of Income-Producing Activities** (See page 31 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a GLOBAL WORK FEES					2,894,111.
b CHILD CARE SERVICE			03	403,048.	
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	106,738.	
96 Dividends and interest from securities			14	219,582.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			03	46,074.	
98 Net rental income or (loss) from personal property					
99 Other investment income			15	149,159.	
100 Gain or (loss) from sales of assets other than inventory			18	63,871.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory			01	-395,190.	
103 Other revenue: a					
b STMT 17					6,292,793.
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				593,282.	9,186,904.
105 Total (add line 104, columns (B), (D), and (E))					9,780,186.

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

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 32 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	STMT 18

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 32 of the instructions.)

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

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 33 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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

**Please Sign Here**

Signature of officer: DeWise Devenny Date: 2-16-04

Type or print name and title: DeWise Devenny, VP Finance & CFO

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**Paid Preparer's Use Only**

Preparer's signature: Susan Dull CPA Date: 2/5/2004 Check if self-employed:  Preparer's SSN or PTIN (See Gen. Inst. W): P00233523

Firm's name (or yours if self-employed): ERNST & YOUNG LLP EIN: 34-6565596

address, and ZIP + 4: 600 PEACHTREE STREET, SUITE 2800 ATLANTA, GA 30308 Phone no.: 404-874-8300

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

**Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

**Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)**

**Note: Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only**   
 All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print	Name of Exempt Organization	Employer identification number
	<b>HABITAT FOR HUMANITY INTERNATIONAL, INC.</b>	<b>91-1914868</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions.	
	<b>121 HABITAT STREET</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	<b>AMERICUS, GA 31709-3498</b>	

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

- |                                              |                                                                  |                                    |
|----------------------------------------------|------------------------------------------------------------------|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T(sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)     | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                             | <input type="checkbox"/> Form 8870 |

- If the organization does **not** have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the **whole** group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until **FEBRUARY 17**, 2004, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning **JULY 1**, 2002, and ending **JUNE 30**, 2003.

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. \$ \_\_\_\_\_  
 b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ \_\_\_\_\_  
 c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ \_\_\_\_\_

**Signature and Verification**

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

Signature ▶ Susan Dull Title ▶ **CPA** P00233523 Date ▶ **11/11/2003**

For Paperwork Reduction Act Notice, see instruction **7001 1940 0007 9697 0871** Form **8868** (12-2000)

**ERNST & YOUNG LLP**  
**P. O. BOX 10647**  
**GREENVILLE, SC 29803**

**FEI 34-6565596**

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information - (See separate instructions.)**

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

OMB No. 1545-0047

**2002**

Name of the organization

**HABITAT FOR HUMANITY INTERNATIONAL, INC.**

Employer identification number

**91-1914868**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
<u>JUDITH M. BLANCHETTE</u> KLONTAN, KLONGTOEY; BANGKOK, THAILAND	DIRECTOR 40	53,891.	3,245.	51,042.
<u>DONALD S. HASZCZYN</u> HASHEMRTE, KINGDOM OF JORDAN	VP 40	68,978.	NONE	31,880.
<u>RICHARD K. HATHAWAY</u> BANGKOK, THAILAND	DIRECTOR 40	55,604.	3,645.	66,506.
<u>TORRE H. NELSON</u> COSTA RICA	VP 40	67,493.	4,067.	35,316.
<u>STEVEN M. WEIR</u> KLONGTOEY; BANGKOK, THAILAND	VP 40	69,752.	4,314.	42,313.
Total number of other employees paid over \$50,000 . . . . . ▶	71			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
<u>HRA CONSTRUCTION, LLC</u> 810 HANCOCK DR., AMERICUS, GA 31709	CONSTRUCTION	313,945.
<u>ERNST &amp; YOUNG, LLP</u> P.O. BOX 406725, ATLANTA, GA 30384	AUDIT	243,083.
<u>AMIDON GRAPHICS</u> 1966 BENSON AVE., ST. PAUL, MN 55116	PRINTING	152,423.
Total number of others receiving over \$50,000 for professional services . . . . . ▶	NONE	

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

Schedule A (Form 990 or 990-EZ) 2002

JSA  
2E1210 1.000

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

Table with 3 columns: Question, Yes, No. Rows include: 1. During the year, has the organization attempted to influence national, state, or local legislation... 2. During the year, has the organization, either directly or indirectly, engaged in any of the following acts... 3. Does the organization make grants for scholarships, fellowships, student loans, etc.? 4. Do you have a section 403(b) annuity plan for your employees?

Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 [ ] A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
6 [ ] A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
7 [ ] A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
8 [ ] A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
9 [ ] A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
10 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
11 a [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
11 b [ ] A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
12 [ ] An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)
13 [ ] An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

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

Table with 2 columns: (a) Name(s) of supported organization(s), (b) Line number from above

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

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

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

Table with columns for Calendar year (or fiscal year beginning in) and rows for various income categories: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends, amounts received from payments on securities loans; 19 Net income from unrelated business activities; 20 Tax revenues levied; 21 Value of services or facilities furnished; 22 Other income; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11; 27 Organizations described on line 12; 28 Unusual Grants.

**Part V Private School Questionnaire** (See page 7 of the instructions.)  
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

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

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)  
 (To be completed **ONLY** by an eligible organization that filed Form 5768) **NOT APPLICABLE**

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

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

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

**4-Year Averaging Period Under Section 501(h)**

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

Calendar year (or fiscal year beginning in) ▶	<b>Lobbying Expenditures During 4-Year Averaging Period</b>				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
<b>45</b> Lobbying nontaxable amount . . . . .					
<b>46</b> Lobbying ceiling amount (150% of line 45(e)) . . . . .					
<b>47</b> Total lobbying expenditures					
Grassroots nontaxable amount . . . . .					
<b>48</b> Grassroots ceiling amount (150% of line 48(e)) . . . . .					
<b>49</b> Grassroots lobbying expenditures . . . . .					
<b>50</b> Total grassroots lobbying expenditures . . . . .					

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

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
<b>a</b> Volunteers . . . . .		X	
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h.) . . . . .	X		STMT 20
<b>c</b> Media advertisements . . . . .		X	
<b>d</b> Mailings to members, legislators, or the public . . . . .		X	
<b>e</b> Publications, or published or broadcast statements . . . . .		X	
<b>f</b> Grants to other organizations for lobbying purposes . . . . .		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body . STMT 21	X		17,000.
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .		X	
<b>i</b> Total lobbying expenditures (Add lines c through h.) . . . . .			17,000.

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



FORM 990, PART I - OTHER INVESTMENT INCOME

=====

DESCRIPTION

AMOUNT

-----

-----

ROYALTY INCOME

149,159.

-----

TOTAL

149,159.

=====

FORM 990, PART I - GROSS SALES LESS RETURNS AND ALLOWANCES  
=====

DESCRIPTION -----	AMOUNT -----
MERCHANDISE SALES	774,160.
MERCHANDISE EXPENSES	-1,169,350.
	-----
TOTAL	-395,190.
	=====

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES  
=====

DESCRIPTION -----	AMOUNT -----
UNREALIZED GAINS	8,227.
IN-KIND SERVICES REPORTED IN FINANCIAL STATEMENT	1,124,569.
	-----
TOTAL	1,132,796.
	=====

FORM 990, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

\*\*\*\*\*

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

GRANTS PAID

\*\*\*\*\*

U.S. AFFILIATES

RELATED  
EXEMPT

HOME BUILDING

41,646,421.

INTERNATIONAL AFFILIATES

RELATED  
EXEMPT

HOME BUILDING

27,237,198.

PUBLIC AWARENESS AND EDUCATION

RELATED  
EXEMPT

COMMUNICATE NEED FOR MODEST HOUSING

612,964.

TOTAL CONTRIBUTIONS PAID

69,496,583.

\*\*\*\*\*

FORM 990, PART II - OTHER EXPENSES

=====

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
PROFESSIONAL SERVICES	5,717,851.	2,343,591.	146,623.	3,227,637.
OFFICE EQUIPMENT NOT CAPITALIZ	1,387,570.	1,051,158.	132,394.	204,018.
SERVICE AGREEMENT	2,223,087.	961,483.	625,975.	635,629.
TRAINING RECRUITMENT & BOOKS	533,924.	386,540.	68,622.	78,762.
INSURANCE	1,569,893.	1,018,767.	18,430.	532,696.
MISCELLANEOUS	1,028,804.	735,921.	22,476.	270,407.
TOTALS	12461129.	6,497,460.	1,014,520.	4,949,149.

## **HABITAT FOR HUMANITY INTERNATIONAL, INC.**

**FYE: JUNE 30, 2003**

### **FORM 990, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE**

Habitat for Humanity International Inc., (Habitat), is a non-denominational Christian organization whose purpose is to sponsor affiliates in Habitat development globally, to construct modest but adequate housing, and to associate with other organizations functioning with purposes consistent with those of Habitat. Habitat's goal is to eliminate poverty housing and homelessness worldwide and to stir the hearts and minds of others to take action on this issue. Habitat has built more than **150,000** houses around the world, providing some **750,000** people with safe, decent, and affordable shelter. Habitat invites people from all walks of life to work together in partnership to help build houses with families in need.

Through volunteer labor and tax-deductible donations of money and materials, Habitat builds and rehabilitates simple, decent houses with the help of the homeowner (partner) families. Habitat houses are sold to partner families at no profit, and mortgages are financed with affordable, no-interest loans. The homeowners' monthly mortgage payments go into a revolving "Fund for Humanity" that is used to build more houses.

Habitat is not a give-away program. In addition to a down payment and the monthly mortgage payments, homeowners invest hundreds of hours of their own labor ("sweat equity") into building their houses and the houses of others.

There are now more than **1600** active affiliates located in all 50 U.S. states, the District of Columbia, the territory of Puerto Rico, and Bermuda. There also are more than **600** international affiliates coordinating some **13,000** building projects in **88** nations around the world.

Habitat is a grass-roots movement. Concerned citizens come together as volunteers to form a Habitat affiliate in their community. Fund-raising, house construction, family selection, and other key decisions are carried out by the local affiliates. Habitat headquarters, located in Americus, GA, provides information, training, prayer support, and other services to Habitat affiliates worldwide.

Due to the extreme poverty found in many developing nations, Habitat affiliates in developing countries often received funds for house building from Habitat headquarters. However, international affiliates are required to raise as much of their funding locally as possible.

**HABITAT FOR HUMANITY INTERNATIONAL, INC.**

**FYE: JUNE 30, 2003**

**FORM 990, PART III  
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS**

**Affiliated Programs:**

International and U.S. affiliates - grassroots organizations of local people coming together to address local needs - are independent, not-for-profit groups that are approved by regional, area, or national offices of Habitat for Humanity International (Habitat) and operate within a covenant agreement with Habitat. All affiliates are encouraged to be self-supporting in the fund-raising efforts; however, Habitat also solicits contributions, both cash and in-kind on their behalf. Some affiliates in developing countries, where severely limited resources constrain local fund-raising, receive the majority of their funding from Habitat. All affiliates are expected to tithe 10% of their unrestricted cash contributions to Habitat work outside their own country. Tithes from U.S. affiliates total **\$9,612,315 in FY 2003**, and are included in contributions in the accompanying statement of activities and changes in net assets.

**Public Awareness and Education:**

Habitat for Humanity International's public awareness and education activities bring to the public's attention humanity's need for modest but adequate housing.

FORM 990, PART IV - OTHER NOTES AND LOANS RECEIVABLE  
=====

BORROWER: AFFLIATE NOTES

BEGINNING BALANCE DUE .....	22,990,381.
ENDING BALANCE DUE .....	24,392,837.

-----

TOTAL BEGINNING OTHER NOTES AND LOANS RECEIVABLE	22,990,381.
--------------------------------------------------	-------------

=====

TOTAL ENDING OTHER NOTES AND LOANS RECEIVABLES	24,392,837.
------------------------------------------------	-------------

=====

FORM 990, PART IV - INVESTMENTS - SECURITIES  
=====

DESCRIPTION -----	ENDING BOOK VALUE -----
CERTIFICATES OF DEPOSIT	3,211,772.
STOCKS	3,173,969.
BONDS - US TREAS. & CORPORATE	13,470,491.
	-----
TOTALS	19,856,232.
	=====

FORM 990, PART IV - OTHER ASSETS  
=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
DUE FROM AFFILIATES	7,358,880.
TOTALS	----- 7,358,880. =====

**HABITAT FOR HUMANITY INTERNATIONAL, INC.**  
**EIN: 91-1914868**  
**YEAR ENDED 6/30/2003**

**FORM 990, PART IV, LINE 64b: MORTGAGES AND OTHER NOTES PAYABLE**

Notes payable at June 30 consist of the following:

	<u>2003</u>	<u>2002</u>
Noninterest-bearing, unsecured notes payable to various individuals and organizations, payable principally on demand	<b>\$ 435,305</b>	\$ 463,562
Unsecured note bearing interest at 6% per annum	<b>50,000</b>	100,000
Noninterest-bearing notes payable to affiliates upon completion of their Accelerated Asset Recovery payable	<b>1,592,727</b>	1,380,520
Noninterest-bearing, unsecured note payable to Freddie Mac in equal annual installments of through 2006	<b>1,495,000</b>	1,685,000
Noninterest-bearing, unsecured note payable to Fannie Mae due October 2, 2003	--	2,000,000
	<b><u>\$3,573,032</u></b>	<b><u>\$5,629,082</u></b>

Future principal payments over the next five years are as follows:

2004	<b>\$1,060,829</b>
2005	<b>746,927</b>
2006	<b>753,951</b>
2007	<b>322,234</b>
2008	<b>347,480</b>
Thereafter	<b>341,611</b>
	<b><u>\$3,573,032</u></b>

The amount of future principal payments for 2004 includes \$ 435,305 of noninterest-bearing, unsecured notes payable to various individuals and organizations which are payable principally on demand. The amounts actually demanded and repaid for such notes payable during the years ended June 30, 2003 and 2002 were \$22,900 and \$56,694, respectively.

HABITAT FOR HUMANITY INTERNATIONAL, INC.  
EIN: 91-1914868  
YEAR ENDED 6/30/2003

FORM 990, PART IV, LINE 64b: MORTGAGES AND OTHER NOTES PAYABLE  
(CONTINUED)

### 8. Accelerated Asset Recovery Program

The investor notes payable for the next five years ending June 30 are as follows:

	<b>Investor Notes Payable</b>
2004	\$ 5,272,185
2005	5,062,160
2006	4,997,631
2007	4,501,355
2008	3,733,557
Thereafter	4,321,495
	<u>\$27,888,383</u>

Interest expense during the years ended June 30, 2003 and 2002 was \$ 975,865 and \$855,884, respectively.

The Investor Notes Payable require Habitat to monitor the compliance by each affiliate participating in this program with the terms and conditions of the agreement. Management believes they are in compliance with the covenants of the Investor Notes Payable. Habitat has guaranteed the payments to the investors for 48 months from the date of issuance up to 4% of the outstanding principal balance of the Investor Notes Payable. In addition to this guaranty, Habitat requires that each of its affiliates post a cash reserve in the amount of one quarter's debt service to safeguard against nonpayment by the affiliate. These pre-payments are recorded as investments in the Statements of Financial Position.

FORM 990, PART IV-A - OTHER REVENUE ON BOOKS BUT NOT ON RETURN  
=====

DESCRIPTION -----	AMOUNT -----
IN-KIND SERVICES	1,124,569.
UNREALIZED GAINS	8,227.
	-----
TOTAL	1,132,796.
	=====

FORM 990, PART IV-A - OTHER REVENUE ON RETURN BUT NOT ON BOOKS

=====

DESCRIPTION	AMOUNT
-----	-----
PLEDGE WRITE-OFF	-3,972,414.
	-----
TOTAL	-3,972,414.
	=====

FORM 990, PART IV-B - OTHER EXPENSES ON BOOKS BUT NOT ON RETURN

DESCRIPTION	AMOUNT
HABITAT FOR HUMANITY	
MIDDLE EAST NET REVENUE	15,553.
	-----
TOTAL	15,553.
	=====

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
MILLARD DEAN FULLER 147 PARKER'S MILL CREEK RD. AMERICUS, GA 31709	PRESIDENT/CEO 40	79,500.	4,770.	NONE
DAVID A. WILLIAMS 204 BRIARWOOD CIRCLE AMERICUS, GA 31709	EXEC VP/COO 40	106,043.	6,388.	NONE
DENNIS H. BENDER 316 W. COLLEGE ST. AMERICUS, GA 31709	SR. VP 40	90,315.	5,436.	NONE
ROBIN L. SHELL 606 HARROLD AVE. AMERICUS, GA 31709	SR. VP 40	90,031.	5,420.	NONE
MICHAEL E. CARSCADDON 305 SHIRLEY RD. AMERICUS, GA 31709	SR. VP 40	96,917.	5,847.	NONE
REGINA M. HOPKINS 202 WINDSOR AVE., APT. D AMERICUS, GA 31709	VP 40	89,205.	5,382.	NONE
SUSAN J. DE TITTA 210 BELL ST. AMERICUS, GA 31709	SPEC. ASSIST. TO VP 40	41,787.	1,259.	NONE
DENISE E. DEVENNY 301 SHIRLEY RD. AMERICUS, GA 31709	VP/CFO 40	85,776.	5,188.	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ANTHONY J. DISPIGNO SEE STATEMENT 123 ROBIN HILL RD. AMERICUS, GA 31709	SR. VP 40	91,803.	NONE	NONE
BOARD OF DIRECTORS SEE STATEMENT	1+ HR/WK	NONE	NONE	NONE
GRAND TOTALS		771,377.	39,690.	NONE

## HABITAT FOR HUMANITY INTERNATIONAL BOARD OF DIRECTORS

**Nabil Abadir**  
PO Box 162-11811 Panorama  
Cairo  
EGYPT

**Ian W. Hay**  
35 Glenveagh Drive  
Mt. Roskill  
Auckland 4 1004  
NEW ZEALAND

### Chair

**Paul Leonard**  
PO Box 2204  
Davidson NC 28036

**Barbara Alexander**  
87 Monarch Bay Drive  
Monarch Beach CA 92629

**David Hicks**  
1725 Memorial Park Drive  
Jacksonville FL 32204

**William McGivern**  
17 Belvedere Manor  
Belfast BT9 6FT  
N. IRELAND

**Etweda Cooper**  
11 Broad Street  
Monrovia  
LIBERIA

**Janet Huckabee**  
1800 Center Street  
Little Rock AR 72204

**Don Mosley**  
Jubilee Partners PO Box 68  
Comer GA 30629

**Jim Copeland**  
4287 Embassy Park Dr., NW  
Washington D.C. 20016

**Chantal Hudicourt-Ewald**  
27 Avenue Marie Jeanne  
Cite de l'Exposition  
Port-au-Prince  
HAITI

**Symon Msefula**  
Malawi Stock Exchange Limited  
Old Reserve Bank Building, Victoria Ave.  
Private Bag 270  
Blantyre, MALAWI

**Paul Ekelschot**  
H Heijermansweg 10 2042 XS  
Zandvoort  
NETHERLANDS

**James R. Irvine**  
3140 SE Hawthorne Blvd.  
Portland OR 97214

**Larry Prible**  
5977 Heaton Pass  
Carmel India 46033

### Ex-officio

**Millard Fuller**  
147 Parkersmill Creek Rd.  
Americus GA 31709

**G. Carol Johnson**  
100 Witmer  
Horsham PA 19044

### Co-Vice Chair

**Rey Ramsey**  
1012 14th Street NW Suite 905  
Washington DC 20005

**Carlos Garcia Velez y Cortazar**  
Margaritas 433 col ex Hacienda  
Guadalupe Chi 01050  
MEXICO

**Jack Kemp**  
1701 Pennsylvania Avenue NW  
Suite 900  
Washington D.C. 20006

**Nic Retsinas**  
344 Taber Avenue  
Providence RI 02906

### Co-Vice Chair

**Lyle Hanna**  
6398 Old Richmond Road  
Lexington KY 40515

**Linda Lader**  
41 East Battery  
Charleston SC 29401

**Juel Smith**  
PO Box 273943  
Tampa FL 33618

5/16/2003

The individuals listed are directors unless title is indicated, they receive no compensation for their services to HFHI, and spend approximately 1 hr/wk in service to the board.

**HABITAT FOR HUMANITY INTERNATIONAL BOARD OF DIRECTORS**

**Mauricio Solis**  
PO Box 220-1260  
Escazu San  
COSTA RICA

**John Stack**  
13 Belvedere Estate  
Belvedere Street  
Durbanville 7550  
SOUTH AFRICA

**Ron Terwilliger**  
2859 Paces Ferry Road  
Suite 1100  
Atlanta GA 30339

**Treasurer**  
**Charles Thiemann**  
6010 Gaines Rd.  
Cincinnati OH 45247

**Secretary**  
**Sybout Vandermeer**  
Oosterduinweg 47  
2015 Kh Haarlem  
NETHERLANDS

**Bob Willumstad**  
399 Park Avenue, 2nd Floor  
New York NY 10043

**Fernando Zobel de Ayala**  
c/o Ayala Corp. 34th Floor Tower One  
Ayala Avenue Maka  
PHILIPPINES

5/16/2003

The individuals listed are directors unless title is indicated, they receive no compensation for their services to HFHI, and spend approximately 1 hr/wk in service to the board.

91-1914868

HABITAT FOR HUMANITY INTERNATIONAL, INC.

FORM 990, PART VII - OTHER REVENUE

=====

DESCRIPTION	BUSINESS CODE	AMOUNT	EXCLUSION CODE	AMOUNT	RELATED OR EXEMPT FUNCTION INCOME
AFFILIATE GRANT MATCH PARTICIPATION					1,638,628.
AFFILIATE SHOP PARTICIPATION					1,961,850.
MAILING LIST					684,870.
CONF/COLLEG CHALL					788,750.
MISC. REVENUES					1,218,695.
TOTALS					6,292,793.

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

=====

LINE NO.	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
----	-----
93A	WORK PROJECT REGISTRATION FEES - A FEE IS PAID TO PARTICI- PATE IN CERTAIN WORK PROJECTS, SUCH AS HOUSE BUILDING. PARTICIPANTS GAIN GREATER UNDERSTANDING OF THE NEED FOR SIMPLE DECENT HOUSING FOR LOW INCOME FAMILIES BY SUCH ACTIVITIES.
93B	CHILD CARE SERVICE - A CHILD CARE CENTER IS OPERATED BY HABITAT FOR THE BENEFIT OF EMPLOYEES, VOLUNTEERS, AND THE COMMUNITY AT LARGE. HABITAT PROVIDES MOST OF THE COST TO OPERATE THE CENTER. MINIMAL FEES ARE CHARGED BASED ON FAMILY SIZE AND INCOME.
97B	RENTAL INCOME FROM HOUSES RELATED TO HABITAT FOR HUMANITY'S EXEMPT PURPOSE.
102	PROFIT FROM THE SALE OF INVENTORY - HABITAT SELLS BOOKS, CASSETTES, VIDEO TAPES, CLOTHING, AND OTHER PROMOTIONAL ITEMS TO FURTHER THE AWARENESS OF THE HFHI AND THE NEED FOR SIMPLE DECENT HOUSING FOR LOW INCOME FAMILIES.
103	REIMBURSEMENT OF EXPENSES AND MISCELLANEOUS INCOME RELATED TO HFHI'S EXEMPT PURPOSE.

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

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REIMBURSEMENT FOR TRAVEL AND OTHER RELATED EXPENSES FOR THE FOLLOWING PERSONS:

MILLARD FULLER	\$4,557
DAVID WILLIAMS	\$8,506
DENNIS BENDER	\$4,638
ROBIN SHELL	\$6,213
MIKE CARSCADDON	\$5,245
REGINA HOPKINS	\$7,163
SUSAN DETITTA	\$14,661

SEE ALSO FORM 990 PART V

DENISE DEVENNY	\$4,984.
ANTHONY DISPIGNO	\$10,948

SCHEDULE A, PART VI-B - PAID STAFF OR MANAGEMENT

=====

TIME SPENT BY STAFF IN WASHINGTON ADVOCATING FOR SELF HELP HOME  
OWNERSHIP AND CAPACITY BUILDING GRANT FUNDS

SCHEDULE A, PART VI-B - DIRECT CONTACT WITH LEGISLATORS

=====

TIME SPENT BY STAFF IN WASHINGTON ADVOCATING FOR SELF HELP HOME  
OWNERSHIP AND CAPACITY BUILDING GRANT FUNDS

**HABITAT FOR HUMANITY INTERNATIONAL, INC.**  
EIN: 91-1914868  
FOR THE YEAR ENDED JUNE 30, 2003

**FORM 990, PART I, LINE 8: Gain/(loss) on sale of assets other than inventory**

**COLUMN (A) - SECURITIES**

<u>Description</u>	<u>Sale Price</u>	<u>Cost</u>	<u>Gain/(Loss)</u>
Publicly Held Securities	7,486,415	7,471,300	15,115

**COLUMN (B) - OTHER**

<u>Description</u>	<u>Sale Price</u>	<u>Adjusted Basis</u>	<u>Gain/(Loss)</u>
Building, Computers	78,472	29,716	48,756
			<hr/>
			<u>63,871</u>

**HABITAT FOR HUMANITY INTERNATIONAL, INC.**  
**EIN: 91-1914868**  
**YEAR ENDED 6/30/2003**

**Form 990, Part II, Line 42: Depreciation Expense and Part IV, Line 57: Land, Buildings and Equipment**

	<u>6/30/2003</u>
Land	896,094
Buildings	10,369,780
Computer hardware and software	6,409,385
Furniture and equipment	2,526,324
Vehicles	254,955
	<u>20,456,538</u>
Less: Accumulated Depreciation	11,086,128
	<u><u>9,370,410</u></u>

Current year depreciation of \$2,844,006 was calculated using the straight-line method of depreciation over the estimated useful lives of the assets.