

**Exempt Organization Declaration and Signature for
Electronic Filing**For calendar year 2010, or tax year beginning 07/01, 2010, and ending 06/30, 20 11

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

▶ See instructions on back.

2010Department of the Treasury
Internal Revenue Service

Name of exempt organization

Employer identification number

HABITAT FOR HUMANITY INTERNATIONAL, INC.91-1914868**Part I Type of Return and Return Information (Whole Dollars Only)**

Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . .	1b <u>278833524.</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____

Part II Declaration of Officer

6 ☐ I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

☐ If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2010 electronic return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign
Here

Signature of officer

Date

CFO/SR VP
Title**Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)**

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

**ERO's
Use
Only**

ERO's signature ▶ <u>Emily A. Stancil</u>	Date <u>12/16/2011</u>	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code	<u>ERNST & YOUNG U.S. LLP</u>			EIN <u>34-6565596</u>
	<u>75 BEATTIE PLACE, SUITE 800</u>			
	<u>GREENVILLE SC 29601</u>			Phone no. <u>864-242-5740</u>

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

**Paid
Preparer's
Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶	Firm's EIN ▶			
Firm's address ▶	Phone no.			

For Privacy Act and Paperwork Reduction Act Notice, see back of form.

Form **8453-EO** (2010)

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

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

OMB No. 1545-0047

2010**Open to Public
Inspection****A For the 2010 calendar year, or tax year beginning** 07/01, 2010, and ending 06/30, 2011**B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

121 HABITAT STREET

Room/suite

City or town, state or country, and ZIP + 4

AMERICUS, GA 31709

F Name and address of principal officer: JONATHAN RECKFORD

121 HABITAT STREET AMERICUS, GA 31709

D Employer identification number

91-1914868

E Telephone number

(800) 422-4828

G Gross receipts \$ 282,130,133.**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶ 8545**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ WWW.HABITAT.ORG**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶ **L** Year of formation: 1976 **M** State of legal domicile: GA**Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: SEEKING TO PUT GOD'S LOVE INTO ACTION, HABITAT FOR HUMANITY BRINGS PEOPLE TOGETHER TO BUILD HOMES, COMMUNITIES AND HOPE.				
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.				
	3	Number of voting members of the governing body (Part VI, line 1a)	3	22.		
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	22.		
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	1,128.		
	6	Total number of volunteers (estimate if necessary)	6	1,000,000.		
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.		
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.			
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	261,827,133.	Current Year	249,623,484.
	9	Program service revenue (Part VIII, line 2g)		11,832,758.		12,514,211.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,985,134.		4,694,651.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6,375,397.		12,001,178.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		284,020,422.		278,833,524.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		147,166,728.		175,606,970.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.		0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		62,245,746.		70,424,167.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		20,101,538.		20,461,063.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 37,238,329.				
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		63,894,002.		45,316,582.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		293,408,014.		311,808,782.
19	Revenue less expenses. Subtract line 18 from line 12		-9,387,592.		-32,975,258.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	272,679,113.	End of Year	250,731,875.
	21	Total liabilities (Part X, line 26)		78,032,964.		88,667,743.
	22	Net assets or fund balances. Subtract line 21 from line 20		194,646,149.		162,064,132.

Part II 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 Here	Signature of officer	Date			
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name EMILY A. STANAIL	Preparer's signature Emily A. Stanail	Date 12/16/11	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's name ▶ ERNST & YOUNG U.S. LLP	EIN ▶ 34-6565596			
	Firm's address ▶ 75 BEATTIE PLACE, SUITE 800 GREENVILLE, SC 29601	Phone no. ▶ 864-242-5740			

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☒ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2010)JSA
0E1065 3.000

KL5096 2217

V 10-8.2

91-1914868

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐ Yes ☒ No**1** Briefly describe the organization's mission:SEEKING TO PUT GOD'S LOVE INTO ACTION, HABITAT FOR HUMANITY BRINGS
PEOPLE TOGETHER TO BUILD HOMES, COMMUNITIES AND HOPE.**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ 151,978,512. including grants of \$ 118,366,294.) (Revenue \$ 12,604,289.)

ATTACHMENT 1

4b (Code:) (Expenses \$ 83,017,488. including grants of \$ 44,899,201.) (Revenue \$ 11,127,707.)

ATTACHMENT 2

4c (Code:) (Expenses \$ 26,158,958. including grants of \$ 12,341,475.) (Revenue \$ 368,750.)

ATTACHMENT 3

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► 261,154,958.

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)? <i>If "Yes," complete Schedule A</i>	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 candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4 X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>	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
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12 a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14 a Did the organization maintain an office, employees, or agents outside of the United States?	14a X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	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? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20 a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	<input checked="" type="checkbox"/>	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		<input checked="" type="checkbox"/>
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	<input checked="" type="checkbox"/>	
24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i>		<input checked="" type="checkbox"/>
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule L, Part I.</i>		<input checked="" type="checkbox"/>
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>		<input checked="" type="checkbox"/>
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i>		<input checked="" type="checkbox"/>
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		<input checked="" type="checkbox"/>
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		<input checked="" type="checkbox"/>
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		<input checked="" type="checkbox"/>
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	<input checked="" type="checkbox"/>	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		<input checked="" type="checkbox"/>
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		<input checked="" type="checkbox"/>
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		<input checked="" type="checkbox"/>
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		<input checked="" type="checkbox"/>
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i>	<input checked="" type="checkbox"/>	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	<input checked="" type="checkbox"/>	
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule R, Part VI.</i>		<input checked="" type="checkbox"/>
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	<input checked="" type="checkbox"/>	

Form **990** (2010)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V. ☒

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 216		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 1,128		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	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," provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b If "Yes," enter the name of the foreign country: <u>SEE SCHEDULE O, PART V, LINE 4B</u> See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X	
d If "Yes," indicate the number of Forms 8282 filed during the year	7d 49		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources 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 1041?	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.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
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		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Check if Schedule O contains a response to any question in this Part VI ☒ **X**

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 22		
b Enter the number of voting members included in line 1a, above, who are independent 1b 22		
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		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or 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 filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		X
6 Does the organization have members or stockholders? 6		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b	X	
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 in Schedule O 9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates? 10a	X	
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b	X	
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c	X	
13 Does the organization have a written whistleblower policy? 13		X
14 Does the organization have a written document retention and destruction policy? 14		X
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?		
a The organization's CEO, Executive Director, or top management official 15a	X	
b Other officers or key employees of the organization 15b	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **GA,**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **EDWARD K QUIBELL CFO/SR VP 121 HABITAT STREET AMERICUS, GA 31709**
229-924-6935

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KEN KLEIN CHAIRMAN	13.50	X		X				0.	0.	0.
(2) TED DOSCH VICE CHAIRMAN	5.00	X		X				0.	0.	0.
(3) ANUGERAH PEKERTI VICE CHAIRMAN	8.00	X		X				0.	0.	0.
(4) GLADYS GARY VAUGHN SECRETARY	8.00	X		X				0.	0.	0.
(5) KEVIN KESSINGER TREASURER	4.00	X		X				0.	0.	0.
(6) NABIL ABADIR BOARD OF DIRECTORS - MEMBER	2.50	X						0.	0.	0.
(7) ARCHBISHOP VICKEN AYKAZIAN BOARD OF DIRECTORS - MEMBER	4.50	X						0.	0.	0.
(8) KATHLEEN BADER BOARD OF DIRECTORS - MEMBER	4.00	X						0.	0.	0.
(9) EDWARD BASTIAN BOARD OF DIRECTORS - MEMBER	4.50	X						0.	0.	0.
(10) HENRY CISNEROS BOARD OF DIRECTORS - MEMBER	2.00	X						0.	0.	0.
(11) ELIZABETH CROSSMAN BOARD OF DIRECTORS - MEMBER	4.80	X						0.	0.	0.
(12) RENEE GLOVER BOARD OF DIRECTORS - MEMBER	4.00	X						0.	0.	0.
(13) MARY KAZUNGA BOARD OF DIRECTORS - MEMBER	4.50	X						0.	0.	0.
(14) TONY LANIGAN BOARD OF DIRECTORS - MEMBER	4.00	X						0.	0.	0.
(15) ED SCHREYER BOARD OF DIRECTORS - MEMBER	4.50	X						0.	0.	0.
(16) ALEX SILVA BOARD OF DIRECTORS - MEMBER	4.50	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees(continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17) RON TERWILLIGER BOARD OF DR -MEMBER EX-OFFICIO	14.00	X						0.	0.	0.
(18) EMIL CONSTANTINESCU BOARD OF DIRECTORS - MEMBER	4.50	X						0.	0.	0.
(19) MEL MARTINEZ BOARD OF DIRECTORS - MEMBER	1.00	X						0.	0.	0.
(20) EDUARDO TABUSH BOARD OF DIRECTORS - MEMBER	4.50	X						0.	0.	0.
(21) ANNA TIBAIJUKA BOARD OF DIRECTORS - MEMBER	4.50	X						0.	0.	0.
(22) FERNANDO ZOBEL DE AYALA BOARD OF DIRECTORS - MEMBER	4.23	X						0.	0.	0.
(23) JUEL SHANNON SMITH BOD - MEMBER RETIRED NOV 2010	2.00	X						0.	0.	0.
(24) JOHN STACK RETIRED NOV 2010 BOARD OF DIRECTORS - MEMBER	2.00	X						0.	0.	0.
(25) JONATHAN RECKFORD CEO & EX-OFFICIO BOARD MEMBER	60.00			X				252,406.	0.	14,016.
(26) AUDLEY L BELL VP - INTERNAL AUDIT	55.00			X				134,240.	0.	7,884.
(27) ELIZABETH K BLAKE SVP-GOV. AFFRS, ADVOCACY&LEGAL	55.00			X				174,535.	0.	5,209.
(28) MICHAEL E CARSCADDON EVP - INTERNATIONAL	55.00			X				162,249.	0.	4,941.
1b Sub-total								723,430.	0.	32,050.
c Total from continuation sheets to Part VII, Section A	ATTACHMENT 4							2,737,659.	0.	109,327.
d Total (add lines 1b and 1c)								3,461,089.	0.	141,377.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **67**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 5		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **33**

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions) . .	1e	63,318,338.			
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	186,305,146.			
	g	Noncash contributions included in lines 1a-1f: \$		32,992,632.			
	h	Total. Add lines 1a-1f		249,623,484.			
Program Service Revenue				Business Code			
	2a	GLOBAL VILLAGE WORK FEES		900099	9,281,708.	9,281,708.	
	b	SALES OF HOUSES		900099	1,832,720.	1,832,720.	
	c	SHOP PROGRAM INCOME		900099	1,386,505.	1,386,505.	
	d	APPLICATION FEES		900099	13,278.	13,278.	
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f			12,514,211.		
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			4,765,743.		4,765,743.
	4	Income from investment of tax-exempt bond proceeds . . .			0.		
	5	Royalties			326,521.		326,521.
			(i) Real	(ii) Personal			
	6a	Gross Rents.	88,122.				
	b	Less: rental expenses					
	c	Rental income or (loss)	88,122.				
	d	Net rental income or (loss)			88,122.		88,122.
			(i) Securities	(ii) Other			
	7a	Gross amount from sales of assets other than inventory	2,163,234.	735,307.			
	b	Less: cost or other basis and sales expenses	2,164,498.	805,135.			
	c	Gain or (loss)	-1,264.	-69,828.			
	d	Net gain or (loss)			-71,092.		-71,092.
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from fundraising events			0.		
	9a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from gaming activities			0.		
	10a	Gross sales of inventory, less returns and allowances	a	322,357.			
b	Less: cost of goods sold	b	326,976.				
c	Net income or (loss) from sales of inventory			-4,619.	-4,619.		
Miscellaneous Revenue			Business Code				
11a	SELF-HELP HOME OWNERSHIP PROGRAM		900099	4,709,678.	4,709,678.		
b	AMERICORPS/VISTA		900099	4,212,588.	4,212,588.		
c	INCOME FROM SETTLEMENT AGREEMENT		900099	694,314.	694,314.		
d	All other revenue		900099	1,974,574.	1,974,574.		
e	Total. Add lines 11a-11d			11,591,154.			
12	Total revenue. See instructions			278,833,524.	24,100,746.	5,109,294.	

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	130,707,770.	130,707,770.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	44,899,200.	44,899,200.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	2,960,904.	2,247,995.	334,846.	378,063.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	56,967,216.	43,250,992.	6,442,366.	7,273,858.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	806,691.	612,461.	91,228.	103,002.
9 Other employee benefits	6,209,495.	4,714,410.	702,226.	792,859.
10 Payroll taxes	3,479,861.	2,495,694.	393,388.	590,779.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	259,963.	161,254.	26,491.	72,218.
c Accounting	565,877.	351,011.	57,665.	157,201.
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17	20,461,063.			20,461,063.
f Investment management fees	108,626.	67,380.	11,069.	30,177.
g Other	6,755,234.	4,190,251.	688,379.	1,876,604.
12 Advertising and promotion	939,133.	778,160.	107,510.	53,463.
13 Office expenses	6,894,809.	4,415,820.	1,097,216.	1,381,773.
14 Information technology	3,180,548.	1,972,884.	324,107.	883,557.
15 Royalties	0.			
16 Occupancy	2,338,611.	1,937,759.	267,720.	133,132.
17 Travel	8,533,315.	7,257,633.	420,382.	855,300.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	3,149,273.	2,609,469.	360,523.	179,281.
20 Interest	1,972,582.	1,423,638.	100,130.	448,814.
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization . . .	3,029,203.	2,006,457.	462,430.	560,316.
23 Insurance	1,517,823.	1,165,348.	184,944.	167,531.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a SERVICE AGREEMENTS \$ UTILITI	3,795,788.	2,003,660.	1,082,346.	709,782.
b ALL OTHER EXPENSES	1,168,461.	968,180.	133,763.	66,518.
c ANNUITY PAYMENTS	629,516.	521,613.	72,066.	35,837.
d REPAIRS AND MAINTENANCE	477,820.	395,919.	54,700.	27,201.
e -----				
f All other expenses -----				
25 Total functional expenses. Add lines 1 through 24f	311,808,782.	261,154,958.	13,415,495.	37,238,329.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	9,985,925.	1	17,156,375.
	2 Savings and temporary cash investments	53,023,500.	2	51,951,149.
	3 Pledges and grants receivable, net	74,343,239.	3	64,957,286.
	4 Accounts receivable, net	956,616.	4	1,436,284.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net	42,642,796.	7	48,551,344.
	8 Inventories for sale or use	1,476,436.	8	3,968,013.
	9 Prepaid expenses and deferred charges	2,446,806.	9	2,241,093.
	10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 38,258,848.		
	b Less: accumulated depreciation	10b 25,604,310.		
	11 Investments - publicly traded securities	10,260,602.	10c	12,654,538.
	12 Investments - other securities. See Part IV, line 11	74,696,736.	11	45,495,253.
	13 Investments - program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	2,846,457.	14	
16 Total assets. Add lines 1 through 15 (must equal line 34)	272,679,113.	15	2,320,540.	
		16	250,731,875.	
Liabilities	17 Accounts payable and accrued expenses	20,487,129.	17	24,486,052.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	43,155,725.	23	54,100,276.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	14,390,110.	25	10,081,415.
	26 Total liabilities. Add lines 17 through 25	78,032,964.	26	88,667,743.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	20,853,972.	27	23,378,902.
	28 Temporarily restricted net assets	172,974,278.	28	137,462,246.
	29 Permanently restricted net assets	817,899.	29	1,222,984.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	194,646,149.	33	162,064,132.
	34 Total liabilities and net assets/fund balances	272,679,113.	34	250,731,875.

Form **990** (2010)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	278,833,524.
2	Total expenses (must equal Part IX, column (A), line 25)	2	311,808,782.
3	Revenue less expenses. Subtract line 2 from line 1	3	-32,975,258.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	194,646,149.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	393,241.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	162,064,132.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	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 in Schedule O and describe any steps taken to undergo such audits.	X	

Form **990** (2010)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2010

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	332,271,739.	218,854,503.	230,946,740.	261,827,133.	249,623,484.	1,293,523,599.
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	332,271,739.	218,854,503.	230,946,740.	261,827,133.	249,623,484.	1,293,523,599.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						61,115,894.
6 Public support. Subtract line 5 from line 4.						1,232,407,705.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	332,271,739.	218,854,503.	230,946,740.	261,827,133.	249,623,484.	1,293,523,599.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	11,079,901.	11,236,506.	6,953,329.	9,146,785.	5,180,385.	43,596,906.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . ATTCH. 1	1,144,274.	833,230.	1,443,453.	1,393,876.	1,974,574.	6,789,407.
11 Total support. Add lines 7 through 10						1,343,909,912.
12 Gross receipts from related activities, etc. (see instructions)					12	54,988,819.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	91.70 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	91.89 %
16a 33 1/3 % support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3 % support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 9 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19 a 33 1/3 % support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3 % support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2006	2007	2008	2009	2010	TOTAL
MAILING LISTS	422,587.	589,559.	471,589.	607,666.	631,507.	2,722,908.
FOREIGN CURRENCY GAINS	194,217.	0.	0.	0.	0.	194,217.
MISCELLANEOUS REVENUES		0.	165,231.	0.	535,781.	701,012.
FLEXCAP FEES	0.	0.	81,000.	181,000.	200,000.	462,000.
GLOBAL VILLAGE & DISCOVER CEN	23,835.	15,422.	12,780.	17,096.	11,869.	81,002.
HABITAT RESTORE CONSULTING	0.	0.	0.	0.	3,537.	3,537.
AFFILIATE FEES	259,282.	108,750.	288,750.	188,750.	235,000.	1,080,532.
COLLEGIATE CHALLENGE	244,353.	119,499.	424,103.	399,364.	356,880.	1,544,199.
TOTALS	<u>1,144,274.</u>	<u>833,230.</u>	<u>1,443,453.</u>	<u>1,393,876.</u>	<u>1,974,574.</u>	<u>6,789,407.</u>

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2010

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☒ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ► \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 7,600,080.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 5,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 787,459.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 5,895,129.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ 11,528,350.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ 5,435,899.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	BUILDING MATERIALS-FLOORING TILE	\$ 5,000,000.	07/01/2010
4	APPLIANCES	\$ 5,895,129.	VARIOUS
6	BUILDING MATERIALS-DEADBOLT LOCKS AND SECURITY DEVICES	\$ 5,435,899.	VARIOUS
		\$	
		\$	
		\$	

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.**
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No. 1545-0047
2010
Open to Public Inspection

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization HABITAT FOR HUMANITY INTERNATIONAL, INC.	Employer identification number 91-1914868
---	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours ▶ _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2010

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**A** Check ☐ if the filing organization belongs to an affiliated group.**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	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.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
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.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?														

☐ Yes ☐ No**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 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?	X		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c	Media advertisements?		X	
d	Mailings to members, legislators, or the public?	X		50,000.
e	Publications, or published or broadcast statements?	X		10,000.
f	Grants to other organizations for lobbying purposes?		X	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		368,000.
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		62,000.
i	Other activities? If "Yes," describe in Part IV		X	
j	Total. Add lines 1c through 1i			490,000.
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		X	

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

Part IV **Supplemental Information** *(continued)*

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 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 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, 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" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (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) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

Schedule D (Form 990) 2010

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** ☐ Public exhibition **d** ☐ Loan or exchange programs
b ☐ Scholarly research **e** ☐ Other _____
c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ **Yes** ☐ **No**

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XI V and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XI V.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	817,899.	500,000.			
b Contributions	423,219.	314,114.	500,000.		
c Net investment earnings, gains, and losses	3,597.	4,576.			
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	1,467.	791.			
g End of year balance	1,243,248.	817,899.	500,000.		

2 Provide the estimated percentage of the year end balance held as:

- a** Board designated or quasi-endowment ▶ 0.0000 %
b Permanent endowment ▶ 100.0000 %
c Term endowment ▶ 0.0000 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	X
(ii) related organizations	3a(ii)	X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		913,418.		913,418.
b Buildings		11,313,472.	6,393,907.	4,919,565.
c Leasehold improvements		471,746.	199,434.	272,312.
d Equipment		25,560,212.	19,010,969.	6,549,243.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				12,654,538.

Schedule D (Form 990) 2010

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
(I) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount	
(1) Federal income taxes		
(2) GRANTS DUE TO AFFILIATES	2,603,903.	
(3) ANNUITY LIABILITY	7,477,512.	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►		10,081,415.

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	278,833,524.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	311,808,782.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-32,975,258.
4	Net unrealized gains (losses) on investments	4	286,347.
5	Donated services and use of facilities	5	293,596.
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	-186,703.
9	Total adjustments (net). Add lines 4 through 8	9	393,240.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-32,582,018.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	285,934,486.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	7,617,155.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	-326,333.
e	Add lines 2a through 2d	2e	7,290,822.
3	Subtract line 2e from line 1	3	278,643,664.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	189,860.
c	Add lines 4a and 4b	4c	189,860.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	278,833,524.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	318,516,504.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	7,617,155.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	7,617,155.
3	Subtract line 2e from line 1	3	310,899,349.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	909,433.
c	Add lines 4a and 4b	4c	909,433.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	311,808,782.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

Part XIV Supplemental Information (continued)

PURPOSE OF ENDOWMENT FUNDS

SCHEDULE D, PART V

THREE ENDOWMENT FUNDS: 1) TO SUPPORT DISASTER RESPONSE AND LONG-TERM RECOVERY EFFORTS FOR FAMILIES IN THE GULF COAST REGION 2) TO SUPPORT ADVOCACY TOWARD OVERCOMING GLOBAL POVERTY BY PROVIDING DECENT HOUSING FOR ALL PERSONS 3) TO SUPPORT BUILDING AND SERVING FAMILIES IN THE UNITED STATES

SCHEDULE D, PART V, LINE 1G

THE CURRENT YEAR ENDING BALANCE OF ENDOWMENT FUNDS IS GREATER THAN THE ENDING PERMANENTLY RESTRICTED NET ASSETS ON THE BALANCE SHEET BY THE AMOUNT AVAILABLE TO BE SPENT FOR RESTRICTED PURPOSES THAT WAS NOT SPENT AS OF JUNE 30, 2011.

RECONCILIATION OF CHANGES IN NET ASSETS

PART XI LINE 8

REVALUATION OF ANNUITY MORTGAGES (186,703)

RECONCILIATION OF REVENUE PER AUDITED FINANCIAL STATEMENTS WITH REVENUE PER RETURN

PART XII LINE 2D

UNREALIZED ANNUITY GAIN	1,088,785
UNREALIZED TRUST GAIN	80,116
UNREALIZED LOSS ON INVESTMENTS	(882,554)
ANNUITY PAYMENTS	(520,890)
ANNUITY EXPENSE	(108,626)

Part XIV Supplemental Information (continued)

GAIN ON CURRENCY EXCHANGE	44,141
LOSS ON CURRENCY EXCHANGE	(134,198)
REVALUATION ON GIFT ANNUITY	(147,416)
REVALUATION OF MORTGAGES	(39,287)
IN-KIND SERVICE INCOME	293,596

TOTAL:	(326,333)
	=====

PART XII LINE 4B

LOSSES ON CONTRIBUTIONS RECEIVABLE	189,860
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RECONCILIATION OF EXPENSES PER AUDITED FINANCIAL STATEMENTS WITH EXPENSES

PER RETURN

PART XIII LINE 4B

ANNUITY PAYMENTS	520,890
ANNUITY EXPENSE	108,626
GAIN ON CURRENCY EXCHANGE	(44,141)
LOSS ON CURRENCY EXCHANGE	134,198
LOSSES ON CONTRIBUTIONS RECEIVABLE	189,860

TOTAL:	909,433
	=====

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Employer identification number

91-1914868

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) CENTRAL AMERICA/CARIBBEAN	4.	150.	PROGRAM SERVICES	HOMEBUILDING	14,363,079.
(2) EAST ASIA AND THE PACIFIC	7.	58.	PROGRAM SERVICES	HOMEBUILDING	10,538,383.
(3) EUROPE	1.	34.	PROGRAM SERVICES	HOMEBUILDING	1,382,569.
(4) MIDDLE EAST AND NORTH AFRICA	0.	1.	PROGRAM SERVICES	HOMEBUILDING	88,461.
(5) SOUTH AMERICA	0.	1.	PROGRAM SERVICES	HOMEBUILDING	50,405.
(6) SOUTH ASIA	2.	3.	PROGRAM SERVICES	HOMEBUILDING	1,475,059.
(7) SUB-SAHARAN AFRICA	4.	33.	PROGRAM SERVICES	HOMEBUILDING	7,482,870.
(8) CENTRAL AMERICA/CARIBBEAN	0.	0.	GRANTMAKING		21,274,603.
(9) EAST ASIA AND THE PACIFIC	0.	0.	GRANTMAKING		5,545,501.
(10) EUROPE	0.	0.	GRANTMAKING		3,092,528.
(11) MIDDLE EAST AND NORTH AFRICA	0.	0.	GRANTMAKING		142,073.
(12) NORTH AMERICA	0.	0.	GRANTMAKING		2,356,924.
(13) RUSSIA/INDEPENDENT STATES	0.	0.	GRANTMAKING		1,059,265.
(14) SOUTH AMERICA	0.	0.	GRANTMAKING		4,323,959.
(15) SOUTH ASIA	0.	0.	GRANTMAKING		1,075,669.
(16) SUB-SAHARAN AFRICA	0.	0.	GRANTMAKING		6,028,678.
(17)					
3a Sub-total	18.	280.			80,280,026.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	18.	280.			80,280,026.

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

Schedule F (Form 990) 2010

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐

Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			CENT. AMERICA/CARIBBEAN	HOME BUILDIN	14,784.	WIRE TRSNFER		N/A	N/A
(2)			CENT. AMERICA/CARIBBEAN	HOME BUILDIN	547,922.	WIRE TRSNFER		N/A	N/A
(3)			CENT. AMERICA/CARIBBEAN	HOME BUILDIN	3,455,646.	WIRE TRSNFER		N/A	N/A
(4)			CENT. AMERICA/CARIBBEAN	HOME BUILDIN	1,264,790.	WIRE TRSNFER		N/A	N/A
(5)			CENT. AMERICA/CARIBBEAN	HOME BUILDIN	943,514.	WIRE TRSNFER		N/A	N/A
(6)			CENT. AMERICA/CARIBBEAN	HOME BUILDIN	635,553.	WIRE TRSNFER		N/A	N/A
(7)			CENT. AMERICA/CARIBBEAN	HOME BUILDIN	45,049.	WIRE TRSNFER		N/A	N/A
(8)			CENT. AMERICA/CARIBBEAN	HOME BUILDIN	1,241,980.	WIRE TRSNFER		N/A	N/A
(9)			CENT. AMERICA/CARIBBEAN	HOME BUILDIN	13,112,357.	WIRE TRSNFER		N/A	N/A
(10)			CENT. AMERICA/CARIBBEAN	HOME BUILDIN	13,004.	WIRE TRSNFER		N/A	N/A
(11)			EAST ASIA/PACIFIC	HOME BUILDIN	141,430.	WIRE TRSNFER		N/A	N/A
(12)			EAST ASIA/PACIFIC	HOME BUILDIN	1,155,875.	WIRE TRSNFER		N/A	N/A
(13)			EAST ASIA/PACIFIC	HOME BUILDIN	390,951.	WIRE TRSNFER		N/A	N/A
(14)			EAST ASIA/PACIFIC	HOME BUILDIN	182,400.	WIRE TRSNFER		N/A	N/A
(15)			EAST ASIA/PACIFIC	HOME BUILDIN	101,988.	WIRE TRSNFER		N/A	N/A
(16)			EAST ASIA/PACIFIC	HOME BUILDIN	78,693.	WIRE TRSNFER		N/A	N/A

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ☐

3 Enter total number of other organizations or entities ☐

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐
Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	HOME BUILDIN	168,118.	WIRE TRSNFER		N/A	N/A
(2)			EAST ASIA/PACIFIC	HOME BUILDIN	338,900.	WIRE TRSNFER		N/A	N/A
(3)			EAST ASIA/PACIFIC	HOME BUILDIN	500,404.	WIRE TRSNFER		N/A	N/A
(4)			EAST ASIA/PACIFIC	HOME BUILDIN	318,239.	WIRE TRSNFER		N/A	N/A
(5)			EAST ASIA/PACIFIC	HOME BUILDIN	502,745.	WIRE TRSNFER		N/A	N/A
(6)			EAST ASIA/PACIFIC	HOME BUILDIN	153,160.	WIRE TRSNFER		N/A	N/A
(7)			EAST ASIA/PACIFIC	HOME BUILDIN	820,979.	WIRE TRSNFER		N/A	N/A
(8)			EAST ASIA/PACIFIC	HOME BUILDIN	455,247.	WIRE TRSNFER		N/A	N/A
(9)			EAST ASIA/PACIFIC	HOME BUILDIN	6,660.	WIRE TRSNFER		N/A	N/A
(10)			EAST ASIA/PACIFIC	HOME BUILDIN	229,047.	WIRE TRSNFER		N/A	N/A
(11)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	137,541.	WIRE TRSNFER		N/A	N/A
(12)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	501,455.	WIRE TRSNFER		N/A	N/A
(13)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	234,010.	WIRE TRSNFER		N/A	N/A
(14)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	179,270.	WIRE TRSNFER		N/A	N/A
(15)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	295,658.	WIRE TRSNFER		N/A	N/A
(16)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	150,000.	WIRE TRSNFER		N/A	N/A

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐

Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	304,743.	WIRE TRSNFER		N/A	N/A
(2)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	120,765.	WIRE TRSNFER		N/A	N/A
(3)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	550,449.	WIRE TRSNFER		N/A	N/A
(4)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	14,610.	WIRE TRSNFER		N/A	N/A
(5)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	16,210.	WIRE TRSNFER		N/A	N/A
(6)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	98,768.	WIRE TRSNFER		N/A	N/A
(7)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	221,267.	WIRE TRSNFER		N/A	N/A
(8)			EUROPE/ICELAND/GREENLAND	HOME BUILDIN	263,158.	WIRE TRSNFER		N/A	N/A
(9)			MIDDLE EAST/NORTH AFRICA	HOME BUILDIN	142,073.	WIRE TRSNFER		N/A	N/A
(10)			NORTH AMERICA	HOME BUILDIN	557,066.	WIRE TRSNFER		N/A	N/A
(11)			NORTH AMERICA	HOME BUILDIN	1,797,717.	WIRE TRSNFER		N/A	N/A
(12)			RUSSIA	HOME BUILDIN	144,650.	WIRE TRSNFER		N/A	N/A
(13)			RUSSIA	HOME BUILDIN	549,829.	WIRE TRSNFER		N/A	N/A
(14)			RUSSIA	HOME BUILDIN	363,026.	WIRE TRSNFER		N/A	N/A
(15)			SOUTH AMERICA	HOME BUILDIN	297,981.	WIRE TRSNFER		N/A	N/A
(16)			SOUTH AMERICA	HOME BUILDIN	317,364.	WIRE TRSNFER		N/A	N/A

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ☐

3 Enter total number of other organizations or entities ☐

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐

Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	HOME BUILDIN	860,947.	WIRE TRSNFER		N/A	N/A
(2)			SOUTH AMERICA	HOME BUILDIN	1,491,291.	WIRE TRSNFER		N/A	N/A
(3)			SOUTH AMERICA	HOME BUILDIN	491,650.	WIRE TRSNFER		N/A	N/A
(4)			SOUTH AMERICA	HOME BUILDIN	148,579.	WIRE TRSNFER		N/A	N/A
(5)			SOUTH AMERICA	HOME BUILDIN	194,606.	WIRE TRSNFER		N/A	N/A
(6)			SOUTH AMERICA	HOME BUILDIN	521,538.	WIRE TRSNFER		N/A	N/A
(7)			SOUTH ASIA	HOME BUILDIN	87,777.	WIRE TRSNFER		N/A	N/A
(8)			SOUTH ASIA	HOME BUILDIN	137,371.	WIRE TRSNFER		N/A	N/A
(9)			SOUTH ASIA	HOME BUILDIN	704,457.	WIRE TRSNFER		N/A	N/A
(10)			SOUTH ASIA	HOME BUILDIN	146,062.	WIRE TRSNFER		N/A	N/A
(11)			SUB-SAHARAN AFRICA	HOME BUILDIN	440,623.	WIRE TRSNFER		N/A	N/A
(12)			SUB-SAHARAN AFRICA	HOME BUILDIN	252,905.	WIRE TRSNFER		N/A	N/A
(13)			SUB-SAHARAN AFRICA	HOME BUILDIN	348,601.	WIRE TRSNFER		N/A	N/A
(14)			SUB-SAHARAN AFRICA	HOME BUILDIN	342,268.	WIRE TRSNFER		N/A	N/A
(15)			SUB-SAHARAN AFRICA	HOME BUILDIN	721,985.	WIRE TRSNFER		N/A	N/A
(16)			SUB-SAHARAN AFRICA	HOME BUILDIN	486,991.	WIRE TRSNFER		N/A	N/A

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ☐

3 Enter total number of other organizations or entities ☐

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐
 Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	HOME BUILDIN	264,048.	WIRE TRSNFER		N/A	N/A
(2)			SUB-SAHARAN AFRICA	HOME BUILDIN	427,978.	WIRE TRSNFER		N/A	N/A
(3)			SUB-SAHARAN AFRICA	HOME BUILDIN	894,593.	WIRE TRSNFER		N/A	N/A
(4)			SUB-SAHARAN AFRICA	HOME BUILDIN	560,296.	WIRE TRSNFER		N/A	N/A
(5)			SUB-SAHARAN AFRICA	HOME BUILDIN	7,586.	WIRE TRSNFER		N/A	N/A
(6)			SUB-SAHARAN AFRICA	HOME BUILDIN	246,385.	WIRE TRSNFER		N/A	N/A
(7)			SUB-SAHARAN AFRICA	HOME BUILDIN	182,566.	WIRE TRSNFER		N/A	N/A
(8)			SUB-SAHARAN AFRICA	HOME BUILDIN	104,000.	WIRE TRSNFER		N/A	N/A
(9)			SUB-SAHARAN AFRICA	HOME BUILDIN	369,375.	WIRE TRSNFER		N/A	N/A
(10)			SUB-SAHARAN AFRICA	HOME BUILDIN	378,473.	WIRE TRSNFER		N/A	N/A
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 74 .
 3 Enter total number of other organizations or entities 0 .

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☒ Yes ☐ No
- 2** Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* ☐ Yes ☒ No
- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4** Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5** Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6** Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* ☐ Yes ☒ No

Schedule F (Form 990) 2010

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

ORGANIZATION'S PROCEDURES FOR MONITORING USE OF GRANT FUNDS OUTSIDE THE US

SCHEDULE F, PART I, LINE 2

HABITAT FOR HUMANITY INTERNATIONAL INC. (HFHI) MONITORS THE USE OF FUNDS SENT OUTSIDE THE UNITED STATES BY ENFORCING THE TERMS AGREED TO IN THE HFHI FOREIGN AFFILIATE AGREEMENT BETWEEN HFHI AND EACH OF THE HFH FOREIGN AFFILIATES. HFH FOREIGN AFFILIATES MAY APPLY FOR AN AWARD OF PROGRAM FUNDS AND LOAN FUNDS ON AN ANNUAL BASIS BY SUBMITTING A PROPOSAL FOR REVIEW AND CONSIDERATION BY HFHI. IN ADDITION TO A PROPOSAL APPLICATION, A WORK PLAN MUST BE PROVIDED FOR EACH PROGRAM AWARD OR LOAN, WHICH OUTLINES THE PLANNED USE OF FUNDS AND MEETS ALL THE CRITERIA OF THE HABITAT COVENANT, MISSION AND STANDARDS OF EXCELLENCE. HFHI REQUIRES ANNUAL FINANCIAL STATEMENTS FROM EACH NATIONAL ORGANIZATION WHICH INCLUDE A STATEMENT OF POSITION, AND A STATEMENT OF ACTIVITIES, PREPARED IN ACCORDANCE WITH THE FINANCIAL REPORTING STANDARDS AND POLICIES ADOPTED BY HFHI. HFHI REQUIRES AN ANNUAL REPORT FROM EACH HFH NATIONAL ORGANIZATION THAT SETS FORTH IN A NARRATIVE FORM A COMPLETE REPORT OF THE HFH NATIONAL ORGANIZATION AND THEIR AFFILIATED ORGANIZATIONS DURING THE PAST YEAR AND A DESCRIPTION OF HOW THE PROGRAM AWARD AND LOANS WERE USED IN FURTHERANCE OF THOSE ACTIVITIES. HFHI WILL CONDUCT EVALUATIONS OF THE NATIONAL ORGANIZATIONS AND THEIR OPERATIONS, FROM TIME TO TIME. HFHI HAS THE RIGHT TO TAKE ACTIONS UP TO AND INCLUDING TERMINATION OF THE AFFILIATION AGREEMENT FOR FAILURE OF A NATIONAL ORGANIZATION TO COMPLY WITH THE FOREIGN AFFILIATE AGREEMENT AND USE OF FUNDS IN ACCORDANCE WITH APPROVED PROPOSAL AND WORK PLANS. IF A PROGRAM DEFICIENCY OCCURS, HFHI MAY EXERCISE REMEDIES, INCLUDING, BUT NOT LIMITED TO PLACING THE NATIONAL

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

ORGANIZATION ON PROBATION; OR TERMINATING THE RELATIONSHIP WITH THE

NATIONAL ORGANIZATION.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 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. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open To Public
Inspection

Employer identification number

91-1914868

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations e ☒ Solicitation of non-government grants
b ☒ Internet and email solicitations f ☒ Solicitation of government grants
c ☒ Phone solicitations g ☐ 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?

☒ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 THOMPSON HABIB & DENISON INC PLUS SUPPLIERS-SEE PART IV	MAIL		X	43,861,405.	19,362,240.	24,499,165.
2 STRATEGIC FUNDRAISING	TELEMRKTING		X	290,413.	304,059.	-13,646.
3 DONOR SVCS GROUP LLC (VI)	TELEMRKTING		X	472,961.	1,105,944.	-632,983.
4 MDS COMMUNICATION CORP	TELEMRKTING		X	1,040,779.	492,390.	548,389.
5 INFOCISION MANAGEMENT CORP	TELEMRKTING		X	1,745,433.	947,854.	797,579.
6 DONORDIGITALCOM LLC	ONLINE		X	7,237,018.	486,894.	6,750,124.
7						
8						
9						
10						
Total				54,648,009.	22,699,381.	31,948,628.

3 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.

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN,
IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH,
OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY,

Part II Fundraising Events. Complete if the organization answered "Yes" to 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 (add col. (a) through col. (c))
	(event type)	(event type)	(total number)	
Revenue				
1 Gross receipts				
2 Less: Charitable contributions				
3 Gross income (line 1 minus line 2)				
Direct Expenses				
4 Cash prizes				
5 Noncash prizes				
6 Rent/facility costs				
7 Food and beverages				
8 Entertainment				
9 Other direct expenses				
10 Direct expense summary. Add lines 4 through 9 in column (d)				()
11 Net income summary. Combine line 3, column (d), and line 10				

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				
1 Gross revenue				
Direct Expenses				
2 Cash prizes				
3 Noncash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				()
8 Net gaming income summary. Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

- 11** Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12** 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? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity operated in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ 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 ▶ \$ _____.
- c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ 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 ▶ \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE G - SUPPLEMENTAL INFORMATION

PART I, LINE 2B

THOMPSON HABIB & DENISON INC FUNDRAISING FEES ONLY	\$980,237.17
PRODUCTION SOLUTIONS DIRECT EXPENSES ONLY	\$15,147,912.04
PARADYSZ MATERA CO INC DIRECT EXPENSES ONLY	\$904,892.20
THE DATA CENTER INC DIRECT EXPENSES ONLY	\$184,902.09
TARGET ANALYTICS DIRECT EXPENSES ONLY	\$89,636.90

- 11** Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12** 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? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity operated in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ 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 ▶ \$ _____.
- c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ 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 ▶ \$ _____

Part IV Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

BRICKMILL MARKET SERVICES INC DIRECT EXPENSES ONLY	\$1,970,788.86
BLACKBAUD	\$52,298.78
ENVELOPE PRODUCT GROUP	\$18,240.83
OVM SOLUTIONS	\$13,331.41
DONORDIGITAL FUNDRAISING FEES ONLY	\$388,433.91
E-MILES - DIRECT EXPENSES ONLY	\$72,341.75
MOBILE COMMONS DIRECT EXPENSES ONLY	\$20,275.00

- 11** Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12** 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? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity operated in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

- 15 a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ 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 ► \$ _____.
- c** If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ 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 ► \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

FRESH ADDRESS DIRECT EXPENSES ONLY \$5,843.20

TELEMARKETING: SCHEDULE G, PART I - THE NUMBERS IN COLUMN (V) REPRESENT

FEEs PAID TO PROFESSIONAL FUNDRAISERS IN HFHI'S STRATEGIC TELEMARKETING

PROGRAM, WHICH CONSISTS OF THREE PARTS:

(1) REINSTATEMENT OF LAPSED DONORS,

(2) APPEAL/RENEWAL CALLING, AND

- 11** Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12** 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? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity operated in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ 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 ▶ \$ _____.
- c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ 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 ▶ \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

(3) SPECIAL PROGRAMS WHERE DONORS CONTRIBUTE MONTHLY AMOUNTS OVER TIME.

THE GROSS AMOUNTS RAISED SHOWN IN (IV) ONLY REFLECT INITIAL CONTRIBUTIONS
ATTRIBUTABLE DIRECTLY TO THE TELEMARKETING EFFORT, AND DO NOT REFLECT
FUTURE CONTRIBUTIONS BY THESE DONORS WHO CONTINUE TO CONTRIBUTE AFTER THE
INITIAL CALL. THESE CONTRIBUTIONS ARE RECORDED SUBSEQUENTLY AS PART OF

- 11** Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12** 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? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity operated in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ 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 ▶ \$ _____.
- c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ 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 ▶ \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

HFHI'S OVERALL FUNDRAISING COST RATIO.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	SUFFOLK, HFH OF 643 MIDDLE CNTRY RD MIDDLE ISLAND, NY 11953	11-2840553	501(C)(3)	150,817.		N/A	N/A	HOME BUILDING
(2)	NEW YORK CITY, HFH 111 JOHN ST 23RD FL NEW YORK, NY 10038-3101	11-2857055	501(C)(3)	6,877,566.		N/A	N/A	HOME BUILDING
(3)	NASSAU COUNTY NY, HFH IN 1421 NORTHERN BLVD MANHASSET, NY 11030-3003	11-3063114	501(C)(3)	38,509.		N/A	N/A	HOME BUILDING
(4)	FLOWER CITY HFH 755 CULVER RD ROCHESTER, NY 14609	13-3281487	501(C)(3)	32,753.		N/A	N/A	HOME BUILDING
(5)	WESTCHESTER, HFH OF 524 MAIN ST NEW ROCHELLE, NY 10801	13-3522732	501(C)(3)	190,090.		N/A	N/A	HOME BUILDING
(6)	CAPITAL DISTRICT HFH 454 N PEARL ST ALBANY, NY 12204-1511	14-1708404	501(C)(3)	20,916.		N/A	N/A	HOME BUILDING
(7)	SCHENECTADY COUNTY, HFH OF 115 N BROADWAY SCHENECTADY, NY 12305	14-1765200	501(C)(3)	78,482.		N/A	N/A	HOME BUILDING
(8)	COLUMBIA COUNTY HFH 829 ROUTE 66 HUDSON, NY 12534	14-1766587	501(C)(3)	17,464.		N/A	N/A	HOME BUILDING
(9)	DUTCHESS COUNTY, HFH OF PO BOX 70 FISHKILL, NY 12524-0070	14-1767037	501(C)(3)	7,015.		N/A	N/A	HOME BUILDING
(10)	CHAMPLAIN VALLEY HFH PO BOX 55 PERU, NY 12972-0055	14-1807701	501(C)(3)	7,461.		N/A	N/A	HOME BUILDING
(11)	NEWBURGH, HFH OF GREATER PO BOX 1694 NEWBURGH, NY 12551-1694	14-1815690	501(C)(3)	46,588.		N/A	N/A	HOME BUILDING
(12)	PATUXENT HFH PO BOX 1093 SOLOMONS, MD 20688-1093	14-1869951	501(C)(3)	20,881.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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

Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	MADISON COUNTY HFH PO BOX 528 CAZENOVIA, NY 13035	16-1325068	501(C)(3)	11,956.		N/A	N/A	HOME BUILDING
(2)	CHAUTAUQUA AREA HFH PO BOX 226 CHAUTAUQUA, NY 14722-0226	16-1336418	501(C)(3)	9,045.		N/A	N/A	HOME BUILDING
(3)	OTSEGO COUNTY, HFH OF 50 DIETZ ST STE M ONEONTA, NY 13820-1865	16-1344319	501(C)(3)	35,240.		N/A	N/A	HOME BUILDING
(4)	ONEIDA COUNTY HFH PO BOX 312 UTICA, NY 13503-0312	16-1375112	501(C)(3)	9,083.		N/A	N/A	HOME BUILDING
(5)	ONTARIO COUNTY, NY, HFH OF 3040 COUNTY RD 10 CANANDAIGUA, NY 14424	16-1386125	501(C)(3)	6,767.		N/A	N/A	HOME BUILDING
(6)	SOUTHEASTERN STEUBEN COUNTY HFH, INC. 3412 STATE ROUTE 414 CORNING, NY 14830	16-1425009	501(C)(3)	7,581.		N/A	N/A	HOME BUILDING
(7)	NIAGARA AREA HFH PO BOX 932 NIAGARA FALLS, NY 14302-0932	16-1436149	501(C)(3)	31,539.		N/A	N/A	HOME BUILDING
(8)	LOCKPORT, HFH PO BOX 884 LOCKPORT, NY 14095-0884	16-1498122	501(C)(3)	8,448.		N/A	N/A	HOME BUILDING
(9)	RICE COUNTY, HFH PO BOX 26 LYONS, KS 67554	20-1019995	501(C)(3)	10,013.		N/A	N/A	HOME BUILDING
(10)	OHIO, INC.; HFH OF 88 E BROAD ST STE 1800 COLUMBUS, OH 43215	20-1182119	501(C)(3)	134,823.		N/A	N/A	HOME BUILDING
(11)	TEXAS, HFH 55 N I-H 35 240 AUSTIN, TX 78702	20-2556383	501(C)(3)	122,116.		N/A	N/A	HOME BUILDING
(12)	LEEWARD O'AHU, HFH PO BOX 498 WAIANAE, HI 96792-0498	20-2778271	501(C)(3)	10,063.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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

Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	WHITE COUNTY, AR; HFH OF PO BOX 1004 SEARCY, AR 72145-1004	20-3278688	501(C)(3)	46,024.		N/A	N/A	HOME BUILDING
(2)	JOHNSON CO., INC.; HFH PO BOX 302 FRANKLIN, IN 46131	20-3407734	501(C)(3)	9,182.		N/A	N/A	HOME BUILDING
(3)	LOUISIANA STATE SUPPORT ORG 460 N 11TH ST BATON ROUGE, LA 70802	20-3420425	501(C)(3)	23,750.		N/A	N/A	HOME BUILDING
(4)	FULTON COUNTY OH, HFH OF PO BOX 352 WAUSEON, OH 43567	20-5807293	501(C)(3)	9,282.		N/A	N/A	HOME BUILDING
(5)	MISSISSIPPI GULF COAST, INC., HFH OF THE 2214 34TH ST GULFPORT, MS 39501	20-8133916	501(C)(3)	505,435.		N/A	N/A	HOME BUILDING
(6)	SALEM COUNTY, NEW JERSEY, INC., HFH OF 416S PENN. AUBURN RD CARNEYS PT, NJ 08069	22-2446425	501(C)(3)	6,150.		N/A	N/A	HOME BUILDING
(7)	SYRACUSE HFH 308 OTISCO ST SYRACUSE, NY 13204-3028	22-2516352	501(C)(3)	29,536.		N/A	N/A	HOME BUILDING
(8)	GREEN MOUNTAIN HFH PO BOX 381 BURLINGTON, VT 05402-0381	22-2558923	501(C)(3)	57,732.		N/A	N/A	HOME BUILDING
(9)	PORTLAND, HFH/GREATER PO BOX 10505 PORTLAND, ME 04104	22-2570213	501(C)(3)	53,387.		N/A	N/A	HOME BUILDING
(10)	METROWEST-GREATER WORCESTER, INC, HFH 111 PARK AVE WORCESTER, MA 01609-1613	22-2583590	501(C)(3)	75,533.		N/A	N/A	HOME BUILDING
(11)	COASTAL FAIRFIELD CO., HFH OF 1542 BARNUM AVE BRIDGEPORT, CT 06610	22-2597077	501(C)(3)	58,327.		N/A	N/A	HOME BUILDING
(12)	MERRIMACK VALLEY HFH 60 IS ST LAWRENCE, MA 01840	22-2672831	501(C)(3)	29,004.		N/A	N/A	HOME BUILDING

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Department of the Treasury
Internal Revenue Service

Name of the organization

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

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(1)	MORRIS HFH 102 IRON MTN RD STE H MINE HILL, NJ 07803	22-2675802	501(C)(3)	112,723.		N/A	N/A	HOME BUILDING
(2)	SOUTH SHORE HFH 20 MATHEWSON DR WEYMOUTH, MA 02189	22-2701789	501(C)(3)	16,080.		N/A	N/A	HOME BUILDING
(3)	TRENTON, INC., HFH 601 N CLINTON AVE TRENTON, NJ 08638-3446	22-2736214	501(C)(3)	25,837.		N/A	N/A	HOME BUILDING
(4)	BUFFALO, HFH 995 KENSINGTON AVE BUFFALO, NY 14215	22-2746890	501(C)(3)	115,784.		N/A	N/A	HOME BUILDING
(5)	CAMDEN HFH, METROPOLITAN PO BOX 3311 CAMDEN, NJ 08101-3311	22-2762189	501(C)(3)	13,425.		N/A	N/A	HOME BUILDING
(6)	NEWARK, HFH 298 S ORANGE AVE NEWARK, NJ 07103	22-2762202	501(C)(3)	138,753.		N/A	N/A	HOME BUILDING
(7)	CAPE COD, HFH OF 411 MAIN ST STE 6 YARMOUTHPORT, MA 02675	22-2900430	501(C)(3)	58,770.		N/A	N/A	HOME BUILDING
(8)	BURLINGTON CO, NJ AFFILIATE, INC., HFH, 1702 TAYLORS LN CINNAMINSON, NJ 08077	22-2905055	501(C)(3)	133,292.		N/A	N/A	HOME BUILDING
(9)	PLAINFIELD HFH, GREATER 2 RANDOLPH RD PLAINFIELD, NJ 07060-2928	22-2948622	501(C)(3)	53,157.		N/A	N/A	HOME BUILDING
(10)	RARITAN VALLEY HFH 100 W MAIN ST SOMERVILLE, NJ 08876	22-3126027	501(C)(3)	73,756.		N/A	N/A	HOME BUILDING
(11)	BERGEN COUNTY, HFH 10 BANTA PL STE 105 HACKENSACK, NJ 07601	22-3238028	501(C)(3)	51,562.		N/A	N/A	HOME BUILDING
(12)	SOUTHERN OCEAN COUNTY, HFH OF 668 W MAIN ST WEST CREEK, NJ 08092-3214	22-3369985	501(C)(3)	86,653.		N/A	N/A	HOME BUILDING

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Department of the Treasury
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(1)	WARREN COUNTY HFH 31 BELVIDERE AVE WASHINGTON, NJ 07882-1450	22-3575191	501 (C) (3)	5,736.		N/A	N/A	HOME BUILDING
(2)	NORTHERN OCEAN HFH PO BOX 1754 TOMS RIVER, NJ 08754-1754	22-3661840	501 (C) (3)	22,616.		N/A	N/A	HOME BUILDING
(3)	LANCASTER AREA HFH 443 FAIRVIEW AVE LANCASTER, PA 17603-5713	23-2414585	501 (C) (3)	63,138.		N/A	N/A	HOME BUILDING
(4)	BERKS COUNTY, HFH OF 336 S 18TH ST READING, PA 19602-2210	23-2500851	501 (C) (3)	274,326.		N/A	N/A	HOME BUILDING
(5)	LEHIGH VALLEY, HFH OF THE 245 N GRAHAM ST ALLENTOWN, PA 18109	23-2544326	501 (C) (3)	51,363.		N/A	N/A	HOME BUILDING
(6)	MONTGOMERY COUNTY, HFH OF 533 FOUNDRY RD NORRISTOWN, PA 19403-3901	23-2544395	501 (C) (3)	50,531.		N/A	N/A	HOME BUILDING
(7)	CHESTER COUNTY, HFH OF PO BOX 1452 COATESVILLE, PA 19320-0218	23-2549743	501 (C) (3)	58,460.		N/A	N/A	HOME BUILDING
(8)	LYCOMING HFH, GREATER 540 LYCOMING ST WILLIAMSPORT, PA 17701-4926	23-2586879	501 (C) (3)	86,172.		N/A	N/A	HOME BUILDING
(9)	DELAWARE COUNTY, PA, HFH PO BOX 656 CHESTER, PA 19016-0656	23-2596109	501 (C) (3)	125,100.		N/A	N/A	HOME BUILDING
(10)	BUCKS CO, INC., HFH OF 31 OAK AVE STE 100 CHALFONT, PA 18914	23-2607106	501 (C) (3)	110,597.		N/A	N/A	HOME BUILDING
(11)	MONROE COUNTY HFH PO BOX 734 STROUDSBURG, PA 18360-0734	23-2616037	501 (C) (3)	29,062.		N/A	N/A	HOME BUILDING
(12)	SUSQUEHANNA COUNTY PA, INC., HFH OF PO BOX 231 MONTROSE, PA 18801	23-2955699	501 (C) (3)	9,724.		N/A	N/A	HOME BUILDING

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Department of the Treasury
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(1)	APPALACHIA HFH PO BOX 36 ROBBINS, TN 37852	23-7412908	501(C)(3)	118,220.		N/A	N/A	HOME BUILDING
(2)	CENTRE CO., INC.; HFH OF GTR 1155 ZION RD BELLEFONTE, PA 16823	25-1473184	501(C)(3)	27,455.		N/A	N/A	HOME BUILDING
(3)	GREENE COUNTY HFH 32 S CHURCH ST STE 104 WAYNESBURG, PA 15370	25-1498116	501(C)(3)	5,202.		N/A	N/A	HOME BUILDING
(4)	PITTSBURGH, HFH OF GREATER 212 YOST BLVD STE A PITTSBURGH, PA 15221	25-1529652	501(C)(3)	69,505.		N/A	N/A	HOME BUILDING
(5)	BUTLER COUNTY, HFH OF PO BOX 230 BUTLER, PA 16003-0230	25-1595686	501(C)(3)	29,223.		N/A	N/A	HOME BUILDING
(6)	WASHINGTON COUNTY HFH 54 W WHEELING ST WASHINGTON, PA 15301-6916	25-1605745	501(C)(3)	6,889.		N/A	N/A	HOME BUILDING
(7)	LEBANON COUNTY, HFH OF 1455 EAST MAIN ST STE 3 ANNVILLE, PA 17003	25-1622555	501(C)(3)	6,948.		N/A	N/A	HOME BUILDING
(8)	CUMBERLAND VALLEY HFH 39 HEISERS LN CARLISLE, PA 17013-9205	25-1682630	501(C)(3)	9,880.		N/A	N/A	HOME BUILDING
(9)	ARMSTRONG HFH PO BOX 837 KITTANNING, PA 16201-0837	25-1684517	501(C)(3)	9,305.		N/A	N/A	HOME BUILDING
(10)	ALLEGHENY VALLEY HFH 1172 INDUS BLVD NEW KENSINGTON, PA 15068	25-1776631	501(C)(3)	24,039.		N/A	N/A	HOME BUILDING
(11)	BAY WAVELAND AREA, HFH 414 HIGHWAY 90 BAY SAINT LOUIS, MS 39520	26-1325894	501(C)(3)	415,442.		N/A	N/A	HOME BUILDING
(12)	BENZIE COUNTY, INC., HFH OF PO BOX 53 FRANKFORT, MI 49635	26-2928981	501(C)(3)	23,827.		N/A	N/A	HOME BUILDING

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(1)	PUTNAM COUNTY HFH 150 NORTH OAK ST OTTAWA, OH 45875	26-4179887	501(C)(3)	10,428.		N/A	N/A	HOME BUILDING
(2)	GEORGIA, HFH OF 532 BARBER ST ATHENS, GA 30601	26-4246183	501(C)(3)	77,720.		N/A	N/A	HOME BUILDING
(3)	MISSISSIPPI ASSOCIATION OF HFH AFFILIATES 506 OAKWOOD DR CLINTON, MS 39056	27-1724193	501(C)(3)	162,557.		N/A	N/A	HOME BUILDING
(4)	COLUMBUS, NE, HFH OF PO BOX 1792 COLUMBUS, NE 68602-1792	27-2896995	501(C)(3)	15,022.		N/A	N/A	HOME BUILDING
(5)	DAYTON HFH 3534 LINDEN AVE DAYTON, OH 45410	31-1104456	501(C)(3)	81,667.		N/A	N/A	HOME BUILDING
(6)	CINCINNATI HFH 4910 PARA DR CINCINNATI, OH 45237	31-1185975	501(C)(3)	164,322.		N/A	N/A	HOME BUILDING
(7)	ST. JOSEPH COUNTY, HFH OF 402 E SOUTH ST SOUTH BEND, IN 46601-2416	31-1196894	501(C)(3)	197,949.		N/A	N/A	HOME BUILDING
(8)	CLEVELAND HFH, GREATER 2110 W 110TH ST CLEVELAND, OH 44102-3510	31-1209423	501(C)(3)	107,560.		N/A	N/A	HOME BUILDING
(9)	KNOX COUNTY, OHIO, HFH OF 200 N MAIN ST MOUNT VERNON, OH 43050-2410	31-1216750	501(C)(3)	6,596.		N/A	N/A	HOME BUILDING
(10)	COLUMBUS, HFH- GREATER 3140 WESTERVILLE RD COLUMBUS, OH 43224	31-1217994	501(C)(3)	356,984.		N/A	N/A	HOME BUILDING
(11)	ATHENS COUNTY HFH 525 W UN ST ATHENS, OH 45701	31-1286856	501(C)(3)	26,578.		N/A	N/A	HOME BUILDING
(12)	GUERNSEY COUNTY HFH PO BOX 1716 CAMBRIDGE, OH 43725-6716	31-1300962	501(C)(3)	6,662.		N/A	N/A	HOME BUILDING

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(1)	DELAWARE COUNTY HFH 305 CURTIS ST DELAWARE, OH 43015	31-1304319	501(C)(3)	57,383.		N/A	N/A	HOME BUILDING
(2)	PREBLE COUNTY HFH PO BOX 492 EATON, OH 45320-0492	31-1307887	501(C)(3)	8,706.		N/A	N/A	HOME BUILDING
(3)	GREENE CO OHIO, HFH OF PO BOX 866 XENIA, OH 45385	31-1312175	501(C)(3)	6,895.		N/A	N/A	HOME BUILDING
(4)	MIAMI COUNTY, OHIO, HFH OF 150 E RACE ST TROY, OH 45373	31-1352522	501(C)(3)	13,752.		N/A	N/A	HOME BUILDING
(5)	MARION COUNTY, OHIO, HFH OF 409 DAVIDS ST MARION, OH 43302	31-1402513	501(C)(3)	75,234.		N/A	N/A	HOME BUILDING
(6)	MANHATTAN AREA HFH 727 POYNTZ AVE MANHATTAN, KS 66502	31-1417869	501(C)(3)	8,713.		N/A	N/A	HOME BUILDING
(7)	TRISTATE HFH 9900 PRINCETON GLENDALE RD CINN, OH 45246	31-1699515	501(C)(3)	66,706.		N/A	N/A	HOME BUILDING
(8)	COSHOCTON COUNTY, HFH OF 1035 WALNUT ST COSHOCTON, OH 43812	31-1718643	501(C)(3)	5,500.		N/A	N/A	HOME BUILDING
(9)	CALHOUN COUNTY, INC HFH PO BOX 750 PORT LAVACA, TX 77979-0750	32-0079605	501(C)(3)	46,344.		N/A	N/A	HOME BUILDING
(10)	AMMONOOSUC REGION, INC.; HFH PO BOX 46 LITTLETON, NH 03561	32-0228866	501(C)(3)	8,857.		N/A	N/A	HOME BUILDING
(11)	SAN DIEGO HFH 10222 SAN DIEGO MSN RD SAN DIEGO, CA 92108	33-0259190	501(C)(3)	383,158.		N/A	N/A	HOME BUILDING
(12)	RIVERSIDE, HFH 2180 IOWA AVE RIVERSIDE, CA 92507-2413	33-0288930	501(C)(3)	83,546.		N/A	N/A	HOME BUILDING

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1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	ORANGE COUNTY INC, HFH OF 2200 S RITCHEY ST SANTA ANA, CA 92705	33-0311059	501(C)(3)	346,949.		N/A	N/A	HOME BUILDING
(2)	LOS ANGELES, HFH OF GREATER 17700 S FIGUEROA ST GARDENA, CA 90248	33-0416470	501(C)(3)	8,913,837.		N/A	N/A	HOME BUILDING
(3)	INLAND VALLEY HFH 27475 YNEZ RD #390 TEMECULA, CA 92591-4612	33-0461804	501(C)(3)	64,184.		N/A	N/A	HOME BUILDING
(4)	SAN BERNARDINO AREA INC., HFH 25948 BUSINESS CTR DR REDLANDS, CA 92374	33-0509407	501(C)(3)	12,346.		N/A	N/A	HOME BUILDING
(5)	HEMET/SAN JACINTO, HFH OF PO BOX 1574 SAN JACINTO, CA 92581-1574	33-0630549	501(C)(3)	10,419.		N/A	N/A	HOME BUILDING
(6)	ADAMS COUNTY, WI, INC, HFH OF PO BOX 145 FRIENDSHIP, WI 53934-0145	33-0995475	501(C)(3)	19,635.		N/A	N/A	HOME BUILDING
(7)	SUMMIT COUNTY INC., HFH OF 2301 ROMIG RD AKRON, OH 44320	34-1518873	501(C)(3)	88,391.		N/A	N/A	HOME BUILDING
(8)	SENECA HFH 65 GRACE ST TIFFIN, OH 44883-1410	34-1536262	501(C)(3)	11,935.		N/A	N/A	HOME BUILDING
(9)	MAUMEE VALLEY HFH 6855 SPRING VALLEY DR HOLLAND, OH 43528	34-1584728	501(C)(3)	104,748.		N/A	N/A	HOME BUILDING
(10)	STARK & CARROLL COUNTIES, HFH OF GREATER 2800 LEE MONT AVE NW CANTON, OH 44709	34-1595372	501(C)(3)	148,188.		N/A	N/A	HOME BUILDING
(11)	PORTAGE COUNTY, HFH OF PO BOX 306 RAVENNA, OH 44266-0306	34-1604235	501(C)(3)	9,181.		N/A	N/A	HOME BUILDING
(12)	FIRELANDS HFH PO BOX 308 HURON, OH 44839-0308	34-1616719	501(C)(3)	20,305.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations
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Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
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(1)	LIMA AREA, HFH- 123 E WAYNE ST LIMA, OH 45801-4141	34-1654407	501(C)(3)	53,252.		N/A	N/A	HOME BUILDING
(2)	MAHONING COUNTY, HFH OF 480 YOUNGSTWN-POLAND RD STRUTHERS, OH 44471	34-1657171	501(C)(3)	17,436.		N/A	N/A	HOME BUILDING
(3)	MEDINA COUNTY, HFH OF 342 E SMITH RD MEDINA, OH 44256	34-1658090	501(C)(3)	7,132.		N/A	N/A	HOME BUILDING
(4)	ALLIANCE AREA HFH 405 S LINDEN AVE STE 207 ALLIANCE, OH 44601	34-1696774	501(C)(3)	17,174.		N/A	N/A	HOME BUILDING
(5)	WILLIAMS COUNTY, HFH OF PO BOX 366 BRYAN, OH 43506-0366	34-1697187	501(C)(3)	8,220.		N/A	N/A	HOME BUILDING
(6)	GEAUGA COUNTY HFH PO BOX 21 NEWBURY, OH 44065	34-1715023	501(C)(3)	14,935.		N/A	N/A	HOME BUILDING
(7)	LOGAN COUNTY, OHIO, HFH OF ATTN: KATHY BOW BELLEFONTAINE, OH 43311	34-1719477	501(C)(3)	5,521.		N/A	N/A	HOME BUILDING
(8)	OTTAWA COUNTY, HFH OF 161 W WATER ST STE B OAK HARBOR, OH 43449	34-1744592	501(C)(3)	7,346.		N/A	N/A	HOME BUILDING
(9)	HOLMES COUNTY HFH PO BOX 418 MILLERSBURG, OH 44654-0418	34-1776542	501(C)(3)	5,594.		N/A	N/A	HOME BUILDING
(10)	FINDLAY/HANCOCK COUNTY, HFH OF 1800 N BLANCHARD ST FINDLAY, OH 45840	34-1864802	501(C)(3)	144,362.		N/A	N/A	HOME BUILDING
(11)	BELMONT CO., HFH OF 55779 HIGH RDG RD BELLAIRE, OH 43906-0312	34-1865063	501(C)(3)	49,734.		N/A	N/A	HOME BUILDING
(12)	CHAMPAIGN CO., HFH OF PO BOX 301 URBANA, OH 43078	34-1936444	501(C)(3)	6,786.		N/A	N/A	HOME BUILDING

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Schedule I (Form 990) (2010)

**SCHEDULE I
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Department of the Treasury
Internal Revenue Service

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

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1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	EVANSVILLE, HFH OF 1401 N FARES AVE EVANSVILLE, IN 47711	35-1602775	501(C)(3)	161,203.		N/A	N/A	HOME BUILDING
(2)	LAFAYETTE, HFH OF 420 S 1ST ST LAFAYETTE, IN 47905-1004	35-1607101	501(C)(3)	136,895.		N/A	N/A	HOME BUILDING
(3)	PIKES PEAK HFH 2105 E BIJOU STE B CO SPRINGS, CO 80909	35-1640064	501(C)(3)	112,844.		N/A	N/A	HOME BUILDING
(4)	LA PORTE COUNTY HFH 1002 W GREENE ST BLDG E MI CITY, IN 46360	35-1670358	501(C)(3)	20,790.		N/A	N/A	HOME BUILDING
(5)	MUNCIE INDIANA HFH INC., GREATER PO BOX 1119 MUNCIE, IN 47308-1119	35-1706782	501(C)(3)	8,397.		N/A	N/A	HOME BUILDING
(6)	INDIANAPOLIS, HFH OF GREATER 1011 E 22ND ST INDIANAPOLIS, IN 46202	35-1715910	501(C)(3)	171,164.		N/A	N/A	HOME BUILDING
(7)	WABASH VALLEY HFH 2313 TIPPECANOE ST TERRE HAUTE, IN 47807	35-1729005	501(C)(3)	17,130.		N/A	N/A	HOME BUILDING
(8)	MONROE COUNTY, HFH OF 213 E KIRKWOOD AVE BLOOMINGTON, IN 47408	35-1753977	501(C)(3)	305,909.		N/A	N/A	HOME BUILDING
(9)	HUNTINGTON COUNTY HFH 1454 ETNA AVE HUNTINGTON, IN 46750	35-1780073	501(C)(3)	8,865.		N/A	N/A	HOME BUILDING
(10)	MONTGOMERY COUNTY INDIANA, HFH OF PO BOX 208 CRAWFORDSVILLE, IN 47933-0208	35-1801233	501(C)(3)	6,335.		N/A	N/A	HOME BUILDING
(11)	MORGAN COUNTY, HFH OF PO BOX 1929 MARTINSVILLE, IN 46151-0929	35-1801672	501(C)(3)	14,536.		N/A	N/A	HOME BUILDING
(12)	RICHMOND, IN, INC., HFH OF GREATER 1114 SOUTH F ST RICHMOND, IN 47374	35-1803693	501(C)(3)	25,992.		N/A	N/A	HOME BUILDING

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Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

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

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91-1914868

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(1)	HAMILTON COUNTY, HFH 17902 US HWY 31 N STE 4 WESTFIELD, IN 46074	35-1805196	501(C)(3)	10,319.		N/A	N/A	HOME BUILDING
(2)	NEW ALBANY/FLOYD COUNTY HFH PO BOX 1814 NEW ALBANY, IN 47151-1814	35-1817055	501(C)(3)	8,127.		N/A	N/A	HOME BUILDING
(3)	HENDRICKS COUNTY, HFH OF 360 N STATE RD 267 AVON, IN 46123	35-1864463	501(C)(3)	34,447.		N/A	N/A	HOME BUILDING
(4)	ORANGE COUNTY, IN HFH PO BOX 146 PAOLI, IN 47454-0146	35-1867547	501(C)(3)	16,104.		N/A	N/A	HOME BUILDING
(5)	WHITLEY COUNTY, HFH OF PO BOX 803 COLUMBIA CITY, IN 46725-0803	35-1888674	501(C)(3)	81,475.		N/A	N/A	HOME BUILDING
(6)	HEART OF MADISON HFH, INC. 202 BROADWAY ST MADISON, IN 47250-3767	35-1891625	501(C)(3)	5,828.		N/A	N/A	HOME BUILDING
(7)	WARRICK COUNTY, HFH OF 10622 TELEPHONE RD CHANDLER, IN 47610-9621	35-1930280	501(C)(3)	7,678.		N/A	N/A	HOME BUILDING
(8)	PORTER COUNTY, INC., HFH OF PO BOX 0492 VALPARAISO, IN 46384-0492	35-1939152	501(C)(3)	9,151.		N/A	N/A	HOME BUILDING
(9)	CLAY COUNTY, HFH OF PO BOX 81 BRAZIL, IN 47834-0081	35-1962590	501(C)(3)	7,331.		N/A	N/A	HOME BUILDING
(10)	LAGRANGE COUNTY HFH 109 E CENTRAL AVE STE 1 LAGRANGE, IN 46761	35-1981686	501(C)(3)	18,862.		N/A	N/A	HOME BUILDING
(11)	BENTON, FOUNTAIN & WARREN COUNTIES, HFH PO BOX 132 PINE VILLAGE, IN 47975-0132	35-1984031	501(C)(3)	6,931.		N/A	N/A	HOME BUILDING
(12)	MARSHALL COUNTY, HFH OF 116 S WALNUT ST PLYMOUTH, IN 46563	35-2029215	501(C)(3)	14,892.		N/A	N/A	HOME BUILDING

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(1)	MARTIN CO., HFH OF 103 NORTH ST LOOGOOTE, IN 47553	35-2103469	501(C)(3)	7,301.		N/A	N/A	HOME BUILDING
(2)	HFH OF INDIANA 101 W OHIO ST INDIANAPOLIS, IN 46204	35-2104725	501(C)(3)	5,443.		N/A	N/A	HOME BUILDING
(3)	OMAHA, HFH OF 2204 AMES AVE OMAHA, NE 68110	36-3283625	501(C)(3)	423,527.		N/A	N/A	HOME BUILDING
(4)	TWIN CITIES HFH 3001 4TH ST SE MINNEAPOLIS, MN 55414-3301	36-3363171	501(C)(3)	2,096,025.		N/A	N/A	HOME BUILDING
(5)	KANKAKEE COUNTY, HFH OF 200 E CT ST STE 510 KANKAKEE, IL 60901	36-3497850	501(C)(3)	8,123.		N/A	N/A	HOME BUILDING
(6)	WILL COUNTY HFH 200 S LARKIN AVE JOLIET, IL 60436-1248	36-3564555	501(C)(3)	38,451.		N/A	N/A	HOME BUILDING
(7)	CHICAGO SOUTH SUBURBS, HFH 139 W JOE ORR RD CHICAGO HEIGHTS, IL 60411	36-3582576	501(C)(3)	101,638.		N/A	N/A	HOME BUILDING
(8)	ROCKFORD AREA HFH 5183 HARLEM RD ROCKFORD, IL 61111-3448	36-3592066	501(C)(3)	27,652.		N/A	N/A	HOME BUILDING
(9)	LAKE COUNTY, ILLINOIS, INC., HFH, 315 MLK JR AVE WAUKEGAN, IL 60085	36-3659288	501(C)(3)	175,507.		N/A	N/A	HOME BUILDING
(10)	NORTHERN FOX VALLEY, HFH OF 20 S GRV ST CARPENTERSVILLE, IL 60110	36-3742888	501(C)(3)	86,788.		N/A	N/A	HOME BUILDING
(11)	DIXON HFH PO BOX 11 DIXON, IL 61021-0011	36-3857555	501(C)(3)	10,082.		N/A	N/A	HOME BUILDING
(12)	KNOX COUNTY, IL, HFH OF PO BOX 467 GALESBURG, IL 61402-0467	36-3881197	501(C)(3)	7,635.		N/A	N/A	HOME BUILDING

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(1)	MCHENRY COUNTY, HFH OF PO BOX 1166 MCHENRY, IL 60051-1166	36-4000780	501(C)(3)	135,542.		N/A	N/A	HOME BUILDING
(2)	DUPAGE HFH 1600 E ROOSEVELT RD STE B WHEATON, IL 60187	36-4003119	501(C)(3)	208,589.		N/A	N/A	HOME BUILDING
(3)	LASALLE-BUREAU-PUTNAM COUNTIES, HFH OF 628 COLUMBUS ST STE 405 OTTAWA, IL 61350	36-4094124	501(C)(3)	10,698.		N/A	N/A	HOME BUILDING
(4)	MOULTRIE COUNTY HFH 8 S WASHINGTON ST SULLIVAN, IL 61951	36-4139293	501(C)(3)	8,579.		N/A	N/A	HOME BUILDING
(5)	CHICAGOLAND HFH 1050 THACKERY DR DES PLAINES, IL 60017	36-4257107	501(C)(3)	29,524.		N/A	N/A	HOME BUILDING
(6)	MCLEAN COUNTY, HFH OF 301 N MAIN BLOOMINGTON, IL 61701-3913	37-1173273	501(C)(3)	95,045.		N/A	N/A	HOME BUILDING
(7)	SANGAMON COUNTY, HFH- 1514 W JEFFERSON SPRINGFIELD, IL 62702	37-1250364	501(C)(3)	42,794.		N/A	N/A	HOME BUILDING
(8)	COLES COUNTY HFH PO BOX 945 CHARLESTON, IL 61920-6945	37-1252332	501(C)(3)	14,925.		N/A	N/A	HOME BUILDING
(9)	LEWIS & CLARK HFH PO BOX 705 COLLINSVILLE, IL 62234-0705	37-1261797	501(C)(3)	8,747.		N/A	N/A	HOME BUILDING
(10)	CHAMPAIGN COUNTY, HFH OF 119 E UNIVERSITY ST CHAMPAIGN, IL 61824	37-1277094	501(C)(3)	31,888.		N/A	N/A	HOME BUILDING
(11)	LOGAN COUNTY, HFH- PO BOX 714 LINCOLN, IL 62656-0714	37-1302535	501(C)(3)	8,433.		N/A	N/A	HOME BUILDING
(12)	KENT COUNTY, HFH OF 425 PLEASANT AVE SW GRAND RAPIDS, MI 49503	38-2527968	501(C)(3)	276,073.		N/A	N/A	HOME BUILDING

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(1)	KALAMAZOO VALLEY HFH 525 E KALAMAZOO AVE KALAMAZOO, MI 49007	38-2558965	501(C)(3)	57,145.		N/A	N/A	HOME BUILDING
(2)	DETROIT, HFH 14325 JANE ST DETROIT, MI 48205-4059	38-2708025	501(C)(3)	445,162.		N/A	N/A	HOME BUILDING
(3)	LANSING, HFH 1941 BENJAMIN DR LANSING, MI 48906-4156	38-2716658	501(C)(3)	160,643.		N/A	N/A	HOME BUILDING
(4)	SAGINAW HFH 315 W HOLLAND AVE SAGINAW, MI 48602	38-2739180	501(C)(3)	76,844.		N/A	N/A	HOME BUILDING
(5)	WEXFORD HFH PO BOX 828 CADILLAC, MI 49601-0828	38-2749069	501(C)(3)	9,383.		N/A	N/A	HOME BUILDING
(6)	GRAND TRAVERSE REGION, HFH 1129 WOODMERE AVE TRAVERSE CITY, MI 49686	38-2753833	501(C)(3)	51,110.		N/A	N/A	HOME BUILDING
(7)	BATTLE CREEK AREA HFH 551 W MICHIGAN AVE BATTLE CREEK, MI 49017	38-2846821	501(C)(3)	10,194.		N/A	N/A	HOME BUILDING
(8)	HURON VALLEY, HFH 170 APRILL DR STE A ANN ARBOR, MI 48103	38-2874694	501(C)(3)	151,240.		N/A	N/A	HOME BUILDING
(9)	JACKSON HFH, GREATER 251 WEST PROSPECT JACKSON, MI 49203	38-2878590	501(C)(3)	19,093.		N/A	N/A	HOME BUILDING
(10)	MIDLAND COUNTY HFH 1703 S SEGINAW RD MIDLAND, MI 48640-5633	38-2884074	501(C)(3)	120,026.		N/A	N/A	HOME BUILDING
(11)	TRI-CITIES AREA HFH PO BOX 707 GRAND HAVEN, MI 49417-0707	38-2885443	501(C)(3)	40,332.		N/A	N/A	HOME BUILDING
(12)	BARRY COUNTY, HFH PO BOX 234 HASTINGS, MI 49058	38-2885664	501(C)(3)	25,991.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	LENAWEE COUNTY, HFH OF 1205 E BEECHER ST ADRIAN, MI 49221	38-2886158	501(C)(3)	20,042.		N/A	N/A	HOME BUILDING
(2)	LAKESHORE HFH 12727 RILEY ST HOLLAND, MI 49424	38-2893355	501(C)(3)	53,876.		N/A	N/A	HOME BUILDING
(3)	GENESEE COUNTY HFH 101 BURTON ST FLINT, MI 48503	38-2899387	501(C)(3)	92,576.		N/A	N/A	HOME BUILDING
(4)	BLUE WATER HFH PO BOX 610367 PORT HURON, MI 48061	38-2910162	501(C)(3)	5,799.		N/A	N/A	HOME BUILDING
(5)	MUSKEGON COUNTY HFH 280 OTTAWA ST MUSKEGON, MI 49442	38-2938902	501(C)(3)	67,699.		N/A	N/A	HOME BUILDING
(6)	NORTHWEST MICHIGAN HFH PO BOX 827 PETOSKEY, MI 49770-0827	38-2971056	501(C)(3)	28,288.		N/A	N/A	HOME BUILDING
(7)	GRATIOT COUNTY, HFH OF 525 NORTH STATE ST STE 8 ALMA, MI 48801	38-3001403	501(C)(3)	13,126.		N/A	N/A	HOME BUILDING
(8)	MONTCALM COUNTY HFH 124 W GRV ST GREENVILLE, MI 48838-0681	38-3038229	501(C)(3)	8,506.		N/A	N/A	HOME BUILDING
(9)	MARQUETTE COUNTY HFH 1027 N THIRD ST MARQUETTE, MI 49855-0213	38-3044937	501(C)(3)	63,565.		N/A	N/A	HOME BUILDING
(10)	BAY COUNTY HFH 1106 S MADISON BAY CITY, MI 48708-0405	38-3055548	501(C)(3)	59,411.		N/A	N/A	HOME BUILDING
(11)	MECOSTA COUNTY HFH PO BOX 1038 BIG RAPIDS, MI 49307-0938	38-3060981	501(C)(3)	13,303.		N/A	N/A	HOME BUILDING
(12)	NORTH STAR HFH PO BOX 122 SAULT SAINTE MARIE, MI 49783	38-3082034	501(C)(3)	27,128.		N/A	N/A	HOME BUILDING

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(1)	MENOMINEE RIVER, INC, HFH 113 S MILWAUKEE AVE KINGSFORD, MI 49802	38-3095570	501(C)(3)	189,806.		N/A	N/A	HOME BUILDING
(2)	SHIAWASSEE COUNTY HFH PO BOX 7 OWOSSO, MI 48867-0007	38-3098134	501(C)(3)	8,448.		N/A	N/A	HOME BUILDING
(3)	COPPER COUNTRY HFH PO BOX 231 HOUGHTON, MI 49931-0231	38-3113603	501(C)(3)	7,819.		N/A	N/A	HOME BUILDING
(4)	MACOMB COUNTY HFH 130 N GROESBECK HWY MOUNT CLEMENS, MI 48043	38-3135471	501(C)(3)	163,947.		N/A	N/A	HOME BUILDING
(5)	MICHIGAN, HFH OF 618 S CREYTS RD STE C LANSING, MI 48917	38-3142455	501(C)(3)	89,083.		N/A	N/A	HOME BUILDING
(6)	MANISTEE COUNTY HFH PO BOX 495 MANISTEE, MI 49660-0495	38-3143981	501(C)(3)	8,767.		N/A	N/A	HOME BUILDING
(7)	WESTERN WAYNE COUNTY, HFH OF 638 STARKWEATHER ST PLYMOUTH, MI 48170-1335	38-3204667	501(C)(3)	36,250.		N/A	N/A	HOME BUILDING
(8)	IONIA AREA HFH PO BOX 284 IONIA, MI 48846-0284	38-3232071	501(C)(3)	10,254.		N/A	N/A	HOME BUILDING
(9)	HIAWATHALAND, INC.; HFH 401 DEER ST MANISTIQUE, MI 49854	38-3239216	501(C)(3)	57,762.		N/A	N/A	HOME BUILDING
(10)	MONROE COUNTY, HFH OF 14930 LAPLAISANCE RD MONROE, MI 48161	38-3243925	501(C)(3)	274,353.		N/A	N/A	HOME BUILDING
(11)	OAKLAND CO, HFH OF 150 OSMUN ST PONTIAC, MI 48342-3125	38-3244099	501(C)(3)	198,579.		N/A	N/A	HOME BUILDING
(12)	HARBOR HFH 785 E MAIN ST BENTON HARBOR, MI 49022-3323	38-3258418	501(C)(3)	142,995.		N/A	N/A	HOME BUILDING

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(1)	MONTMORENCY COUNTY HFH PO BOX 911 LEWISTON, MI 49756-0911	38-3272488	501(C)(3)	11,272.		N/A	N/A	HOME BUILDING
(2)	IOSCO HFH PO BOX 117 TAWAS CITY, MI 48764-0117	38-3383595	501(C)(3)	8,080.		N/A	N/A	HOME BUILDING
(3)	MILWAUKEE HFH 3726 N BOOTH ST MILWAUKEE, WI 53212-1536	39-1496741	501(C)(3)	2,442,988.		N/A	N/A	HOME BUILDING
(4)	GREATER GREEN BAY HFH PO BOX 10263 GREEN BAY, WI 54307-0263	39-1589910	501(C)(3)	27,154.		N/A	N/A	HOME BUILDING
(5)	DANE COUNTY, HFH OF PO BOX 258128 MADISON, WI 53725-8128	39-1592769	501(C)(3)	259,191.		N/A	N/A	HOME BUILDING
(6)	RACINE HFH 1501 VILLA ST RACINE, WI 53403-2725	39-1616230	501(C)(3)	38,175.		N/A	N/A	HOME BUILDING
(7)	CENTRAL WISCONSIN HFH 1308 MAIN ST STEVENS POINT, WI 54481	39-1617445	501(C)(3)	9,225.		N/A	N/A	HOME BUILDING
(8)	MANITOWOC COUNTY HFH PO BOX 631 MANITOWOC, WI 54221-0631	39-1619519	501(C)(3)	15,643.		N/A	N/A	HOME BUILDING
(9)	WAUKESHA COUNTY, HFH OF 234 W MAIN ST #6 WAUKESHA, WI 53186	39-1642114	501(C)(3)	49,227.		N/A	N/A	HOME BUILDING
(10)	WAUSAU, HFH OF PO BOX 1372 WAUSAU, WI 54402-1372	39-1654855	501(C)(3)	30,564.		N/A	N/A	HOME BUILDING
(11)	OSHKOSH, HFH OF PO BOX 2692 OSHKOSH, WI 54903	39-1657039	501(C)(3)	72,074.		N/A	N/A	HOME BUILDING
(12)	CHIPPEWA VALLEY HFH 2233 GOLF RD EAU CLAIRE, WI 54701-8048	39-1668709	501(C)(3)	18,906.		N/A	N/A	HOME BUILDING

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(1)	LA CROSSE AREA HFH PO BOX 2123 LA CROSSE, WI 54602	39-1706999	501(C)(3)	27,770.		N/A	N/A	HOME BUILDING
(2)	FOX CITIES AREA HFH, GREATER 921 MIDWAY RD MENASHA, WI 54952	39-1742974	501(C)(3)	390,585.		N/A	N/A	HOME BUILDING
(3)	DOOR COUNTY HFH 410 NORTH 14TH AVE STURGEON BAY, WI 54235	39-1746145	501(C)(3)	61,356.		N/A	N/A	HOME BUILDING
(4)	LAKESIDE, INC., HFH PO BOX 973 SHEBOYGAN, WI 53082-0973	39-1750309	501(C)(3)	69,321.		N/A	N/A	HOME BUILDING
(5)	MARSHFIELD AREA HFH PO BOX 784 MARSHFIELD, WI 54449-0784	39-1816221	501(C)(3)	7,949.		N/A	N/A	HOME BUILDING
(6)	ST. CROIX VALLEY HFH 116 E ELM ST RIVER FALLS, WI 54022	39-1857467	501(C)(3)	122,834.		N/A	N/A	HOME BUILDING
(7)	FOND DU LAC COUNTY, HFH OF 150 S BROOKE ST FOND DU LAC, WI 54936	39-1859682	501(C)(3)	55,310.		N/A	N/A	HOME BUILDING
(8)	WILD RIVERS HFH, INC. 2201 US HIGHWAY 8 ST CROIX FALLS, WI 54024	39-1863020	501(C)(3)	68,657.		N/A	N/A	HOME BUILDING
(9)	WASHINGTON COUNTY, HFH OF 279 S 17TH AVE #7 WEST BEND, WI 53095	39-1908370	501(C)(3)	84,059.		N/A	N/A	HOME BUILDING
(10)	MONROE COUNTY HFH PO BOX 129 SPARTA, WI 54656-0129	39-1918037	501(C)(3)	10,763.		N/A	N/A	HOME BUILDING
(11)	GRANT COUNTY HFH PO BOX 617 PLATTEVILLE, WI 53818-0617	39-1996697	501(C)(3)	52,344.		N/A	N/A	HOME BUILDING
(12)	LANGLADE COUNTY, HFH OF PO BOX 604 ANTIGO, WI 54409-0604	39-2005705	501(C)(3)	16,727.		N/A	N/A	HOME BUILDING

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(1)	SAUK-COLUMBIA AREA, HFH OF 1209 8TH ST BARABOO, WI 53913	39-2023346	501(C)(3)	124,887.		N/A	N/A	HOME BUILDING
(2)	WESTERN LAKE SUPERIOR HFH 2002 W SUPERIOR ST STE 9 DULUTH, MN 55806	41-1631246	501(C)(3)	5,613.		N/A	N/A	HOME BUILDING
(3)	CENTRAL MINNESOTA HFH 777 LINCOLN AVE NE SAINT CLOUD, MN 56304	41-1634218	501(C)(3)	306,366.		N/A	N/A	HOME BUILDING
(4)	SOUTH CENTRAL MINNESOTA, HFH OF 1751 BASSETT DR MANKATO, MN 56001-6202	41-1654111	501(C)(3)	103,070.		N/A	N/A	HOME BUILDING
(5)	NORTHWOODS HFH PO BOX 1067 BEMIDJI, MN 56619-1067	41-1657201	501(C)(3)	15,093.		N/A	N/A	HOME BUILDING
(6)	LAKES AREA HFH PO BOX 234 BRAINERD, MN 56401-0234	41-1659149	501(C)(3)	123,973.		N/A	N/A	HOME BUILDING
(7)	ROCHESTER AREA HFH 1530 GREENVIEW DR SW ROCHESTER, MN 55902	41-1664586	501(C)(3)	117,406.		N/A	N/A	HOME BUILDING
(8)	LAKE AGASSIZ HFH PO BOX 1022 MOORHEAD, MN 56561	41-1690131	501(C)(3)	120,759.		N/A	N/A	HOME BUILDING
(9)	RICE COUNTY HFH 204 7TH ST W PMB 128 NORTHFIELD, MN 55057	41-1700206	501(C)(3)	92,066.		N/A	N/A	HOME BUILDING
(10)	WEST CENTRAL MINNESOTA, HFH OF PO BOX 1171 WILLMAR, MN 56201-1171	41-1726284	501(C)(3)	20,037.		N/A	N/A	HOME BUILDING
(11)	ITASCA COUNTY HFH 1338 E US HWY 169 GRAND RAPIDS, MN 55744	41-1732842	501(C)(3)	41,700.		N/A	N/A	HOME BUILDING
(12)	STEELE-WASECA AREA, HFH PO BOX 292 OWATONNA, MN 55060-0292	41-1750223	501(C)(3)	72,830.		N/A	N/A	HOME BUILDING

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(1)	WINONA-FILLMORE COUNTIES, HFH- PO BOX 1183 WINONA, MN 55987-7183	41-1755549	501(C)(3)	60,596.		N/A	N/A	HOME BUILDING
(2)	GOODHUE COUNTY HFH 480 W 8TH ST RED WING, MN 55066	41-1762123	501(C)(3)	84,190.		N/A	N/A	HOME BUILDING
(3)	LEAF RIVER AREA HFH PO BOX 562 WADENA, MN 56482	41-1781238	501(C)(3)	14,592.		N/A	N/A	HOME BUILDING
(4)	EAST CENTRAL MINNESOTA HFH PO BOX 529 CAMBRIDGE, MN 55008	41-1781942	501(C)(3)	22,458.		N/A	N/A	HOME BUILDING
(5)	NORTH ST. LOUIS COUNTY HFH PO BOX 24 VIRGINIA, MN 55792-0024	41-1791050	501(C)(3)	121,570.		N/A	N/A	HOME BUILDING
(6)	MARION COUNTY, HFH OF PO BOX 229 KNOXVILLE, IA 50138-0032	41-1865527	501(C)(3)	10,064.		N/A	N/A	HOME BUILDING
(7)	DOUGLAS COUNTY, MN, HFH OF 911 STATE HW 29 N ALEXANDRIA, MN 56308	41-1869669	501(C)(3)	128,433.		N/A	N/A	HOME BUILDING
(8)	MINNESOTA, HFH 2401 LOWRY AVE NE MINNEAPOLIS, MN 55418	41-1889904	501(C)(3)	81,178.		N/A	N/A	HOME BUILDING
(9)	BOONE COUNTY, HFH PO BOX 1222 BELVIDERE, IL 61008	41-2231092	501(C)(3)	24,492.		N/A	N/A	HOME BUILDING
(10)	DES MOINES HFH, GREATER PO BOX 716 DES MOINES, IA 50303-0716	42-1275330	501(C)(3)	529,614.		N/A	N/A	HOME BUILDING
(11)	CEDAR VALLEY HFH 350 6TH AVE SE CEDAR RAPIDS, IA 52401	42-1320296	501(C)(3)	294,790.		N/A	N/A	HOME BUILDING
(12)	IOWA HEARTLAND HFH 803 W 5TH ST WATERLOO, IA 50702	42-1350378	501(C)(3)	46,836.		N/A	N/A	HOME BUILDING

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(1)	DUBUQUE/JACKSON COUNTIES HFH 2790 ETHEL AVE DUBUQUE, IA 52001	42-1365181	501(C)(3)	34,981.		N/A	N/A	HOME BUILDING
(2)	WINNESHIEK COUNTY HFH PO BOX 457 DECORAH, IA 52101-0457	42-1387474	501(C)(3)	67,448.		N/A	N/A	HOME BUILDING
(3)	SIOUXLAND HFH PO BOX 5318 SIOUX CITY, IA 51102-5318	42-1388519	501(C)(3)	53,675.		N/A	N/A	HOME BUILDING
(4)	COUNCIL BLUFFS, HFH OF 645 9TH AVE COUNCIL BLUFFS, IA 51501	42-1394987	501(C)(3)	90,461.		N/A	N/A	HOME BUILDING
(5)	TWIN RIVERS HFH, INC. 118 N 12TH ST STE B FORT DODGE, IA 50501	42-1402422	501(C)(3)	50,916.		N/A	N/A	HOME BUILDING
(6)	QUAD CITIES, HFH 2235 GRANT ST BETTENDORF, IA 52722-5021	42-1404937	501(C)(3)	40,692.		N/A	N/A	HOME BUILDING
(7)	NORTH CENTRAL IOWA, HFH OF 517 1ST ST NW MASON CITY, IA 50401-5532	42-1408763	501(C)(3)	55,955.		N/A	N/A	HOME BUILDING
(8)	IOWA VALLEY HFH 2401 SCOTT BLVD SE IOWA CITY, IA 52240-8132	42-1410210	501(C)(3)	181,295.		N/A	N/A	HOME BUILDING
(9)	MAHASKA COUNTY HFH PO BOX 583 OSKALOOSA, IA 52577-0583	42-1410234	501(C)(3)	28,414.		N/A	N/A	HOME BUILDING
(10)	KEOKUK AREA HFH, GREATER PO BOX 314 KEOKUK, IA 52632-0314	42-1412557	501(C)(3)	7,724.		N/A	N/A	HOME BUILDING
(11)	BOONE AND GREENE COUNTIES, INC., HFH OF PO BOX 601 BOONE, IA 50036	42-1451868	501(C)(3)	45,105.		N/A	N/A	HOME BUILDING
(12)	CENTRAL IOWA, HFH OF 401 CLARK AVE STE 100 AMES, IA 50010-6173	42-1453361	501(C)(3)	65,990.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	WARREN COUNTY HFH PO BOX 844 INDIANOLA, IA 50125-0844	42-1461398	501(C)(3)	9,609.		N/A	N/A	HOME BUILDING
(2)	WEST CENTRAL IOWA, HFH OF PO BOX 843 CARROLL, IA 51401	42-1484702	501(C)(3)	8,630.		N/A	N/A	HOME BUILDING
(3)	HFH OF IOWA 103 E STATE ST STE 302 MASON CITY, IA 50401	42-1520979	501(C)(3)	78,577.		N/A	N/A	HOME BUILDING
(4)	PHILADELPHIA, INC., HFH 1829 N 19TH ST PHILADELPHIA, PA 19121-2205	42-1580163	501(C)(3)	61,564.		N/A	N/A	HOME BUILDING
(5)	NEW YORK STATE, INC./HFH OF 911 E MAIN ST ENDICOTT, NY 13760	42-1685278	501(C)(3)	7,792.		N/A	N/A	HOME BUILDING
(6)	CAPE AREA, HFH PO BOX 1122 CAPE GIRARDEAU, MO 63702-1122	43-1392963	501(C)(3)	40,729.		N/A	N/A	HOME BUILDING
(7)	SPRINGFIELD, MISSOURI, INC., HFH OF 2410 S SCENIC AVE SPRINGFIELD, MO 65807	43-1470360	501(C)(3)	49,483.		N/A	N/A	HOME BUILDING
(8)	LAFAYETTE COUNTY HFH, INC. PO BOX 454 LEXINGTON, MO 64067-0454	43-1482379	501(C)(3)	15,653.		N/A	N/A	HOME BUILDING
(9)	JOPLIN AREA HFH 315 S BLACKCAT RD JOPLIN, MO 64801-8931	43-1524876	501(C)(3)	15,440.		N/A	N/A	HOME BUILDING
(10)	TRUMAN HERITAGE HFH, INC. 800 W MAPLE INDEPENDENCE, MO 64050	43-1532266	501(C)(3)	20,195.		N/A	N/A	HOME BUILDING
(11)	RIVER CITY HFH 1420 CRK TRL DR JEFFERSON CITY, MO 65109	43-1603718	501(C)(3)	62,198.		N/A	N/A	HOME BUILDING
(12)	JEFFERSON COUNTY, MO HFH, INC. PO BOX 184 CRYSTAL CITY, MO 63019	43-1711135	501(C)(3)	62,631.		N/A	N/A	HOME BUILDING

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(1)	ST. JOSEPH HFH PO BOX 6528 SAINT JOSEPH, MO 64506-0528	43-1733608	501(C)(3)	18,537.		N/A	N/A	HOME BUILDING
(2)	LAKE OF THE OZARKS HFH 1 CT CIR STE 16 CAMDENTON, MO 65020	43-1760338	501(C)(3)	6,174.		N/A	N/A	HOME BUILDING
(3)	POPLAR BLUFF, HFH- PO BOX 965 POPLAR BLUFF, MO 63902-0965	43-1779407	501(C)(3)	5,730.		N/A	N/A	HOME BUILDING
(4)	ST. CHARLES CO, HFH OF 130 TRADE CTR DR W SAINT PETERS, MO 63376	43-1798488	501(C)(3)	258,030.		N/A	N/A	HOME BUILDING
(5)	ST. FRANCOIS COUNTY HFH PO BOX 743 FARMINGTON, MO 63640-0743	43-1808778	501(C)(3)	59,800.		N/A	N/A	HOME BUILDING
(6)	CRAWFORD CO, KS, INC., HFH OF PO BOX 724 PITTSBURG, KS 66762-0724	43-2016181	501(C)(3)	13,436.		N/A	N/A	HOME BUILDING
(7)	RED RIVER VALLEY HFH PO BOX 5415 GRAND FORKS, ND 58206-5415	45-0407344	501(C)(3)	51,566.		N/A	N/A	HOME BUILDING
(8)	SIOUX FALLS, HFH OF GREATER 721 E AMIDON ST SIOUX FALLS, SD 57104	46-0407140	501(C)(3)	166,293.		N/A	N/A	HOME BUILDING
(9)	BLACK HILLS AREA HFH 611 HERMAN ST RAPID CITY, SD 57701-1513	46-0410933	501(C)(3)	108,225.		N/A	N/A	HOME BUILDING
(10)	OAHE HFH PO BOX 533 PIERRE, SD 57501	46-0430669	501(C)(3)	5,301.		N/A	N/A	HOME BUILDING
(11)	BROOKINGS AREA HFH PO BOX 412 BROOKINGS, SD 57006-0412	46-0437158	501(C)(3)	182,675.		N/A	N/A	HOME BUILDING
(12)	SICANGU TIKAGA OKICIYAPI HFH PO BOX 327 MISSION, SD 57555-0327	46-0450137	501(C)(3)	17,870.		N/A	N/A	HOME BUILDING

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(1)	ARTESIA, HFH OF PO BOX 686 ARTESIA, NM 88211-0686	46-0488334	501(C)(3)	5,069.		N/A	N/A	HOME BUILDING
(2)	WINDY CITY HFH 2201 SOUTH HALSTED ST CHICAGO, IL 60608	46-0494889	501(C)(3)	56,129.		N/A	N/A	HOME BUILDING
(3)	LINCOLN/LANCASTER COUNTY HFH 144 N 19TH ST LINCOLN, NE 68503-3601	47-0714576	501(C)(3)	111,911.		N/A	N/A	HOME BUILDING
(4)	GRAND ISLAND AREA HFH PO BOX 1001 GRAND ISLAND, NE 68802-1001	47-0754122	501(C)(3)	168,413.		N/A	N/A	HOME BUILDING
(5)	KEARNEY AREA HFH 1815 1ST AVE KEARNEY, NE 68847-6032	47-0754458	501(C)(3)	12,472.		N/A	N/A	HOME BUILDING
(6)	FREMONT AREA HFH PO BOX 932 FREMONT, NE 68026-0932	47-0763503	501(C)(3)	80,538.		N/A	N/A	HOME BUILDING
(7)	SARPY COUNTY, INC., HFH OF PO BOX 1664 BELLEVUE, NE 68005-1664	47-0788757	501(C)(3)	68,113.		N/A	N/A	HOME BUILDING
(8)	TOPEKA HFH PO BOX 2234 TOPEKA, KS 66611	48-0980011	501(C)(3)	53,637.		N/A	N/A	HOME BUILDING
(9)	HEARTLAND HFH 1401 FAIRFAX TRFWY KANSAS CITY, KS 66115	48-1041839	501(C)(3)	97,635.		N/A	N/A	HOME BUILDING
(10)	LAWRENCE HFH 720 CONNECTICUT ST LAWRENCE, KS 66044	48-1070953	501(C)(3)	23,330.		N/A	N/A	HOME BUILDING
(11)	SALINA HFH PO BOX 3583 SALINA, KS 67402-3583	48-1092331	501(C)(3)	16,405.		N/A	N/A	HOME BUILDING
(12)	MCPHERSON AREA HFH PO BOX 1281 MC PHERSON, KS 67460-1281	48-1120281	501(C)(3)	5,738.		N/A	N/A	HOME BUILDING

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(1)	WINFIELD AREA HFH PO BOX 335 WINFIELD, KS 67156-0335	48-1129544	501(C)(3)	9,801.		N/A	N/A	HOME BUILDING
(2)	ARKANSAS CITY, HFH OF PO BOX 401 ARKANSAS CITY, KS 67005-0401	48-1238945	501(C)(3)	5,421.		N/A	N/A	HOME BUILDING
(3)	NEW CASTLE COUNTY, HFH OF 1920 HUTTON ST WILMINGTON, DE 19802-4905	51-0294138	501(C)(3)	190,845.		N/A	N/A	HOME BUILDING
(4)	SUSSEX COUNTY HFH PO BOX 759 GEORGETOWN, DE 19947-0759	51-0334057	501(C)(3)	33,042.		N/A	N/A	HOME BUILDING
(5)	CENTRAL DELAWARE HFH PO BOX 63 DOVER, DE 19903-0063	51-0376650	501(C)(3)	15,615.		N/A	N/A	HOME BUILDING
(6)	MARIPOSA CO., HFH OF PO BOX 1420 MARIPOSA, CA 95338	51-0665314	501(C)(3)	17,183.		N/A	N/A	HOME BUILDING
(7)	CHESAPEAKE, HFH OF THE 3741 COMMERCE DR ST 309 BALTIMORE, MD 21227	52-1226188	501(C)(3)	920,162.		N/A	N/A	HOME BUILDING
(8)	MONTGOMERY CO., MARYLAND, HFH OF 9110 GAITHER RD GAITHERSBURG, MD 20877-1422	52-1299516	501(C)(3)	71,036.		N/A	N/A	HOME BUILDING
(9)	PENINSULA AND GREATER WILLIAMSBURG, HFH PO BOX 1443 NEWPORT NEWS, VA 23601-0443	52-1431619	501(C)(3)	193,662.		N/A	N/A	HOME BUILDING
(10)	WICOMICO CO, INC., HFH OF 908 W ISABELLA ST SALISBURY, MD 21801	52-1522421	501(C)(3)	19,016.		N/A	N/A	HOME BUILDING
(11)	WASHINGTON, DC, INC., HFH OF 2115 WARD CT NW WASHINGTON, DC 20037-1209	52-1589700	501(C)(3)	730,725.		N/A	N/A	HOME BUILDING
(12)	SANDTOWN HFH 1300 N FULTON AVE BALTIMORE, MD 21217-1528	52-1617458	501(C)(3)	109,956.		N/A	N/A	HOME BUILDING

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(1)	WESTERN MONMOUTH HFH PO BOX 62 FREEHOLD, NJ 07728-0062	52-1737417	501(C)(3)	15,009.		N/A	N/A	HOME BUILDING
(2)	CHOPTANK, INC., HFH PO BOX 2366 EASTON, MD 21601-8946	52-1785188	501(C)(3)	24,546.		N/A	N/A	HOME BUILDING
(3)	FREDERICK COUNTY MD, INC., HFH OF 2 E CHURCH ST 3RD FL FREDERICK, MD 21701	52-1820647	501(C)(3)	19,258.		N/A	N/A	HOME BUILDING
(4)	WASHINGTON COUNTY HFH 100 CHARLES ST HAGERSTOWN, MD 21740	52-1825698	501(C)(3)	50,556.		N/A	N/A	HOME BUILDING
(5)	SUSQUEHANNA, HFH 205 S HAYS ST BEL AIR, MD 21014-3646	52-1848933	501(C)(3)	76,135.		N/A	N/A	HOME BUILDING
(6)	WORCESTER CO, INC., HFH OF PO BOX 1327 BERLIN, MD 21811-5327	52-1925502	501(C)(3)	11,228.		N/A	N/A	HOME BUILDING
(7)	HOWARD COUNTY, HFH OF 9192 RED BR RD STE 150 COLUMBIA, MD 21045	52-2189848	501(C)(3)	15,268.		N/A	N/A	HOME BUILDING
(8)	ROANOKE VALLEY, HFH IN THE 403 SALEM AVE SW ROANOKE, VA 24016	54-1375465	501(C)(3)	148,330.		N/A	N/A	HOME BUILDING
(9)	CENTRAL VALLEY HFH PO BOX 245 BRIDGEWATER, VA 22812-0245	54-1441871	501(C)(3)	21,227.		N/A	N/A	HOME BUILDING
(10)	LYNCHBURG HFH, GREATER 360 ALLEGHANY AVE LYNCHBURG, VA 24501	54-1464802	501(C)(3)	22,169.		N/A	N/A	HOME BUILDING
(11)	MARTINSVILLE & HENRY CO., HFH 932 STARLING AVE MARTINSVILLE, VA 24112	54-1466890	501(C)(3)	7,257.		N/A	N/A	HOME BUILDING
(12)	SOUTH HAMPTON ROADS, INC.; HFH OF 900 TIDEWATER DR NORFOLK, VA 23504	54-1476409	501(C)(3)	93,950.		N/A	N/A	HOME BUILDING

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(1)	EASTERN SHORE OF VIRGINIA HFH PO BOX 1299 EXMORE, VA 23350-1299	54-1483482	501(C)(3)	22,697.		N/A	N/A	HOME BUILDING
(2)	ROCKBRIDGE AREA HFH PO BOX 1596 LEXINGTON, VA 24450-1596	54-1483949	501(C)(3)	60,915.		N/A	N/A	HOME BUILDING
(3)	HANOVER HFH 8177 MECHANICSVILLE TPKE M.VILLE, VA 23111	54-1541798	501(C)(3)	30,095.		N/A	N/A	HOME BUILDING
(4)	NORTHERN VIRGINIA, HFH OF 716 S GLEBE RD ARLINGTON, VA 22204	54-1547367	501(C)(3)	163,882.		N/A	N/A	HOME BUILDING
(5)	CHARLOTTESVILLE HFH, GREATER PO BOX 7305 CHARLOTTESVILLE, VA 22906-7305	54-1574925	501(C)(3)	75,198.		N/A	N/A	HOME BUILDING
(6)	DANVILLE & PITTSYLVANIA CO HFH PO BOX 718 DANVILLE, VA 24543-0718	54-1587929	501(C)(3)	47,513.		N/A	N/A	HOME BUILDING
(7)	FAUQUIER HFH PO BOX 3189 WARRENTON, VA 20188-1889	54-1595774	501(C)(3)	16,344.		N/A	N/A	HOME BUILDING
(8)	FARMVILLE AREA HFH PO BOX 816 FARMVILLE, VA 23901	54-1599433	501(C)(3)	39,467.		N/A	N/A	HOME BUILDING
(9)	FLUVANNA COUNTY HFH, THE PO BOX 276 PALMYRA, VA 22963-0276	54-1640558	501(C)(3)	8,085.		N/A	N/A	HOME BUILDING
(10)	STAUNTON-AUGUSTA-WAYNESBORO HFH PO BOX 3188 STAUNTON, VA 24402-3188	54-1648901	501(C)(3)	37,805.		N/A	N/A	HOME BUILDING
(11)	TRI-CITIES HFH PO BOX 3707 PETERSBURG, VA 23805-3707	54-1662947	501(C)(3)	11,154.		N/A	N/A	HOME BUILDING
(12)	LOUDOUN HFH 109 HARRISON ST NE LEESBURG, VA 20176	54-1666448	501(C)(3)	13,008.		N/A	N/A	HOME BUILDING

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(1)	NELSON COUNTY HFH PO BOX 338 NELLYSFORD, VA 22958-0338	54-1679791	501 (C) (3)	6,952.		N/A	N/A	HOME BUILDING
(2)	PAGE COUNTY HFH PO BOX 613 LURAY, VA 22835-0613	54-1688813	501 (C) (3)	15,982.		N/A	N/A	HOME BUILDING
(3)	PRINCE WILLIAM CO-MAN & MAN, HFH OF 9506 CTR ST MANASSAS, VA 20110	54-1721394	501 (C) (3)	14,820.		N/A	N/A	HOME BUILDING
(4)	FREDERICKSBURG HFH, GREATER PO BOX 8265 FREDERICKSBURG, VA 22404-8265	54-1737851	501 (C) (3)	7,200.		N/A	N/A	HOME BUILDING
(5)	APPOMATTOX COUNTY HFH PO BOX 205 APPOMATTOX, VA 24522-0205	54-1799256	501 (C) (3)	8,259.		N/A	N/A	HOME BUILDING
(6)	LANCASTER/NORTHUMBERLAND HFH PO BOX 908 KILMARNOCK, VA 22482-0908	54-1810325	501 (C) (3)	5,513.		N/A	N/A	HOME BUILDING
(7)	WINCHESTER-FREDERICK COUNTY INC., HFH OF PO BOX 1653 WINCHESTER, VA 22604	54-1816368	501 (C) (3)	25,011.		N/A	N/A	HOME BUILDING
(8)	WASHINGTON COUNTY (VA) HFH PO BOX 245 GLADE SPRING, VA 24340-0245	54-1886761	501 (C) (3)	7,042.		N/A	N/A	HOME BUILDING
(9)	POWHATAN HFH PO BOX 416 POWHATAN, VA 23139-0416	54-2018476	501 (C) (3)	13,282.		N/A	N/A	HOME BUILDING
(10)	KANAWHA AND PUTNAM COUNTY, HFH OF 815 CT ST CHARLESTON, WV 25301-0160	55-0679539	501 (C) (3)	44,877.		N/A	N/A	HOME BUILDING
(11)	ALMOST HEAVEN HFH PO BOX 913 FRANKLIN, WV 26807-0913	55-0685778	501 (C) (3)	110,672.		N/A	N/A	HOME BUILDING
(12)	HUNTINGTON (WV) AREA HFH PO BOX 2526 HUNTINGTON, WV 25726-2526	55-0697541	501 (C) (3)	23,618.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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

Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	MON COUNTY HFH 209 GREENBAG RD MORGANTOWN, WV 26501	55-0701426	501(C)(3)	14,003.		N/A	N/A	HOME BUILDING
(2)	WOOD COUNTY HFH PO BOX 462 PARKERSBURG, WV 26102-0462	55-0705729	501(C)(3)	48,922.		N/A	N/A	HOME BUILDING
(3)	PITT COUNTY, HFH OF PO BOX 514 GREENVILLE, NC 27835-0514	56-0702710	501(C)(3)	14,327.		N/A	N/A	HOME BUILDING
(4)	ASHEVILLE AREA HFH 33 MEADOW RD ASHEVILLE, NC 28803-2652	56-1363464	501(C)(3)	214,346.		N/A	N/A	HOME BUILDING
(5)	CHARLOTTE, HFH OF PO BOX 220287 CHARLOTTE, NC 28222	56-1366233	501(C)(3)	211,737.		N/A	N/A	HOME BUILDING
(6)	FORSYTH COUNTY, HFH OF 339 WITT ST WINSTON SALEM, NC 27103-1953	56-1448955	501(C)(3)	128,237.		N/A	N/A	HOME BUILDING
(7)	IREDELL COUNTY, HFH OF 1382 A SHELTON AVE STATESVILLE, NC 28677	56-1486033	501(C)(3)	51,450.		N/A	N/A	HOME BUILDING
(8)	WAKE COUNTY, HFH OF 2420 RALEIGH BLVD RALEIGH, NC 27604	56-1492703	501(C)(3)	273,411.		N/A	N/A	HOME BUILDING
(9)	NORTHWEST INDIANA HFH 6114 W RDG RD GARY, IN 46408	56-1525939	501(C)(3)	43,352.		N/A	N/A	HOME BUILDING
(10)	HALIFAX/NORTHAMPTON HFH 14 E 2ND ST ROANOKE RAPIDS, NC 27870	56-1549919	501(C)(3)	7,062.		N/A	N/A	HOME BUILDING
(11)	CAPE FEAR HFH 20 N 4TH ST STE 200 WILMINGTON, NC 28401	56-1555858	501(C)(3)	78,626.		N/A	N/A	HOME BUILDING
(12)	HIGH POINT, ARCHDALE & TRINITY; HFH OF PO BOX 6675 HIGH POINT, NC 27262-6675	56-1572185	501(C)(3)	29,916.		N/A	N/A	HOME BUILDING

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Department of the Treasury
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Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

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(1)	RUTHERFORD COUNTY HFH PO BOX 1534 RUTHERFORDTON, NC 28139-1534	56-1581336	501(C)(3)	18,238.		N/A	N/A	HOME BUILDING
(2)	GREENSBORO, HFH OF GREATER PO BOX 3402 GREENSBORO, NC 27402-3402	56-1586870	501(C)(3)	279,613.		N/A	N/A	HOME BUILDING
(3)	STANLY COUNTY HFH 1506 NC 24 27 HIGHWAY ALBEMARLE, NC 28001	56-1588971	501(C)(3)	13,829.		N/A	N/A	HOME BUILDING
(4)	THOMASVILLE AREA, HFH OF PO BOX 1072 THOMASVILLE, NC 27361-1072	56-1595148	501(C)(3)	17,253.		N/A	N/A	HOME BUILDING
(5)	SANDHILLS, HFH OF THE NC 2268 NC HIGHWAY 5 ABERDEEN, NC 28315	56-1596170	501(C)(3)	129,215.		N/A	N/A	HOME BUILDING
(6)	ALAMANCE COUNTY, N.C., INC., HFH OF PO BOX 5036 BURLINGTON, NC 27216-5036	56-1597641	501(C)(3)	39,873.		N/A	N/A	HOME BUILDING
(7)	BURKE COUNTY, HFH OF PO BOX 352 MORGANTON, NC 28680-0352	56-1608119	501(C)(3)	33,540.		N/A	N/A	HOME BUILDING
(8)	FAYETTEVILLE AREA HFH PO BOX 3166 FAYETTEVILLE, NC 28302-3166	56-1610250	501(C)(3)	35,123.		N/A	N/A	HOME BUILDING
(9)	LEXINGTON AREA, HFH OF THE PO BOX 543 LEXINGTON, NC 27293-0543	56-1627729	501(C)(3)	45,916.		N/A	N/A	HOME BUILDING
(10)	GASTON CO, HFH OF 1840 E FRANKLIN BLVD GASTONIA, NC 28054	56-1634454	501(C)(3)	84,203.		N/A	N/A	HOME BUILDING
(11)	HENDERSON COUNTY HFH 1111 KEITH ST HENDERSONVILLE, NC 28792	56-1642263	501(C)(3)	75,118.		N/A	N/A	HOME BUILDING
(12)	MATTHEWS, HFH OF PO BOX 2008 MATTHEWS, NC 28106-2008	56-1653614	501(C)(3)	20,194.		N/A	N/A	HOME BUILDING

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Grants and Other Assistance to Organizations,
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(1)	CRYSTAL COAST HFH PO BOX 789 NEWPORT, NC 28570	56-1657193	501(C)(3)	40,798.		N/A	N/A	HOME BUILDING
(2)	CRAVEN COUNTY NC, HFH OF 930 POLLOCK ST NEW BERN, NC 28560	56-1658230	501(C)(3)	12,241.		N/A	N/A	HOME BUILDING
(3)	WATAUGA COUNTY HFH PO BOX 33 DTS BOONE, NC 28607-0033	56-1659213	501(C)(3)	7,498.		N/A	N/A	HOME BUILDING
(4)	REIDSVILLE HFH, GREATER PO BOX 2593 REIDSVILLE, NC 27323-2593	56-1667735	501(C)(3)	8,996.		N/A	N/A	HOME BUILDING
(5)	HAYWOOD HFH PO BOX 283 WAYNESVILLE, NC 28786-0283	56-1668353	501(C)(3)	13,628.		N/A	N/A	HOME BUILDING
(6)	BEAUFORT COUNTY, HFH OF PO BOX 549 WASHINGTON, NC 27889-0549	56-1677014	501(C)(3)	6,090.		N/A	N/A	HOME BUILDING
(7)	CABARRUS COUNTY, HFH PO BOX 1502 CONCORD, NC 28026-6001	56-1678395	501(C)(3)	31,307.		N/A	N/A	HOME BUILDING
(8)	ROWAN COUNTY, HFH OF PO BOX 3356 SALISBURY, NC 28145-3356	56-1687483	501(C)(3)	80,226.		N/A	N/A	HOME BUILDING
(9)	CHATHAM HFH PO BOX 883 PITTSBORO, NC 27312-0883	56-1689599	501(C)(3)	99,948.		N/A	N/A	HOME BUILDING
(10)	UNION COUNTY HFH PO BOX 1688 MONROE, NC 28111-1688	56-1704668	501(C)(3)	238,896.		N/A	N/A	HOME BUILDING
(11)	OUR TOWNS OF NORTH MECKLENBURG-SOUTH IRE PO BOX 1088 DAVIDSON, NC 28036-1088	56-1733643	501(C)(3)	195,354.		N/A	N/A	HOME BUILDING
(12)	MITCHELL-YANCEY HFH PO BOX 409 MICAVILLE, NC 28755-0409	56-1760322	501(C)(3)	9,208.		N/A	N/A	HOME BUILDING

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(1)	CALDWELL COUNTY HFH PO BOX 1341 LENOR, NC 28645-1341	56-1760354	501(C)(3)	103,091.		N/A	N/A	HOME BUILDING
(2)	JOHNSTON COUNTY, HFH OF PO BOX 2057 SMITHEFIELD, NC 27577-2057	56-1760884	501(C)(3)	9,177.		N/A	N/A	HOME BUILDING
(3)	SCOTLAND COUNTY, HFH OF 12340 MCCOLL RD LAURINBURG, NC 28352-7968	56-1766917	501(C)(3)	5,181.		N/A	N/A	HOME BUILDING
(4)	AVERY COUNTY HFH PO BOX 1016 NEWLAND, NC 28657-1016	56-1826422	501(C)(3)	65,271.		N/A	N/A	HOME BUILDING
(5)	MOUNT AIRY AREA HFH, INC., GREATER PO BOX 6449 MOUNT AIRY, NC 27030-6449	56-1844063	501(C)(3)	48,489.		N/A	N/A	HOME BUILDING
(6)	DAVIE COUNTY HFH PO BOX 1384 MOCKSVILLE, NC 27028-1384	56-1865026	501(C)(3)	10,210.		N/A	N/A	HOME BUILDING
(7)	BRUNSWICK COUNTY HFH 4255 LONG BCH RD OAK ISLAND, NC 28465	56-1869247	501(C)(3)	33,788.		N/A	N/A	HOME BUILDING
(8)	RANDOLPH COUNTY, HFH OF PO BOX 669 ASHEBORO, NC 27204-0669	56-1976925	501(C)(3)	23,158.		N/A	N/A	HOME BUILDING
(9)	ALEXANDER COUNTY HFH PO BOX 565 TAYLORSVILLE, NC 28681-0565	56-2085600	501(C)(3)	7,563.		N/A	N/A	HOME BUILDING
(10)	GOLDSBORO-WAYNE, INC. HFH OF 131 E WALNUT ST GOLDSBORO, NC 27530	56-2273434	501(C)(3)	178,264.		N/A	N/A	HOME BUILDING
(11)	PICKENS COUNTY HFH PO BOX 330 PICKENS, SC 29671	57-0725702	501(C)(3)	27,090.		N/A	N/A	HOME BUILDING
(12)	CENTRAL SOUTH CAROLINA HFH 209 S SUMTER ST COLUMBIA, SC 29201-4558	57-0785521	501(C)(3)	90,064.		N/A	N/A	HOME BUILDING

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(1)	OCONEE COUNTY HFH PO BOX 685 SENECA, SC 29679-0685	57-0826412	501(C)(3)	30,420.		N/A	N/A	HOME BUILDING
(2)	GREENVILLE COUNTY, HFH OF PO BOX 1206 GREENVILLE, SC 29602-1206	57-0827063	501(C)(3)	97,788.		N/A	N/A	HOME BUILDING
(3)	ANDERSON, INC., HFH OF 210 S MURRAY AVE ANDERSON, SC 29624	57-0829082	501(C)(3)	11,862.		N/A	N/A	HOME BUILDING
(4)	SUMTER HFH PO BOX 2746 SUMTER, SC 29151-2746	57-0835811	501(C)(3)	5,655.		N/A	N/A	HOME BUILDING
(5)	SEA ISLAND HFH 2545 BOHICKET RD JOHNS ISLAND, SC 29455	57-0840667	501(C)(3)	199,739.		N/A	N/A	HOME BUILDING
(6)	SPARTANBURG, HFH OF 2270 S PNE ST SPARTANBURG, SC 29302	57-0849669	501(C)(3)	19,156.		N/A	N/A	HOME BUILDING
(7)	YORK COUNTY, INC., HFH PO BOX 4255 ROCK HILL, SC 29732	57-0861107	501(C)(3)	24,447.		N/A	N/A	HOME BUILDING
(8)	AIKEN COUNTY HFH PO BOX 3323 AIKEN, SC 29802-3323	57-0861362	501(C)(3)	28,252.		N/A	N/A	HOME BUILDING
(9)	GREENWOOD AREA HFH PO BOX 68 GREENWOOD, SC 29648-0068	57-0861424	501(C)(3)	9,213.		N/A	N/A	HOME BUILDING
(10)	COLLETON HFH PO BOX 887 WALTERBORO, SC 29488-0009	57-0894246	501(C)(3)	7,631.		N/A	N/A	HOME BUILDING
(11)	EAST COOPER HFH PO BOX 1990 MOUNT PLEASANT, SC 29465-1990	57-0903917	501(C)(3)	48,965.		N/A	N/A	HOME BUILDING
(12)	BERKELEY COUNTY, HFH OF 408 S LIVE OAK DR MONCKS CORNER, SC 29461	57-0907019	501(C)(3)	18,210.		N/A	N/A	HOME BUILDING

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(1)	HORRY COUNTY, HFH OF PO BOX 2492 MYRTLE BEACH, SC 29578-2492	57-0912014	501(C)(3)	134,431.		N/A	N/A	HOME BUILDING
(2)	GEORGETOWN COUNTY, SC, HFH PO BOX 2411 GEORGETOWN, SC 29442-2411	57-0913768	501(C)(3)	20,398.		N/A	N/A	HOME BUILDING
(3)	HILTON HEAD REGIONAL HFH 21 BRENDAN LN BLUFFTON, SC 29910-7603	57-0916245	501(C)(3)	57,615.		N/A	N/A	HOME BUILDING
(4)	EDISTO HFH PO BOX 2489 ORANGEBURG, SC 29116-2489	57-0916444	501(C)(3)	9,144.		N/A	N/A	HOME BUILDING
(5)	LOWCOUNTRY HFH 616 PARRIS IS GTWY BEAUFORT, SC 29906	57-0920920	501(C)(3)	28,788.		N/A	N/A	HOME BUILDING
(6)	CHEROKEE COUNTY, HFH OF PO BOX 51 GAFFNEY, SC 29342-0051	57-0942059	501(C)(3)	10,579.		N/A	N/A	HOME BUILDING
(7)	DORCHESTER HFH 101 GREYBACK RD SUMMERVILLE, SC 29483	57-0978123	501(C)(3)	13,773.		N/A	N/A	HOME BUILDING
(8)	MARION COUNTY, HFH OF PO BOX 873 MARION, SC 29571-0873	57-1009097	501(C)(3)	11,632.		N/A	N/A	HOME BUILDING
(9)	CLARENDON HFH 8 N BRKS ST MANNING, SC 29102	57-1015546	501(C)(3)	8,679.		N/A	N/A	HOME BUILDING
(10)	DARLINGTON COUNTY HFH PO BOX 1983 HARTSVILLE, SC 29551-1983	57-1054251	501(C)(3)	38,394.		N/A	N/A	HOME BUILDING
(11)	NORTH AUGUSTA, INC, HFH OF PO BOX 8121 NORTH AUGUSTA, SC 29861-8121	57-1094272	501(C)(3)	8,458.		N/A	N/A	HOME BUILDING
(12)	BUENA VISTA, HFH OF PO BOX 853 STORM LAKE, IA 50588-0853	58-1235159	501(C)(3)	5,421.		N/A	N/A	HOME BUILDING

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	ATLANTA HFH 519 MEMORIAL DR SE ATLANTA, GA 30312-2218	58-1535414	501(C)(3)	420,105.		N/A	N/A	HOME BUILDING
(2)	COASTAL EMPIRE HFH PO BOX 13211 SAVANNAH, GA 31416-0211	58-1537535	501(C)(3)	67,262.		N/A	N/A	HOME BUILDING
(3)	ROME AND FLOYD COUNTY HFH, INC 10 CENTRAL PLZ ROME, GA 30161	58-1584129	501(C)(3)	11,618.		N/A	N/A	HOME BUILDING
(4)	ORANGE COUNTY, NC, HFH 88 VILCOM CENTER DR CHAPEL HILL, NC 27514	58-1603427	501(C)(3)	182,784.		N/A	N/A	HOME BUILDING
(5)	NASHVILLE AREA HFH 1006 8TH AVE S NASHVILLE, TN 37203	58-1636286	501(C)(3)	728,301.		N/A	N/A	HOME BUILDING
(6)	CATAWBA VALLEY, HFH OF PO BOX 9475 HICKORY, NC 28603-9475	58-1652358	501(C)(3)	18,712.		N/A	N/A	HOME BUILDING
(7)	PICKENS CO, INC., HFH 135 CARES DR JASPER, GA 30143	58-1655353	501(C)(3)	96,535.		N/A	N/A	HOME BUILDING
(8)	NORTHEAST GEORGIA, HFH OF PO BOX 982 CLARKESVILLE, GA 30523-0017	58-1667383	501(C)(3)	18,655.		N/A	N/A	HOME BUILDING
(9)	MACON AREA HFH 690 HOLT AVE MACON, GA 31204	58-1674696	501(C)(3)	19,874.		N/A	N/A	HOME BUILDING
(10)	DURHAM, INC., HFH OF 215 N CHURCH ST DURHAM, NC 27701	58-1674794	501(C)(3)	288,280.		N/A	N/A	HOME BUILDING
(11)	NW METRO ATLANTA, HFH 1625 SPG RD SE SMYRNA, GA 30080-3774	58-1686320	501(C)(3)	101,243.		N/A	N/A	HOME BUILDING
(12)	AUGUSTA/CSRA HFH PO BOX 657 AUGUSTA, GA 30903-0657	58-1712416	501(C)(3)	10,257.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations
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Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Employer identification number

91-1914868

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(1)	KNOXVILLE HFH PO BOX 27478 KNOXVILLE, TN 37927-7478	58-1727980	501(C)(3)	366,872.		N/A	N/A	HOME BUILDING
(2)	METRO LOUISVILLE, HFH OF 1620 BANK ST LOUISVILLE, KY 40203	58-1735528	501(C)(3)	188,714.		N/A	N/A	HOME BUILDING
(3)	TACOMA/PIERCE COUNTY HFH 4824 SOUTH TACOMA WAY TACOMA, WA 98409	58-1735531	501(C)(3)	357,538.		N/A	N/A	HOME BUILDING
(4)	WICHITA HFH, INC. PO BOX 114 WICHITA, KS 67201-0114	58-1735540	501(C)(3)	352,675.		N/A	N/A	HOME BUILDING
(5)	HARRISBURG AREA, HFH OF GTR 900 S ARLINGTON AVE HARRISBURG, PA 17109	58-1735541	501(C)(3)	38,648.		N/A	N/A	HOME BUILDING
(6)	SAINT LOUIS, HFH 3763 FRST PARK AVE SAINT LOUIS, MO 63108	58-1735543	501(C)(3)	377,201.		N/A	N/A	HOME BUILDING
(7)	WAYNE COUNTY, INC., HFH IN 1451 SPRUCE ST EXT WOOSTER, OH 44691	58-1735548	501(C)(3)	5,846.		N/A	N/A	HOME BUILDING
(8)	VALDOSTA-LOWNDES CO. HFH 2010 E CYPRESS ST VALDOSTA, GA 31601	58-1743206	501(C)(3)	44,729.		N/A	N/A	HOME BUILDING
(9)	SOUTHERN CRESCENT HFH 9570 TARA BLVD JONESBORO, GA 30236	58-1761611	501(C)(3)	216,583.		N/A	N/A	HOME BUILDING
(10)	WEST GEORGIA HFH PO BOX 85 CARROLLTON, GA 30112-0002	58-1786486	501(C)(3)	5,951.		N/A	N/A	HOME BUILDING
(11)	DEKALB, INC., HFH- PO BOX 1681 DECATUR, GA 30031-1681	58-1792761	501(C)(3)	14,754.		N/A	N/A	HOME BUILDING
(12)	GWINNETT COUNTY HFH PO BOX 870408 STONE MOUNTAIN, GA 30087	58-1795694	501(C)(3)	163,022.		N/A	N/A	HOME BUILDING

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Department of the Treasury
Internal Revenue Service

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

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Name of the organization

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(1)	ATHENS AREA HFH PO BOX 1261 ATHENS, GA 30603-1261	58-1809143	501(C)(3)	17,241.		N/A	N/A	HOME BUILDING
(2)	HALL COUNTY, HFH OF PO BOX 2514 GAINESVILLE, GA 30503	58-1849321	501(C)(3)	18,227.		N/A	N/A	HOME BUILDING
(3)	GLYNN COUNTY, HFH OF PO BOX 296 BRUNSWICK, GA 31521-0296	58-1852944	501(C)(3)	12,631.		N/A	N/A	HOME BUILDING
(4)	TROUP COUNTY, INC., HFH, PO BOX 327 LAGRANGE, GA 30241-0006	58-1913989	501(C)(3)	9,905.		N/A	N/A	HOME BUILDING
(5)	CLEVELAND, HFH OF PO BOX 303 CLEVELAND, TN 37364-0303	58-1916544	501(C)(3)	69,599.		N/A	N/A	HOME BUILDING
(6)	BULLOCH COUNTY, HFH OF PO BOX 1253 STATESBORO, GA 30459-1253	58-1933723	501(C)(3)	40,887.		N/A	N/A	HOME BUILDING
(7)	HOUSTON COUNTY HFH PO BOX 7506 WARNER ROBINS, GA 31095-7506	58-1934945	501(C)(3)	7,392.		N/A	N/A	HOME BUILDING
(8)	NEWNAN-COWETA HFH PO BOX 2607 NEWNAN, GA 30264-2541	58-2031156	501(C)(3)	78,054.		N/A	N/A	HOME BUILDING
(9)	CATOOSA COUNTY, HFH OF PO BOX 490 RINGGOLD, GA 30736-0490	58-2088327	501(C)(3)	8,595.		N/A	N/A	HOME BUILDING
(10)	HART COUNTY HFH, INC. PO BOX 146 HARTWELL, GA 30643-0146	58-2144738	501(C)(3)	6,515.		N/A	N/A	HOME BUILDING
(11)	NORTH CENTRAL GEORGIA, HFH 814 MIMOSA BLVD BLDG C ROSWELL, GA 30075	58-2157723	501(C)(3)	311,849.		N/A	N/A	HOME BUILDING
(12)	TOWNS/UNION COUNTIES, HFH PO BOX 270 YOUNG HARRIS, GA 30582-0270	58-2207157	501(C)(3)	29,827.		N/A	N/A	HOME BUILDING

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Department of the Treasury
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Grants and Other Assistance to Organizations,
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(1)	EFFINGHAM COUNTY, HFH OF PO BOX 578 SPRINGFIELD, GA 31329-0578	58-2244182	501(C)(3)	13,747.		N/A	N/A	HOME BUILDING
(2)	GREENE COUNTY HFH PO BOX 321 GREENSBORO, GA 30642-0321	58-2244226	501(C)(3)	19,434.		N/A	N/A	HOME BUILDING
(3)	CAMDEN COUNTY, HFH OF 302 S LEE ST KINGSLAND, GA 31548	58-2331486	501(C)(3)	16,958.		N/A	N/A	HOME BUILDING
(4)	PUTNAM, HFH OF 104 WHITNEY ST EATONTON, GA 31024	58-2344787	501(C)(3)	11,629.		N/A	N/A	HOME BUILDING
(5)	NEW HORIZONS HFH OF GTR SUMTER 512 SPRING ST AMERICUS, GA 31709-3425	58-2361522	501(C)(3)	19,385.		N/A	N/A	HOME BUILDING
(6)	CLAY COUNTY HFH PO BOX 240 ORANGE PARK, FL 32067-0240	59-1748850	501(C)(3)	12,012.		N/A	N/A	HOME BUILDING
(7)	COLLIER COUNTY, HFH OF 11145 TAMiami Trl E NAPLES, FL 34113	59-1834379	501(C)(3)	1,655,010.		N/A	N/A	HOME BUILDING
(8)	PENSACOLA HFH CENTRAL AMERICA PENSACOLA, FL 32591-3204	59-2186044	501(C)(3)	6,170,715.		N/A	N/A	HOME BUILDING
(9)	LEE AND HENDRY COUNTIES, INC., HFH OF CENTRAL AMERICA N FORT MYERS, FL 33903	59-2236174	501(C)(3)	7,797.		N/A	N/A	HOME BUILDING
(10)	BIG BEND HFH (FL) 2921 ROBERTS AVE TALLAHASSEE, FL 32310-5007	59-2252756	501(C)(3)	68,599.		N/A	N/A	HOME BUILDING
(11)	BROWARD, INC., HFH OF 3564 N OCEAN BLVD FORT LAUDERDALE, FL 33308	59-2320573	501(C)(3)	161,279.		N/A	N/A	HOME BUILDING
(12)	SARASOTA, HFH 1757 EAST AVE SARASOTA, FL 34234	59-2495597	501(C)(3)	10,806.		N/A	N/A	HOME BUILDING

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(1)	PINELLAS HFH 13355 49TH ST N CLEARWATER, FL 33762	59-2509116	501(C)(3)	178,754.		N/A	N/A	HOME BUILDING
(2)	HALIFAX HFH 826 WHITE ST DAYTONA BEACH, FL 32117-4620	59-2687200	501(C)(3)	40,634.		N/A	N/A	HOME BUILDING
(3)	ALACHUA HFH 2317 SW 13TH ST GAINESVILLE, FL 32608-2006	59-2750078	501(C)(3)	14,452.		N/A	N/A	HOME BUILDING
(4)	ORLANDO AREA, HFH OF GREATER 1925 TRAYLOR BLVD ORLANDO, FL 32804-4713	59-2789167	501(C)(3)	149,426.		N/A	N/A	HOME BUILDING
(5)	MARTIN COUNTY, INC., HFH OF 2555 SE BONITA ST STUART, FL 34997-5007	59-2816698	501(C)(3)	21,181.		N/A	N/A	HOME BUILDING
(6)	HILLSBOROUGH CO FLORIDA, INC., HFH OF 3736 E HILLSBOROUGH AVE TAMPA, FL 33610	59-2850410	501(C)(3)	34,971.		N/A	N/A	HOME BUILDING
(7)	EAST POLK CO, HFH OF 3550 RECKER HIGHWAY WINTER HAVEN, FL 33880	59-2856392	501(C)(3)	17,637.		N/A	N/A	HOME BUILDING
(8)	CHARLOTTE COUNTY HFH 1750 MANZANA AVE PUNTA GORDA, FL 33950	59-2870908	501(C)(3)	98,764.		N/A	N/A	HOME BUILDING
(9)	BREVARD COUNTY, HFH OF 7815 ELLIS RD MELBOURNE, FL 32904	59-2879155	501(C)(3)	52,816.		N/A	N/A	HOME BUILDING
(10)	JACKSONVILLE, INC., HFH OF C/O DBA HABIJAX HFH JACKSONVILLE, FL 32206	59-2880071	501(C)(3)	379,730.		N/A	N/A	HOME BUILDING
(11)	WEST VOLUSIA HFH 604 S SPG GDN AVE DELAND, FL 32720	59-2894153	501(C)(3)	28,395.		N/A	N/A	HOME BUILDING
(12)	JACKSON COUNTY HFH PO BOX 6114 MARIANNA, FL 32447-6114	59-2900901	501(C)(3)	11,409.		N/A	N/A	HOME BUILDING

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(1)	SOUTHEAST VOLUSIA HFH PO BOX 1468 NEW SMYRNA BEACH, FL 32170-1468	59-2934915	501(C)(3)	98,529.		N/A	N/A	HOME BUILDING
(2)	LAKE-SUMTER FL, INC; HFH PO BOX 186 EUSTIS, FL 32727-0186	59-2958036	501(C)(3)	40,749.		N/A	N/A	HOME BUILDING
(3)	MARION CO, INC., HFH OF PO BOX 5578 OCALA, FL 34478	59-2992077	501(C)(3)	42,751.		N/A	N/A	HOME BUILDING
(4)	LAKELAND HFH 1317 GEORGE JENKINS BLVD LAKELAND, FL 33815	59-3000422	501(C)(3)	31,582.		N/A	N/A	HOME BUILDING
(5)	WEST PASCO HFH 4131 MADISON ST NEW PORT RICHEY, FL 34652	59-3000450	501(C)(3)	29,452.		N/A	N/A	HOME BUILDING
(6)	PUTNAM HFH PO BOX 2433 PALATKA, FL 32177	59-3008349	501(C)(3)	9,960.		N/A	N/A	HOME BUILDING
(7)	SOUTHWEST VOLUSIA HFH PO BOX 740166 ORANGE CITY, FL 32774-0166	59-3010455	501(C)(3)	44,529.		N/A	N/A	HOME BUILDING
(8)	HIGHLANDS COUNTY HFH 159 S COMMERCE AVE SEBRING, FL 33870-3602	59-3023727	501(C)(3)	24,747.		N/A	N/A	HOME BUILDING
(9)	SEMINOLE COUNTY, HFH IN 1100 AMERICANA BLVD SANFORD, FL 32773-8027	59-3034059	501(C)(3)	25,220.		N/A	N/A	HOME BUILDING
(10)	OKALOOSA COUNTY, HFH IN 99 EGLIN PKWY FT WALTON BEACH, FL 32548	59-3066029	501(C)(3)	17,559.		N/A	N/A	HOME BUILDING
(11)	ST. AUGUSTINE/ST. JOHN'S COUNTY, HFH OF 7 HOPKINS ST SAINT AUGUSTINE, FL 32084-4001	59-3129794	501(C)(3)	32,799.		N/A	N/A	HOME BUILDING
(12)	CITRUS COUNTY, HFH OF PO BOX 1041 CRYSTAL RIVER, FL 34423-1041	59-3136342	501(C)(3)	42,263.		N/A	N/A	HOME BUILDING

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(1)	FLAGLER HFH PO BOX 187 BUNNELL, FL 32110	59-3172803	501(C)(3)	30,948.		N/A	N/A	HOME BUILDING
(2)	HERNANDO COUNTY, HFH OF PO BOX 15389 BROOKSVILLE, FL 34604	59-3192261	501(C)(3)	5,301.		N/A	N/A	HOME BUILDING
(3)	EAST & CENTRAL PASCO COUNTY, INC., HFH OF 15000 CITRUS COUNTRY DR DADE CITY, FL 33523	59-3252298	501(C)(3)	11,411.		N/A	N/A	HOME BUILDING
(4)	OSCEOLA COUNTY, INC, HFH OF 2340N ORANGE BLOSSOM TL KISSIMEE, FL 34744	59-3362072	501(C)(3)	40,644.		N/A	N/A	HOME BUILDING
(5)	PALM BEACH COUNTY, HFH OF 6758 N MILITARY TRL W PALM BEACH, FL 33407	59-3525576	501(C)(3)	91,331.		N/A	N/A	HOME BUILDING
(6)	LEXINGTON HFH 700 E LOUDON AVE LEXINGTON, KY 40505-3622	61-1139529	501(C)(3)	323,753.		N/A	N/A	HOME BUILDING
(7)	OWENSBORO/DAVIESS COUNTY, HFH 1702 MOSELEY ST OWENSBORO, KY 42303	61-1140804	501(C)(3)	5,067.		N/A	N/A	HOME BUILDING
(8)	MOREHEAD AREA HFH PO BOX 180 MOREHEAD, KY 40351-0180	61-1155640	501(C)(3)	10,931.		N/A	N/A	HOME BUILDING
(9)	BOWLING GREEN/WARREN, INC., HFH OF PO BOX 1115 BOWLING GREEN, KY 42102-1115	61-1182702	501(C)(3)	7,768.		N/A	N/A	HOME BUILDING
(10)	MERCER COUNTY, HFH PO BOX 66 HARRODSBURG, KY 40330-0066	61-1189896	501(C)(3)	8,194.		N/A	N/A	HOME BUILDING
(11)	HOPKINS COUNTY, HFH OF PO BOX 47 MADISONVILLE, KY 42431-0001	61-1192061	501(C)(3)	34,876.		N/A	N/A	HOME BUILDING
(12)	MADISON & CLARK, COUNTIES, KY, HFH OF PO BOX 186 RICHMOND, KY 40476-0186	61-1205778	501(C)(3)	14,086.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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

Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	HARDIN COUNTY HFH, INC. 1016 PEAR ORCH RD ELIZABETHTOWN, KY 42701	61-1206831	501(C)(3)	7,753.		N/A	N/A	HOME BUILDING
(2)	SANDY VALLEY HFH PO BOX 2947 PIKEVILLE, KY 41502-2947	61-1232168	501(C)(3)	11,422.		N/A	N/A	HOME BUILDING
(3)	SIMPSON COUNTY, HFH OF PO BOX 363 FRANKLIN, KY 42135-0363	61-1249522	501(C)(3)	11,475.		N/A	N/A	HOME BUILDING
(4)	KENTUCKY HFH 330 N HUBBARDS LN #3 LOUISVILLE, KY 40207	61-1267867	501(C)(3)	120,206.		N/A	N/A	HOME BUILDING
(5)	GARRARD COUNTY HFH PO BOX 86 LANCASTER, KY 40444-0086	61-1281872	501(C)(3)	18,356.		N/A	N/A	HOME BUILDING
(6)	MAYFIELD-GRAVES CO HFH PO BOX 41 MAYFIELD, KY 42066	61-1329076	501(C)(3)	7,473.		N/A	N/A	HOME BUILDING
(7)	MEMPHIS, HFH OF GREATER 7136 WINCHESTER RD MEMPHIS, TN 38125	62-1157233	501(C)(3)	317,806.		N/A	N/A	HOME BUILDING
(8)	CHATTANOOGA AREA, HFH OF GREATER 1201 E MAIN ST CHATTANOOGA, TN 37408-1613	62-1260347	501(C)(3)	37,095.		N/A	N/A	HOME BUILDING
(9)	HOLSTON HFH PO BOX 5265 KINGSPORT, TN 37663-0265	62-1288397	501(C)(3)	50,560.		N/A	N/A	HOME BUILDING
(10)	BOYLE COUNTY HFH PO BOX 225 DANVILLE, KY 40423	62-1419758	501(C)(3)	5,925.		N/A	N/A	HOME BUILDING
(11)	BROWN COUNTY, INDIANA HFH PO BOX 260 NASHVILLE, IN 47448-0260	62-1423488	501(C)(3)	14,806.		N/A	N/A	HOME BUILDING
(12)	HAWKINS HFH 310 COLONIAL RD ROGERSVILLE, TN 37857-3367	62-1481084	501(C)(3)	13,104.		N/A	N/A	HOME BUILDING

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(1)	ANDERSON COUNTY, HFH OF 111 RANDOLPH RD OAK RIDGE, TN 37831	62-1500113	501(C)(3)	14,152.		N/A	N/A	HOME BUILDING
(2)	LAKEWAY AREA HFH PO BOX 2133 MORRISTOWN, TN 37816-2133	62-1504578	501(C)(3)	12,858.		N/A	N/A	HOME BUILDING
(3)	BLOUNT COUNTY, HFH OF 1017 HAMPSHIRE DR MARYVILLE, TN 37801	62-1504881	501(C)(3)	44,679.		N/A	N/A	HOME BUILDING
(4)	WILLIAMSON CO, HFH OF 7115 BAKERSBRIDGE AVE BRENTWOOD, TN 37027	62-1506788	501(C)(3)	190,341.		N/A	N/A	HOME BUILDING
(5)	WILSON COUNTY, HFH OF 606 E MAIN ST LEBANON, TN 37087-2870	62-1506881	501(C)(3)	35,137.		N/A	N/A	HOME BUILDING
(6)	JACKSON, TN, AREA, HFH 1668 N PRKWY JACKSON, TN 38301	62-1507212	501(C)(3)	5,293.		N/A	N/A	HOME BUILDING
(7)	LOUDON COUNTY HFH 298 VILLAGE SQUARE DR #115 LOUDON, TN 37774	62-1525083	501(C)(3)	193,189.		N/A	N/A	HOME BUILDING
(8)	SUMNER COUNTY, TN, HFH OF PO BOX 516 GALLATIN, TN 37066-0516	62-1535553	501(C)(3)	12,146.		N/A	N/A	HOME BUILDING
(9)	MCMINN COUNTY, HFH OF PO BOX 1556 ATHENS, TN 37371-1556	62-1553486	501(C)(3)	7,462.		N/A	N/A	HOME BUILDING
(10)	BEDFORD BUILDS HFH PO BOX 122 SHELBYVILLE, TN 37162-0122	62-1558535	501(C)(3)	15,467.		N/A	N/A	HOME BUILDING
(11)	OBION COUNTY HFH PO BOX 535 UNION CITY, TN 38281-0535	62-1577879	501(C)(3)	8,206.		N/A	N/A	HOME BUILDING
(12)	PUTNAM COUNTY HFH 728 E 15TH COOKEVILLE, TN 38501	62-1592375	501(C)(3)	36,956.		N/A	N/A	HOME BUILDING

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(1)	CAMPBELL COUNTY HFH PO BOX 168 LA FOLLETTE, TN 37766-0168	62-1620767	501(C)(3)	6,535.		N/A	N/A	HOME BUILDING
(2)	WARREN COUNTY, HFH OF PO BOX 145 MC MINNVILLE, TN 37111	62-1633285	501(C)(3)	51,024.		N/A	N/A	HOME BUILDING
(3)	SHOALS HFH 1120 N. ROYAL AVE. FLORENCE, AL 35630	63-0904688	501(C)(3)	12,137.		N/A	N/A	HOME BUILDING
(4)	MADISON COUNTY, HFH OF 400 PRATT AVE NW HUNTSVILLE, AL 35801-5535	63-0951637	501(C)(3)	200,439.		N/A	N/A	HOME BUILDING
(5)	BIRMINGHAM HFH, GREATER PO BOX 540 FAIRFIELD, AL 35064	63-0962910	501(C)(3)	384,108.		N/A	N/A	HOME BUILDING
(6)	SOUTHWEST ALABAMA, HFH OF PO BOX 16422 MOBILE, AL 36616-0422	63-0985638	501(C)(3)	159,605.		N/A	N/A	HOME BUILDING
(7)	WIREGRASS HFH PO BOX 7002 DOTHAN, AL 36302-7002	63-1022705	501(C)(3)	19,269.		N/A	N/A	HOME BUILDING
(8)	MORGAN COUNTY, HFH OF PO BOX 1651 DECATUR, AL 35602-1651	63-1030915	501(C)(3)	64,842.		N/A	N/A	HOME BUILDING
(9)	ATHENS/LIMESTONE COUNTY, ALABAMA, HFH OF PO BOX 217 ATHENS, AL 35612-0217	63-1056368	501(C)(3)	32,751.		N/A	N/A	HOME BUILDING
(10)	BALDWIN COUNTY, HFH OF 12678 COUNTY RD 65 FOLEY, AL 36535-9426	63-1061923	501(C)(3)	55,021.		N/A	N/A	HOME BUILDING
(11)	AUTAUGA AND CHILTON COUNTIES, HFH OF 120 E 5TH ST PRATTVILLE, AL 36067-3112	63-1081438	501(C)(3)	29,202.		N/A	N/A	HOME BUILDING
(12)	CALHOUN COUNTY, HFH OF PO BOX 1135 ANNISTON, AL 36202-1135	63-1101558	501(C)(3)	14,535.		N/A	N/A	HOME BUILDING

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(1)	TROY-PIKE HFH PO BOX 441 TROY, AL 36081-4031	63-1118469	501(C)(3)	26,323.		N/A	N/A	HOME BUILDING
(2)	ALABAMA ASSOC. OF HABITAT AFF. PO BOX 1488 AUBURN, AL 36831-1488	63-1140499	501(C)(3)	65,103.		N/A	N/A	HOME BUILDING
(3)	GADSDEN-ETOWAH HFH PO BOX 7002 RAINBOW CITY, AL 35906-7002	63-1145264	501(C)(3)	10,996.		N/A	N/A	HOME BUILDING
(4)	MACON COUNTY HFH PO BOX 830247 TUSKEGEE, AL 36083	63-1166091	501(C)(3)	6,473.		N/A	N/A	HOME BUILDING
(5)	ESCAMBIA CO HFH PO BOX 119 BREWTON, AL 36427-0119	63-1173057	501(C)(3)	8,668.		N/A	N/A	HOME BUILDING
(6)	MARION COUNTY, HFH OF PO BOX 160 GUIN, AL 35563-0160	63-1228004	501(C)(3)	7,523.		N/A	N/A	HOME BUILDING
(7)	RUSSELL COUNTY, ALABAMA, HFH OF PO BOX 3590 PHENIX CITY, AL 36868-3590	63-1249356	501(C)(3)	13,732.		N/A	N/A	HOME BUILDING
(8)	NORTHEAST MISSISSIPPI HFH PO BOX 7321 TUPELO, MS 38802-7321	64-0744873	501(C)(3)	22,298.		N/A	N/A	HOME BUILDING
(9)	CLARKSDALE AREA HFH, INC. PO BOX 861 CLARKSDALE, MS 38614-0861	64-0745121	501(C)(3)	14,922.		N/A	N/A	HOME BUILDING
(10)	METRO JACKSON, INC., HFH/ PO BOX 55634 JACKSON, MS 39296-5634	64-0750633	501(C)(3)	307,118.		N/A	N/A	HOME BUILDING
(11)	STARKVILLE HFH PO BOX 784 STARKVILLE, MS 39760-0784	64-0751664	501(C)(3)	9,965.		N/A	N/A	HOME BUILDING
(12)	LAUDERDALE COUNTY HFH PO BOX 1402 MERIDIAN, MS 39302-1402	64-0770209	501(C)(3)	9,256.		N/A	N/A	HOME BUILDING

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(1)	COLUMBUS-LOWNDES HFH PO BOX 126 COLUMBUS, MS 39703-0126	64-0776112	501(C)(3)	17,721.		N/A	N/A	HOME BUILDING
(2)	HATTIESBURG AREA HFH 5191 HIGHWAY 42 HATTIESBURG, MS 39403-1092	64-0781871	501(C)(3)	41,409.		N/A	N/A	HOME BUILDING
(3)	WARREN COUNTY HFH PO BOX 541 VICKSBURG, MS 39181-0541	64-0783888	501(C)(3)	9,027.		N/A	N/A	HOME BUILDING
(4)	PONTOTOC COUNTY HFH PO BOX 486 PONTOTOC, MS 38863	64-0805086	501(C)(3)	6,000.		N/A	N/A	HOME BUILDING
(5)	NATCHEZ/ADAMS COUNTY HFH PO BOX 100 NATCHEZ, MS 39121-0100	64-0818004	501(C)(3)	7,702.		N/A	N/A	HOME BUILDING
(6)	HERNANDO DESOTO HFH PO BOX 845 HERNANDO, MS 38632-0845	64-0819088	501(C)(3)	5,073.		N/A	N/A	HOME BUILDING
(7)	GEORGE COUNTY HFH 52 VIRGINIA ST STE B LUCEDALE, MS 39452	64-0837467	501(C)(3)	21,103.		N/A	N/A	HOME BUILDING
(8)	MADISON CO HFH PO BOX 1143 CANTON, MS 39046-1143	64-0871064	501(C)(3)	6,330.		N/A	N/A	HOME BUILDING
(9)	MIAMI, HFH OF GREATER 3800 NW 22ND AVE MIAMI, FL 33142	65-0108974	501(C)(3)	4,373,609.		N/A	N/A	HOME BUILDING
(10)	UPPER KEYS, HFH OF THE PO BOX 2151 KEY LARGO, FL 33037-7151	65-0169353	501(C)(3)	34,190.		N/A	N/A	HOME BUILDING
(11)	INDIAN RIVER COUNTY HFH 4568 US HIGHWAY 1 N VERO BEACH, FL 32967	65-0230079	501(C)(3)	415,254.		N/A	N/A	HOME BUILDING
(12)	BEACHES HFH 1671 FRANCIS AVE ATLANTIC BEACH, FL 32233	65-0234544	501(C)(3)	242,623.		N/A	N/A	HOME BUILDING

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(1)	SOUTH PALM BEACH COUNTY, INC., HFH OF 181 SE 5TH AVE DELRAY BEACH, FL 33483-3336	65-0307017	501(C)(3)	81,537.		N/A	N/A	HOME BUILDING
(2)	SOUTH SARASOTA COUNTY INC, HFH 280 ALLIGATOR DR VENICE, FL 34293	65-0326534	501(C)(3)	20,505.		N/A	N/A	HOME BUILDING
(3)	KEY WEST & LWR FL KEYS, HFH OF 30320 OVERSEAS HWAY BIG PINE KEY, FL 33043	65-0443188	501(C)(3)	83,857.		N/A	N/A	HOME BUILDING
(4)	ST. LUCIE HFH, INC 702 S 6TH ST FORT PIERCE, FL 34950-8342	65-0631850	501(C)(3)	18,881.		N/A	N/A	HOME BUILDING
(5)	SONOMA COUNTY, HFH OF 3273 AIRWAY DR STE E SANTA ROSA, CA 95403	68-0041170	501(C)(3)	10,539.		N/A	N/A	HOME BUILDING
(6)	SACRAMENTO HFH 8351 UMBRIA AVE BLDG 5 SACRAMENTO, CA 95828	68-0085804	501(C)(3)	293,659.		N/A	N/A	HOME BUILDING
(7)	SISKIYOU HFH PO BOX 1482 YREKA, CA 96097-1482	68-0159627	501(C)(3)	7,786.		N/A	N/A	HOME BUILDING
(8)	SOLANO-NAPA HFH, INC. 110 RAILROAD AVE SUISUN CITY, CA 94585	68-0252525	501(C)(3)	28,656.		N/A	N/A	HOME BUILDING
(9)	BUTTE CO, HFH OF 220 MEYERS ST CHICO, CA 95928	68-0262142	501(C)(3)	20,046.		N/A	N/A	HOME BUILDING
(10)	CALAVERAS, HFH PO BOX 1834 SAN ANDREAS, CA 95249-1834	68-0288226	501(C)(3)	33,730.		N/A	N/A	HOME BUILDING
(11)	SHASTA CASCADE, HFH PO BOX 991846 REDDING, CA 96099-1846	68-0316090	501(C)(3)	59,879.		N/A	N/A	HOME BUILDING
(12)	YOLO COUNTY, HFH 1017 MAIN ST WOODLAND, CA 95695	68-0336008	501(C)(3)	12,133.		N/A	N/A	HOME BUILDING

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(1)	NEVADA COUNTY HFH PO BOX 2997 GRASS VALLEY, CA 95945	68-0383595	501(C)(3)	177,482.		N/A	N/A	HOME BUILDING
(2)	LAKE COUNTY HFH PO BOX 1830 LOWER LAKE, CA 95457-1830	68-0459756	501(C)(3)	13,899.		N/A	N/A	HOME BUILDING
(3)	PRAIRIE LAKES, INC., HFH OF PO BOX 122 GLENWOOD, MN 56334	68-0571582	501(C)(3)	50,968.		N/A	N/A	HOME BUILDING
(4)	DEKALB CO, TN, INC., HFH OF PO BOX 548 SMITHVILLE, TN 37166-0548	69-0003210	501(C)(3)	6,472.		N/A	N/A	HOME BUILDING
(5)	ARKANSAS VALLEY HFH PO BOX 754 FORT SMITH, AR 72902-0754	71-0679902	501(C)(3)	61,817.		N/A	N/A	HOME BUILDING
(6)	PULASKI COUNTY, HFH OF PO BOX 1326 LITTLE ROCK, AR 72203-1326	71-0679937	501(C)(3)	136,043.		N/A	N/A	HOME BUILDING
(7)	WASHINGTON COUNTY, ARKANSAS, INC., HFH OF 1421 E 15TH ST FAYETTEVILLE, AR 72701-7217	71-0712905	501(C)(3)	30,574.		N/A	N/A	HOME BUILDING
(8)	SALINE COUNTY, AR, HFH OF 404 W WALNUT ST BENTON, AR 72015-5152	71-0823520	501(C)(3)	81,485.		N/A	N/A	HOME BUILDING
(9)	BENTON COUNTY, HFH OF 908 SE 21ST ST BENTONVILLE, AR 72712	71-0836727	501(C)(3)	18,952.		N/A	N/A	HOME BUILDING
(10)	ST. TAMMANY WEST, HFH 1400 NORTH LN MANDEVILLE, LA 70471	72-0921695	501(C)(3)	123,085.		N/A	N/A	HOME BUILDING
(11)	NEW ORLEANS AREA HFH 7100 ST CHARLES @ BWY NEW ORLEANS, LA 70175	72-0973161	501(C)(3)	1,863,234.		N/A	N/A	HOME BUILDING
(12)	GREATER BATON ROUGE, HFH OF 4962 FLORIDA BLVD BATON ROUGE, LA 70806	72-1141747	501(C)(3)	158,571.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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

Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	RAPIDES HFH 1320 MONROE ST ALEXANDRIA, LA 71301	72-1151998	501(C)(3)	16,188.		N/A	N/A	HOME BUILDING
(2)	CALCASIEU AREA, HFH: PO BOX 638 LAKE CHARLES, LA 70602-0638	72-1203237	501(C)(3)	81,459.		N/A	N/A	HOME BUILDING
(3)	EAST ST. TAMMANY HFH 747 OLD SPANISH TRL SLIDELL, LA 70458	72-1204556	501(C)(3)	151,293.		N/A	N/A	HOME BUILDING
(4)	LAFAYETTE HFH 714 JOHNSTON ST #B LAFAYETTE, LA 70501-8030	72-1208936	501(C)(3)	58,016.		N/A	N/A	HOME BUILDING
(5)	OUACHITA, HFH OF PO BOX 2182 MONROE, LA 71207-2182	72-1262553	501(C)(3)	39,872.		N/A	N/A	HOME BUILDING
(6)	BAYOU AREA HFH PO BOX 691 THIBODAUX, LA 70302-0691	72-1290958	501(C)(3)	86,709.		N/A	N/A	HOME BUILDING
(7)	JACKSON COUNTY, HFH OF PO BOX 922 SCOTTSBORO, AL 35768-0922	72-1372550	501(C)(3)	6,504.		N/A	N/A	HOME BUILDING
(8)	CENTRAL OKLAHOMA HFH 5005 S I 35 SERVICE RD OK CITY, OK 73129	73-1305668	501(C)(3)	481,824.		N/A	N/A	HOME BUILDING
(9)	TULSA HFH, INC. 6235 E 13TH ST TULSA, OK 74112	73-1325063	501(C)(3)	217,564.		N/A	N/A	HOME BUILDING
(10)	TAHLEQUAH AREA HFH PO BOX 1876 TAHLEQUAH, OK 74465-1876	73-1359338	501(C)(3)	18,506.		N/A	N/A	HOME BUILDING
(11)	CLEVELAND COUNTY HFH 1835 INDUSTRIAL BLVD NORMAN, OK 73069	73-1422362	501(C)(3)	22,551.		N/A	N/A	HOME BUILDING
(12)	LAWTON-FT. SILL HFH PO BOX 3744 LAWTON, OK 73502-3744	73-1506844	501(C)(3)	11,884.		N/A	N/A	HOME BUILDING

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(1)	ALTUS AREA, HFH PO BOX 257 ALTUS, OK 73522	73-1589750	501(C)(3)	6,144.		N/A	N/A	HOME BUILDING
(2)	SAN ANTONIO HFH 311 PROBANDT SAN ANTONIO, TX 78204-1745	74-1897502	501(C)(3)	9,470.		N/A	N/A	HOME BUILDING
(3)	JEFFERSON COUNTY, HFH OF PO BOX 3174 BEAUMONT, TX 77704	74-2007535	501(C)(3)	9,837.		N/A	N/A	HOME BUILDING
(4)	METRO DENVER, HFH OF 3245 ELIOT ST DENVER, CO 80211	74-2050021	501(C)(3)	1,367,070.		N/A	N/A	HOME BUILDING
(5)	EL PASO, HFH OF 9210 DYER ST EL PASO, TX 79924-6404	74-2226271	501(C)(3)	36,232.		N/A	N/A	HOME BUILDING
(6)	AUSTIN HFH 310 COMAL ST STE 100 AUSTIN, TX 78702-4450	74-2373217	501(C)(3)	135,136.		N/A	N/A	HOME BUILDING
(7)	CENTRAL ARIZONA, INC, HFH 115 EAST WATKINS PHOENIX, AZ 85004	74-2401708	501(C)(3)	347,888.		N/A	N/A	HOME BUILDING
(8)	RIO GRANDE HFH PO BOX 4318 MCALLEN, TX 78501-4318	74-2504676	501(C)(3)	47,943.		N/A	N/A	HOME BUILDING
(9)	KERR COUNTY, HFH PO BOX 2140 KERRVILLE, TX 78029-2140	74-2524800	501(C)(3)	20,723.		N/A	N/A	HOME BUILDING
(10)	BRYAN/COLLEGE STATION HFH 119 LK ST BRYAN, TX 77801-2030	74-2542417	501(C)(3)	72,885.		N/A	N/A	HOME BUILDING
(11)	CORPUS CHRISTI, HFH- PO BOX 3032 CORPUS CHRISTI, TX 78463-3032	74-2561478	501(C)(3)	11,772.		N/A	N/A	HOME BUILDING
(12)	VICTORIA, HFH PO BOX 1357 VICTORIA, TX 77902-1357	74-2650392	501(C)(3)	55,521.		N/A	N/A	HOME BUILDING

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Department of the Treasury
Internal Revenue Service

Name of the organization

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(1)	GUADALUPE VALLEY HFH PO BOX 87 SEGUIN, TX 78156-0087	74-2662891	501(C)(3)	8,167.		N/A	N/A	HOME BUILDING
(2)	COMAL COUNTY HFH PO BOX 310487 NEW BRAUNFELS, TX 78131-0487	74-2667761	501(C)(3)	48,830.		N/A	N/A	HOME BUILDING
(3)	COLORADO COUNTY HFH PO BOX 1148 COLUMBUS, TX 78934-1148	74-2728495	501(C)(3)	23,611.		N/A	N/A	HOME BUILDING
(4)	LAREDO, INC, HFH OF PO BOX 440709 LAREDO, TX 78044	74-2728646	501(C)(3)	39,792.		N/A	N/A	HOME BUILDING
(5)	WILLIAMSON COUNTY, HFH OF PO BOX 737 GEORGETOWN, TX 78627-0737	74-2907371	501(C)(3)	46,882.		N/A	N/A	HOME BUILDING
(6)	SOUTH COLLIN CO TX, HFH OF 1400 SMT AVE #D-4 PLANO, TX 75074	74-3069341	501(C)(3)	84,900.		N/A	N/A	HOME BUILDING
(7)	AMARILLO HFH PO BOX 775 AMARILLO, TX 79105-0775	75-1820887	501(C)(3)	34,003.		N/A	N/A	HOME BUILDING
(8)	LONGVIEW HFH PO BOX 2551 LONGVIEW, TX 75606-2551	75-2040756	501(C)(3)	15,111.		N/A	N/A	HOME BUILDING
(9)	DALLAS AREA HFH 2800 N HAMPTON RD DALLAS, TX 75212-5029	75-2097161	501(C)(3)	8,651,333.		N/A	N/A	HOME BUILDING
(10)	WACO HFH PO BOX 2124 WACO, TX 76703	75-2130884	501(C)(3)	43,802.		N/A	N/A	HOME BUILDING
(11)	TRINITY HFH 3345 S JONES ST FORT WORTH, TX 76110-4312	75-2239189	501(C)(3)	670,092.		N/A	N/A	HOME BUILDING
(12)	SMITH COUNTY, HFH OF 822 W FRNT ST TYLER, TX 75702-7960	75-2285678	501(C)(3)	10,569.		N/A	N/A	HOME BUILDING

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(1)	MIDLAND HFH PO BOX 2555 MIDLAND, TX 79702-2555	75-2381356	501(C)(3)	33,821.		N/A	N/A	HOME BUILDING
(2)	GRAYSON COUNTY, HFH OF PO BOX 2725 SHERMAN, TX 75091-2725	75-2391661	501(C)(3)	14,567.		N/A	N/A	HOME BUILDING
(3)	WICHITA FALLS, HFH OF 1206 LAMAR ST WICHITA FALLS, TX 76301-4631	75-2405936	501(C)(3)	37,795.		N/A	N/A	HOME BUILDING
(4)	LUBBOCK HFH PO BOX 209 LUBBOCK, TX 79408-0209	75-2408749	501(C)(3)	17,730.		N/A	N/A	HOME BUILDING
(5)	NORTH COLLIN COUNTY HFH PO BOX 153 MC KINNEY, TX 75070-0153	75-2443511	501(C)(3)	112,259.		N/A	N/A	HOME BUILDING
(6)	GARLAND, HFH OF GREATER 1110 MAIN ST GARLAND, TX 75040	75-2499430	501(C)(3)	16,956.		N/A	N/A	HOME BUILDING
(7)	NACOGDOCHES, INC., HFH OF PO BOX 630683 NACOGDOCHES, TX 75963-0683	75-2518983	501(C)(3)	6,266.		N/A	N/A	HOME BUILDING
(8)	SAN ANGELO, HFH OF 401 N CHADBOURNE ST SAN ANGELO, TX 76903	75-2532858	501(C)(3)	6,969.		N/A	N/A	HOME BUILDING
(9)	HOOD COUNTY, HFH OF PO BOX 1866 GRANBURY, TX 76048-8866	75-2649015	501(C)(3)	6,834.		N/A	N/A	HOME BUILDING
(10)	MASON CO HFH PO BOX 946 MASON, TX 76856-0946	75-2964014	501(C)(3)	8,368.		N/A	N/A	HOME BUILDING
(11)	HOUSTON HFH 3750 N MCCARTY ST HOUSTON, TX 77029-1046	76-0207084	501(C)(3)	177,258.		N/A	N/A	HOME BUILDING
(12)	NORTHWEST HARRIS CO, HFH OF 13572 HIGHWAY 249 HOUSTON, TX 77086-2785	76-0273510	501(C)(3)	106,482.		N/A	N/A	HOME BUILDING

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(1)	MONTGOMERY COUNTY HFH PO BOX 2624 CONROE, TX 77305-2624	76-0276330	501(C)(3)	38,716.		N/A	N/A	HOME BUILDING
(2)	SOUTHERN BRAZORIA CO, HFH OF 12 CIR WAY LAKE JACKSON, TX 77566-6163	76-0324444	501(C)(3)	54,022.		N/A	N/A	HOME BUILDING
(3)	BAY AREA HFH-HOUSTON PO BOX 1284 DICKINSON, TX 77539-1284	76-0329145	501(C)(3)	174,462.		N/A	N/A	HOME BUILDING
(4)	FORT BEND HFH 13570 MURPHY RD STAFFORD, TX 77477	76-0355468	501(C)(3)	22,294.		N/A	N/A	HOME BUILDING
(5)	PASADENA HFH 1520 S SHAVER ST PASADENA, TX 77502	76-0438834	501(C)(3)	32,163.		N/A	N/A	HOME BUILDING
(6)	FRESNO, INC., HFH 4491 E MCKINLEY SUITE123 FRESNO, CA 93727	77-0076649	501(C)(3)	229,344.		N/A	N/A	HOME BUILDING
(7)	VENTURA COUNTY, HFH OF 121 S RICE AVE OXNARD, CA 93030	77-0120376	501(C)(3)	35,834.		N/A	N/A	HOME BUILDING
(8)	SANTA CRUZ COUNTY, HFH PO BOX 8412 SANTA CRUZ, CA 95061	77-0206356	501(C)(3)	27,332.		N/A	N/A	HOME BUILDING
(9)	GOLDEN EMPIRE, HFH - PO BOX 3267 BAKERSFIELD, CA 93385-3267	77-0230477	501(C)(3)	27,715.		N/A	N/A	HOME BUILDING
(10)	STANISLAUS COUNTY, HFH 630 KEARNEY AVE MODESTO, CA 95350	77-0233512	501(C)(3)	108,681.		N/A	N/A	HOME BUILDING
(11)	TULARE COUNTY, HFH OF PO BOX 848 VISALIA, CA 93279-0848	77-0369291	501(C)(3)	13,685.		N/A	N/A	HOME BUILDING
(12)	SAN LUIS OBISPO CO, HFH FOR PO BOX 613 SAN LUIS OBISPO, CA 93406-0613	77-0434147	501(C)(3)	141,589.		N/A	N/A	HOME BUILDING

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(Form 990)**

Department of the Treasury
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(1)	SOUTHERN SANTA BARBARA INC., HFH OF PO BOX 176 GOLETA, CA 93116	77-0518264	501(C)(3)	182,748.		N/A	N/A	HOME BUILDING
(2)	FLATHEAD VALLEY, HFH OF PO BOX 2836 KALISPELL, MT 59903-2836	81-0461253	501(C)(3)	35,482.		N/A	N/A	HOME BUILDING
(3)	MISSOULA, HFH OF PO BOX 7181 MISSOULA, MT 59807-7181	81-0467791	501(C)(3)	52,767.		N/A	N/A	HOME BUILDING
(4)	HELENA AREA HFH PO BOX 459 HELENA, MT 59624-0459	81-0476317	501(C)(3)	28,867.		N/A	N/A	HOME BUILDING
(5)	MID-YELLOWSTONE VALLEY, HFH 201 N 15TH ST BILLINGS, MT 59101	81-0477610	501(C)(3)	84,869.		N/A	N/A	HOME BUILDING
(6)	SOUTHWEST MONTANA, HFH OF PO BOX 632 BUTTE, MT 59703-0632	81-0486051	501(C)(3)	5,919.		N/A	N/A	HOME BUILDING
(7)	NORTH IDAHO, HFH 176 W WYOMING HAYDEN, ID 83835	82-0435146	501(C)(3)	8,518.		N/A	N/A	HOME BUILDING
(8)	BOISE VALLEY HFH PO BOX 6571 BOISE, ID 83707-6571	82-0438429	501(C)(3)	71,435.		N/A	N/A	HOME BUILDING
(9)	MAGIC VALLEY, HFH OF THE 669 EASTLAND DR S TWIN FALLS, ID 83301	82-0442486	501(C)(3)	36,466.		N/A	N/A	HOME BUILDING
(10)	IDAHO PANHANDLE HFH PO BOX 1191 SANDPOINT, ID 83864-0859	82-0449303	501(C)(3)	6,861.		N/A	N/A	HOME BUILDING
(11)	IDAHO FALLS AREA, HFH PO BOX 51055 IDAHO FALLS, ID 83405-1055	82-0471181	501(C)(3)	62,660.		N/A	N/A	HOME BUILDING
(12)	CANYON COUNTY HFH 5214 E CLEVELAND BLVD CALDWELL, ID 83607	82-0483123	501(C)(3)	68,577.		N/A	N/A	HOME BUILDING

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(1)	POLK COUNTY, TEXAS, INC., HFH, PO BOX 63 LIVINGSTON, TX 77351	82-0583622	501(C)(3)	8,495.		N/A	N/A	HOME BUILDING
(2)	LARAMIE COUNTY, HFH OF PO BOX 2809 CHEYENNE, WY 82003-2809	83-0296406	501(C)(3)	8,793.		N/A	N/A	HOME BUILDING
(3)	HEART OF WYOMING, HFH, THE 302 VAN HORN AVE MILLS, WY 82644	83-0309016	501(C)(3)	7,424.		N/A	N/A	HOME BUILDING
(4)	EASTERN BIGHORNS, HFH OF THE PO BOX 6196 SHERIDAN, WY 82801-6196	83-0309911	501(C)(3)	124,802.		N/A	N/A	HOME BUILDING
(5)	TETON AREA, HFH OF THE GREATER PO BOX 4194 JACKSON, WY 83001-4194	83-0312179	501(C)(3)	46,963.		N/A	N/A	HOME BUILDING
(6)	WIND RIVER COUNTRY, INC.; HFH PO BOX 1543 RIVERTON, WY 82501-1543	83-0318025	501(C)(3)	9,643.		N/A	N/A	HOME BUILDING
(7)	TENNESSEE, HFH OF PO BOX 10375 MURFREESBORO, TN 37129	83-0368176	501(C)(3)	8,500.		N/A	N/A	HOME BUILDING
(8)	EAST WHARTON COUNTY, HFH OF PO BOX 451 WHARTON, TX 77488	83-0402177	501(C)(3)	11,407.		N/A	N/A	HOME BUILDING
(9)	LOVELAND HFH, INC. PO BOX 56 LOVELAND, CO 80539-0056	84-1066816	501(C)(3)	152,951.		N/A	N/A	HOME BUILDING
(10)	GREELEY AREA HFH 104 N 16TH AVE GREELEY, CO 80631	84-1091487	501(C)(3)	91,499.		N/A	N/A	HOME BUILDING
(11)	ST. VRAIN VALLEY, HFH OF THE PO BOX 333 LONGMONT, CO 80502-0333	84-1092616	501(C)(3)	143,344.		N/A	N/A	HOME BUILDING
(12)	PUEBLO, INC., HFH OF 2313 S PR AVE PUEBLO, CO 81005	84-1122321	501(C)(3)	25,856.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations ☐
- 3 Enter total number of other organizations ☐

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Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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(1)	MESA COUNTY, HFH OF PO BOX 4947 GRAND JUNCTION, CO 81502-4947	84-1136660	501(C)(3)	26,860.		N/A	N/A	HOME BUILDING
(2)	MONTROSE COUNTY, HFH OF PO BOX 162 MONTROSE, CO 81402-0162	84-1140499	501(C)(3)	13,200.		N/A	N/A	HOME BUILDING
(3)	BLUE SPRUCE HFH PO BOX 2366 EVERGREEN, CO 80437-2366	84-1150042	501(C)(3)	62,118.		N/A	N/A	HOME BUILDING
(4)	COLORADO, HFH OF 550 S WADSWORTH STE 150 LAKEWOOD, CO 80226	84-1214920	501(C)(3)	36,982.		N/A	N/A	HOME BUILDING
(5)	FORT COLLINS, HFH OF 4001 S TAFT HL RD FORT COLLINS, CO 80526	84-1217901	501(C)(3)	114,718.		N/A	N/A	HOME BUILDING
(6)	ESTES VALLEY, HFH OF PO BOX 2745 ESTES PARK, CO 80517-2745	84-1224282	501(C)(3)	11,654.		N/A	N/A	HOME BUILDING
(7)	FLATIRONS HFH 2540 FRONTIER AVE STE 109 BOULDER, CO 80301	84-1229714	501(C)(3)	145,479.		N/A	N/A	HOME BUILDING
(8)	ARCHULETA COUNTY, HFH OF PO BOX 2827 PAGOSA SPRINGS, CO 81147-2827	84-1259138	501(C)(3)	18,082.		N/A	N/A	HOME BUILDING
(9)	SAN LUIS VALLEY HFH PO BOX 1197 ALAMOSA, CO 81101-1197	84-1278246	501(C)(3)	11,501.		N/A	N/A	HOME BUILDING
(10)	EAGLE AND LAKE COUNTIES, HFH OF PO BOX 4149 AVON, CO 81620-4149	84-1278922	501(C)(3)	17,642.		N/A	N/A	HOME BUILDING
(11)	LA PLATA COUNTY, HFH OF 120-E GIRARD ST DURANGO, CO 81303	84-1284358	501(C)(3)	19,371.		N/A	N/A	HOME BUILDING
(12)	GUNNISON VALLEY, HFH OF PO BOX 1295 GUNNISON, CO 81230-1295	84-1342438	501(C)(3)	15,346.		N/A	N/A	HOME BUILDING

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(1)	SOUTHWEST UTAH, HFH OF PO BOX 910134 SAINT GEORGE, UT 84791-0134	84-1424693	501(C)(3)	6,897.		N/A	N/A	HOME BUILDING
(2)	BERTHOUD HFH PO BOX 1227 BERTHOUD, CO 80513-2227	84-1445016	501(C)(3)	9,903.		N/A	N/A	HOME BUILDING
(3)	ROARING FORK VALLEY, HFH OF THE 0062 COUNTY RD CARBONDALE, CO 81623	84-1499538	501(C)(3)	17,798.		N/A	N/A	HOME BUILDING
(4)	GRAND COUNTY, HFH PO BOX 969 GRANBY, CO 80446-0969	84-1511043	501(C)(3)	9,456.		N/A	N/A	HOME BUILDING
(5)	TELLER COUNTY, HFH OF PO BOX 339 WOODLAND PARK, CO 80866-0339	84-1513509	501(C)(3)	40,000.		N/A	N/A	HOME BUILDING
(6)	CHAFFEE COUNTY HFH PO BOX 4936 BUENA VISTA, CO 81211-4936	84-1536141	501(C)(3)	71,990.		N/A	N/A	HOME BUILDING
(7)	SANTA FE HFH, INC. 2414 CERRILLOS RD SANTA FE, NM 87505	85-0355135	501(C)(3)	243,184.		N/A	N/A	HOME BUILDING
(8)	GREATER ALBUQUERQUE HFH PO BOX 8353 ALBUQUERQUE, NM 87198	85-0359138	501(C)(3)	32,451.		N/A	N/A	HOME BUILDING
(9)	TAOS, INC., HFH OF PO BOX 1888 TAOS, NM 87571-1888	85-0405105	501(C)(3)	27,768.		N/A	N/A	HOME BUILDING
(10)	OTERO COUNTY HFH 1109 TENTH ST ALAMOGORDO, NM 88310	85-0451249	501(C)(3)	83,925.		N/A	N/A	HOME BUILDING
(11)	PRESCOTT AREA HFH 1230 WILLOW CRK RD PRESCOTT, AZ 86301-1428	86-0645207	501(C)(3)	89,667.		N/A	N/A	HOME BUILDING
(12)	VERDE VALLEY HFH PO BOX 2515 COTTONWOOD, AZ 86326-2515	86-0754480	501(C)(3)	5,569.		N/A	N/A	HOME BUILDING

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SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations,
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(1)	PAYSON AREA HFH, INC. PO BOX 1131 PAYSON, AZ 85547-1131	86-0818407	501(C)(3)	6,642.		N/A	N/A	HOME BUILDING
(2)	DESERT FOOTHILLS, HFH 42205 N VISION WAY ANTHEM, AZ 85086	86-1018802	501(C)(3)	128,883.		N/A	N/A	HOME BUILDING
(3)	SALT LAKE VALLEY HFH 1276 S 500 W SALT LAKE CITY, UT 84101	87-0430150	501(C)(3)	19,663.		N/A	N/A	HOME BUILDING
(4)	UTAH COUNTY, HFH OF 340 SOUTH OREM BLVD OREM, UT 84058	87-0491420	501(C)(3)	151,297.		N/A	N/A	HOME BUILDING
(5)	LAS VEGAS, INC.; HFH 1401 N DECATUR BLVD LAS VEGAS, NV 89108	88-0268803	501(C)(3)	30,602.		N/A	N/A	HOME BUILDING
(6)	TRUCKEE MEADOWS HFH 1775 KUENZLI ST RENO, NV 89502-1117	88-0280462	501(C)(3)	11,799.		N/A	N/A	HOME BUILDING
(7)	TOMPKINS & CORTLAND COUNTIES, INC., HFH OF PO BOX 4683 ITHACA, NY 14852-4683	90-0238478	501(C)(3)	45,203.		N/A	N/A	HOME BUILDING
(8)	YAKIMA VALLEY PARTNERS HFH 21 W MEAD AVE STE 110 YAKIMA, WA 98902-6036	91-1307546	501(C)(3)	195,658.		N/A	N/A	HOME BUILDING
(9)	SEATTLE/SOUTH KING COUNTY, HFH OF 560 NACHES AVE SW STE 110 RENTON, WA 98057	91-1342397	501(C)(3)	363,411.		N/A	N/A	HOME BUILDING
(10)	EAST KING COUNTY, HFH OF 16315 NE 87TH ST STE B5 REDMOND, WA 98052	91-1403653	501(C)(3)	435,361.		N/A	N/A	HOME BUILDING
(11)	WHATCOM COUNTY, HFH IN 1385 ADMIRAL PL FERNDALE, WA 98248	91-1409512	501(C)(3)	68,838.		N/A	N/A	HOME BUILDING
(12)	LEWISTON-CLARKSTON PARTNERS HFH PO BOX 317 CLARKSTON, WA 99403-0317	91-1510292	501(C)(3)	18,382.		N/A	N/A	HOME BUILDING

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Department of the Treasury
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(1)	SNOHOMISH CO, HFH OF 2321 HOYT AVE EVERETT, WA 98201	91-1528130	501 (C) (3)	45,132.		N/A	N/A	HOME BUILDING
(2)	CLALLAM COUNTY HFH PO BOX 1479 PORT ANGELES, WA 98362	91-1535386	501 (C) (3)	53,507.		N/A	N/A	HOME BUILDING
(3)	EVERGREEN HFH 521 E 33RD ST VANCOUVER, WA 98663	91-1557462	501 (C) (3)	84,659.		N/A	N/A	HOME BUILDING
(4)	TRI-COUNTY PARTNERS HFH 313 WELLSIAN WAY RICHLAND, WA 99352-4116	91-1591086	501 (C) (3)	52,760.		N/A	N/A	HOME BUILDING
(5)	KITTITAS COUNTY HFH PO BOX 873 ELLENSBURG, WA 98926-0873	91-1595008	501 (C) (3)	6,474.		N/A	N/A	HOME BUILDING
(6)	LAKE CHELAN VALLEY HFH PO BOX 332 MANSON, WA 98831-0332	91-1604509	501 (C) (3)	6,871.		N/A	N/A	HOME BUILDING
(7)	SKAGIT HFH PO BOX 2565 MOUNT VERNON, WA 98273-7565	91-1628529	501 (C) (3)	60,134.		N/A	N/A	HOME BUILDING
(8)	MASON COUNTY, HFH OF PO BOX 1549 SHELTON, WA 98584-1549	91-1686044	501 (C) (3)	26,721.		N/A	N/A	HOME BUILDING
(9)	LAWRENCE CO HFH, INC. 121 NORTH FIRST ST MITCHELL, IN 47446	91-1832611	501 (C) (3)	19,633.		N/A	N/A	HOME BUILDING
(10)	NORTH PLATTE AREA HFH PO BOX 1785 NORTH PLATTE, NE 69103-1785	91-1833181	501 (C) (3)	5,869.		N/A	N/A	HOME BUILDING
(11)	TILLAMOOK COUNTY HFH 2610 THIRD ST TILLAMOOK, OR 97141	91-1848416	501 (C) (3)	10,187.		N/A	N/A	HOME BUILDING
(12)	WASHINGTON STATE, HFH OF PO BOX 112033 TACOMA, WA 98411	91-1868649	501 (C) (3)	18,467.		N/A	N/A	HOME BUILDING

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(1)	ISLAND COUNTY, HFH OF PO BOX 2279 OAK HARBOR, WA 98277-6279	91-1882362	501(C)(3)	38,029.		N/A	N/A	HOME BUILDING
(2)	EAST JEFFERSON COUNTY, HFH OF PO BOX 658 PORT TOWNSEND, WA 98368-0658	91-1885667	501(C)(3)	59,103.		N/A	N/A	HOME BUILDING
(3)	KITSAP COUNTY, HFH OF PO BOX 5347 BREMERTON, WA 98312-0516	91-1981992	501(C)(3)	67,836.		N/A	N/A	HOME BUILDING
(4)	WOOD COUNTY, OH, HFH OF PO BOX 235 BOWLING GREEN, OH 43402-0235	91-2043423	501(C)(3)	20,697.		N/A	N/A	HOME BUILDING
(5)	NORTH WILLAMETTE VALLEY HFH PO BOX 852 MOUNT ANGEL, OR 97362-0172	91-6133006	501(C)(3)	37,384.		N/A	N/A	HOME BUILDING
(6)	CENTRAL PENINSULA HFH PO BOX 2907 SOLDOTNA, AK 99669-2907	92-0139489	501(C)(3)	10,067.		N/A	N/A	HOME BUILDING
(7)	ANCHORAGE, HFH 500 W INTL AIRPORT RD ANCHORAGE, AK 99518	92-0140434	501(C)(3)	171,472.		N/A	N/A	HOME BUILDING
(8)	PORTLAND/METRO EAST, HFH 1478 NE KILLINGSWORTH ST PORTLAND, OR 97211	93-0801200	501(C)(3)	694,285.		N/A	N/A	HOME BUILDING
(9)	ROGUE VALLEY, HFH PO BOX 688 MEDFORD, OR 97501-0046	93-0971629	501(C)(3)	87,355.		N/A	N/A	HOME BUILDING
(10)	WILLAMETTE WEST HFH 5293 NE ELAM YOUNG PKWY HILLSBORO, OR 97124	93-0987176	501(C)(3)	157,954.		N/A	N/A	HOME BUILDING
(11)	BEND AREA HFH 1860 NE 4TH ST BEND, OR 97701-3822	93-1004012	501(C)(3)	58,517.		N/A	N/A	HOME BUILDING
(12)	SPRINGFIELD-EUGENE, HFH 1210 OAK PATCH RD EUGENE, OR 97402	93-1015598	501(C)(3)	25,531.		N/A	N/A	HOME BUILDING

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(1)	MID-WILLAMETTE VALLEY, HFH OF THE 1220 12TH ST SE SALEM, OR 97302-2813	93-1025497	501(C)(3)	96,870.		N/A	N/A	HOME BUILDING
(2)	MCMINNVILLE AREA HFH PO BOX 301 MCMINNVILLE, OR 97128-0301	93-1025835	501(C)(3)	20,262.		N/A	N/A	HOME BUILDING
(3)	SISTERS HFH PO BOX 238 SISTERS, OR 97759-0238	93-1039346	501(C)(3)	65,574.		N/A	N/A	HOME BUILDING
(4)	BENTON HFH PO BOX 1551 CORVALLIS, OR 97330	93-1040496	501(C)(3)	13,012.		N/A	N/A	HOME BUILDING
(5)	COOS BAY AREA HFH PO BOX 986 COOS BAY, OR 97420-0219	93-1051752	501(C)(3)	6,740.		N/A	N/A	HOME BUILDING
(6)	REDMOND HFH PO BOX 692 REDMOND, OR 97756-0020	93-1071758	501(C)(3)	8,299.		N/A	N/A	HOME BUILDING
(7)	GRANTS PASS AREA HFH PO BOX 2667 GRANTS PASS, OR 97528	93-1097559	501(C)(3)	7,864.		N/A	N/A	HOME BUILDING
(8)	NEWBERRY HFH PO BOX 3364 SUNRIVER, OR 97707-0364	93-1123478	501(C)(3)	32,392.		N/A	N/A	HOME BUILDING
(9)	NEWBERG AREA HFH PO BOX 118 NEWBERG, OR 97132-0118	93-1141508	501(C)(3)	94,167.		N/A	N/A	HOME BUILDING
(10)	JUNCTION CITY/HARRISBURG/MONROE HFH PO BOX 171 JUNCTION CITY, OR 97448-0171	93-1148357	501(C)(3)	12,237.		N/A	N/A	HOME BUILDING
(11)	LINCOLN COUNTY, HFH OF PO BOX 1311 NEWPORT, OR 97365-0101	93-1172258	501(C)(3)	34,181.		N/A	N/A	HOME BUILDING
(12)	FLORENCE HFH PO BOX 3302 FLORENCE, OR 97439-0179	93-1265144	501(C)(3)	7,129.		N/A	N/A	HOME BUILDING

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- 3 Enter total number of other organizations

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Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	TUCSON, INC., HFH 621 W LESTER ST TUCSON, AZ 85705-6432	94-2725100	501(C)(3)	211,028.		N/A	N/A	HOME BUILDING
(2)	HABITAT FOR HUMANITY EAST BAY 2619 BROADWAY #205 OAKLAND, CA 94612-3107	94-3053687	501(C)(3)	928,391.		N/A	N/A	HOME BUILDING
(3)	SPOKANE, HFH PO BOX 4130 SPOKANE, WA 99220-0130	94-3066722	501(C)(3)	407,988.		N/A	N/A	HOME BUILDING
(4)	SAN FRANCISCO, INC., HFH GREATER 645 HARRISON ST SAN FRANCISCO, CA 94107	94-3088881	501(C)(3)	168,703.		N/A	N/A	HOME BUILDING
(5)	RUTHERFORD COUNTY AREA HFH 850 MERCURY BLVD MURFREESBORO, TN 37130	94-3099406	501(C)(3)	101,960.		N/A	N/A	HOME BUILDING
(6)	MAUI INC, HFH 970 LOWR MAIN ST WAILUKU, HI 96793	94-3278838	501(C)(3)	43,419.		N/A	N/A	HOME BUILDING
(7)	MOLOKAI HFH PO BOX 486 HOOLEHUA, HI 96729-0486	94-3281616	501(C)(3)	86,711.		N/A	N/A	HOME BUILDING
(8)	SAN GABRIEL VALLEY HFH 400 S IRWINDALE AVE AZUSA, CA 91702	95-4244947	501(C)(3)	172,694.		N/A	N/A	HOME BUILDING
(9)	SAN FERNANDO/SANTA CLARITA VLYS, HFH OF 21031 VENTURA BLVD WOODLAND HILLS, CA 91364	95-4290935	501(C)(3)	55,915.		N/A	N/A	HOME BUILDING
(10)	POMONA VALLEY HFH 2111 BONITA AVE LA VERNE, CA 91750-4927	95-4315482	501(C)(3)	22,480.		N/A	N/A	HOME BUILDING
(11)	HONOLULU HFH 1136 UN MALL STE 510 HONOLULU, HI 96813	99-0261871	501(C)(3)	27,827.		N/A	N/A	HOME BUILDING
(12)	HALE ALOHA O HILO HFH 700 MANONO ST STE 102 HILO, HI 96720-4498	99-0275466	501(C)(3)	31,012.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

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Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	KAUAI HFH PO BOX 28 ELEELE, HI 96705	99-0302595	501(C)(3)	109,750.		N/A	N/A	HOME BUILDING
(2)	WEST HAWAII, HFH PO BOX 4619 KAILUA KONA, HI 96745-4619	99-0355149	501(C)(3)	31,756.		N/A	N/A	HOME BUILDING
(3)	HABITAT FOR HUMANITY - GIK GIFTS 121 HABITAT STREET AMERICUS, GA 31709	91-1914868	501(C)(3)		30,596,897.	COST/SELL PRICE	BLD MATER/APPLIANCE	HOME BUILDING
(4)	SILICON VALLEY, HFH 513 VLY WAY BLDG 2 MILPITAS, CA 95035	93-0926083	501(C)(3)	80,360.		N/A	N/A	HOME BUILDING
(5)	FLORIDA, HFH OF PO BOX 677453 ORLANDO, FL 32867	80-0423130	501(C)(3)	59,750.		N/A	N/A	HOME BUILDING
(6)	COLUMBUS AREA HFH PO BOX 1193 COLUMBUS, GA 31902-1193	58-1606182	501(C)(3)	43,300.		N/A	N/A	HOME BUILDING
(7)	BOONE COUNTY, HFH OF PO BOX 774 LEBANON, IN 46052-0774	35-1620989	501(C)(3)	23,537.		N/A	N/A	HOME BUILDING
(8)	ELKHART COUNTY, HFH OF PO BOX 950 GOSHEN, IN 46527-0950	35-1685313	501(C)(3)	38,721.		N/A	N/A	HOME BUILDING
(9)	FORT WAYNE HFH 629 E WASHINGTON BLVD FORT WAYNE, IN 46802	35-1687064	501(C)(3)	129,574.		N/A	N/A	HOME BUILDING
(10)	GARRETT COUNTY HFH PO BOX 363 OAKLAND, MD 21550-0363	52-1322233	501(C)(3)	21,095.		N/A	N/A	HOME BUILDING
(11)	KANSAS CITY HFH 1423 E LINWOOD BLVD KANSAS CITY, MO 64109	43-1175749	501(C)(3)	71,746.		N/A	N/A	HOME BUILDING
(12)	PATERSON HFH PO BOX 2585 PATERSON, NJ 07509	22-2598353	501(C)(3)	107,371.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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

Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	RICHMOND METROPOLITAN HFH 2281 - A DABNEY RD RICHMOND, VA 23230	54-1385198	501(C)(3)	192,914.		N/A	N/A	HOME BUILDING
(2)	VIRGINIA, HFH PO BOX 3358 GLEN ALLEN, VA 23058	20-2832203	501(C)(3)	98,205.		N/A	N/A	HOME BUILDING
(3)	GALLATIN VALLEY, HFH OF 230 ARDEN DR BELGRADE, MT 59714-8547	81-0472146	501(C)(3)	12,136.		N/A	N/A	HOME BUILDING
(4)	ANDROSCOGGIN HFH PO BOX 3041 AUBURN, ME 04212-3041	01-0435170	501(C)(3)	11,564.		N/A	N/A	HOME BUILDING
(5)	BANGOR, HFH OF GREATER 83 WASHINGTON ST BANGOR, ME 04401	01-0441147	501(C)(3)	9,480.		N/A	N/A	HOME BUILDING
(6)	HANCOCK COUNTY HFH PO BOX 343 ELLSWORTH, ME 04605-0343	01-0443774	501(C)(3)	7,720.		N/A	N/A	HOME BUILDING
(7)	SOUTHERN KENNEBEC CO HFH 14 HUNTINGTON HL RD LITCHFIELD, ME 04350	01-0456597	501(C)(3)	8,911.		N/A	N/A	HOME BUILDING
(8)	NAVARRO CO., INC.; HFH OF 417 W COLLIN ST CORSICANA, TX 75110	01-0858084	501(C)(3)	10,953.		N/A	N/A	HOME BUILDING
(9)	KEARSARGE/SUNAPEE AREA, HFH PO BOX 1513 NEW LONDON, NH 03257-1513	02-0458663	501(C)(3)	8,681.		N/A	N/A	HOME BUILDING
(10)	LAKES REGION HFH 66 ROUTE 25 STE 3 MEREDITH, NH 03253	02-0461211	501(C)(3)	8,613.		N/A	N/A	HOME BUILDING
(11)	PEMI-VALLEY HFH, INC. PO BOX 238 PLYMOUTH, NH 03264-0238	02-0462603	501(C)(3)	11,289.		N/A	N/A	HOME BUILDING
(12)	MOUNT WASHINGTON VALLEY HFH 2 CMN ST UNIT C 31 NORTH CONWAY, NH 03860	02-0463831	501(C)(3)	7,649.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations ☐
- 3 Enter total number of other organizations ☐

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Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

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OMB No. 1545-0047

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Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	SOUTHEAST NEW HAMPSHIRE HFH 15 FOURTH ST DOVER, NH 03820	02-0475356	501 (C) (3)	5,014.		N/A	N/A	HOME BUILDING
(2)	OSCODA CO, HFH OF PO BOX 68 FAIRVIEW, MI 48621	02-0656036	501 (C) (3)	9,617.		N/A	N/A	HOME BUILDING
(3)	UPPER VALLEY HFH PO BOX 1038 WHITE RIVER JUNCTION, VT 05001	03-0306081	501 (C) (3)	43,045.		N/A	N/A	HOME BUILDING
(4)	SPRINGFIELD, VT AREA HFH, GR'T PO BOX 143 SPRINGFIELD, VT 05156-0143	03-0324231	501 (C) (3)	9,201.		N/A	N/A	HOME BUILDING
(5)	NORTH SHORE, INC., HFH- 215 MAPLE ST LYNN, MA 01904-2709	04-2939276	501 (C) (3)	24,598.		N/A	N/A	HOME BUILDING
(6)	SPRINGFIELD HFH, GREATER 104 MEMORIAL AVE WEST SPRINGFIELD, MA 01089	04-2970982	501 (C) (3)	79,617.		N/A	N/A	HOME BUILDING
(7)	BOSTON INC., HFH GREATER 240 COMMERCIAL ST STE 4B BOSTON, MA 02109	04-2994233	501 (C) (3)	292,845.		N/A	N/A	HOME BUILDING
(8)	NORTH CENTRAL MASSACHUSETTS, INC., HFH 1 OAK HL RD FITCHBURG, MA 01420-3986	04-2999854	501 (C) (3)	21,916.		N/A	N/A	HOME BUILDING
(9)	PIONEER VALLEY HFH PO BOX 60642 FLORENCE, MA 01062-0642	04-3049506	501 (C) (3)	72,092.		N/A	N/A	HOME BUILDING
(10)	LOWELL, HFH OF GREATER 124 MAIN ST #B WESTFORD, MA 01886-2037	04-3123186	501 (C) (3)	69,246.		N/A	N/A	HOME BUILDING
(11)	BUZZARDS BAY AREA HFH 34 BARSTOW ST MATTAPoisETT, MA 02739	04-3315778	501 (C) (3)	5,920.		N/A	N/A	HOME BUILDING
(12)	MARTHA'S VINEYARD, HFH OF PO BOX 1093 VINEYARD HAVEN, MA 02568-0902	04-3325498	501 (C) (3)	11,199.		N/A	N/A	HOME BUILDING

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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Schedule I (Form 990) (2010)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

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HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

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Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	BENNINGTON AREA HFH PO BOX 1159 MANCHESTER, VT 05254	04-3342696	501(C)(3)	14,538.		N/A	N/A	HOME BUILDING
(2)	PLYMOUTH, HFH OF GREATER PO BOX 346 CARVER, MA 02330-0346	04-3348433	501(C)(3)	10,559.		N/A	N/A	HOME BUILDING
(3)	NANTUCKET, INC., HFH 2 GREGLEN AVE PMB 54 NANTUCKET, MA 02554	04-3553383	501(C)(3)	27,159.		N/A	N/A	HOME BUILDING
(4)	PROVIDENCE HFH RHODE IS., GTR. 807 BROAD ST BOX 37 PROVIDENCE, RI 02907	05-0432730	501(C)(3)	27,328.		N/A	N/A	HOME BUILDING
(5)	RHODE IS., SOUTH CO., HFH FOR 1555 SHANNOCK RD SHANNOCK, RI 02875	05-0450845	501(C)(3)	6,112.		N/A	N/A	HOME BUILDING
(6)	WEST BAY & NORTHERN RI, HFH OF PO BOX 6743 WARWICK, RI 02887-6743	05-0458404	501(C)(3)	9,362.		N/A	N/A	HOME BUILDING
(7)	NEW HAVEN, HFH OF GREATER 37 UNION ST NEW HAVEN, CT 06511-5747	06-1178712	501(C)(3)	82,698.		N/A	N/A	HOME BUILDING
(8)	SOUTHEASTERN CONNECTICUT, INC., HFH OF 377 BROAD ST NEW LONDON, CT 06320-3725	06-1214680	501(C)(3)	99,956.		N/A	N/A	HOME BUILDING
(9)	HARTFORD AREA HFH PO BOX 1933 HARTFORD, CT 06144	06-1253049	501(C)(3)	279,196.		N/A	N/A	HOME BUILDING
(10)	HOUSATONIC HFH 51 SUGAR HOLW RD DANBURY, CT 06810	06-1326389	501(C)(3)	43,185.		N/A	N/A	HOME BUILDING
(11)	WINDHAM AREA, HFH PO BOX 214 WILLIMANTIC, CT 06226-0214	06-1422354	501(C)(3)	7,232.		N/A	N/A	HOME BUILDING
(12)	MIDDLESEX HFH OF CONN., INC. 34 SHUNPIKE RD UN 24-26 CROMWELL, CT 06416	06-1448284	501(C)(3)	7,364.		N/A	N/A	HOME BUILDING

2 Enter total number of section 501(c)(3) and government organizations 804.

3 Enter total number of other organizations 0.

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

Schedule I (Form 990) (2010)

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

FORM 990, SCHEDULE I

DESCRIPTION OF ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANTS

HFHI IMPLEMENTS PROJECTS OR PROGRAMS FUNDED BY GRANTS IN PARTNERSHIP WITH

HFH AFFILIATES THROUGH SUBGRANT AGREEMENTS. HFHI SUBGRANTS FUNDS TO THOSE

ENTITIES (HFH AFFILIATES) WHICH MEET THE ELIGIBILITY CRITERIA THAT

INCLUDES CAPACITY TO MANAGE GRANTS. ALL SUBGRANTS ARE ON A REIMBURSEMENT

BASIS WHERE SUBGRANTEES ARE REQUIRED TO PROVIDE COPIES OF ALL THE

VOUCHERS/RECEIPTS TO ENSURE WHETHER THOSE EXPENSES ARE ALLOWABLE, BEFORE

FUNDS ARE TRANSFERRED. ALL SUBGRANTEES PROVIDE QUARTERLY PERFORMANCE

REPORTS, BOTH FINANCIAL AND PROGRAMMATIC. SUBGRANTEES PROVIDE COPIES OF

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

ANNUAL EXTERNAL AUDIT REPORTS INCLUDING A-133 AUDIT, IF APPLICABLE.

HFHI CONDUCTS SITE AND OFF-SITE SUBRECIPIENT MONITORING.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|---|---|
| <input type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization? . . .
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . .
- c** Participate in, or receive payment from, an equity-based compensation arrangement? . . .
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? . . .
- b** Any related organization? . . .
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? . . .
- b** Any related organization? . . .
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a	X	
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2010

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

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JONATHAN RECKFORD	(i)	251,506.	0.	900.	7,734.	6,282.	266,422.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 ELIZABETH K BLAKE	(i)	173,635.	0.	900.	5,209.	0.	179,744.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 MICHAEL E CARSCADDON	(i)	161,349.	0.	900.	3,355.	1,586.	167,190.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 CHRISTOPHER D CLARKE	(i)	140,649.	0.	900.	4,372.	5,082.	151,003.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 MARK CROZET	(i)	140,804.	0.	900.	4,344.	4,004.	150,052.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 GREGORY J FOSTER	(i)	85,015.	0.	120,550.	4,258.	2,782.	212,605.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7 DONALD S HASZCZYN	(i)	91,442.	0.	94,578.	4,658.	1,638.	192,316.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8 RICHARD K HATHAWAY	(i)	95,017.	0.	215,986.	2,957.	1,170.	315,130.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9 EDWARD K QUIBELL	(i)	159,152.	0.	900.	4,911.	4,540.	169,503.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10 CHARITO SARIAS AYCO	(i)	67,433.	0.	120,969.	3,238.	2,782.	194,422.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
11 PETER P GAPE	(i)	65,094.	0.	106,692.	3,157.	1,638.	176,581.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
12 TORRE NELSON	(i)	111,166.	0.	45,551.	2,894.	2,170.	161,781.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
13 GERARD G. SNOWBALL	(i)	52,845.	0.	138,407.	2,526.	2,782.	196,560.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
14 JONATHAN J GIBSON	(i)	62,332.	0.	123,648.	2,063.	1,638.	189,681.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
15 GREGOIRE MUSHYIRAHAMWE	(i)	30,089.	0.	154,625.	1,933.	1,260.	187,907.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
16	(i)							
	(ii)							

Schedule J (Form 990) 2010

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE

SCHEDULE J, PART I, LINE 1A

HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE:

HOUSING ALLOWANCES WERE PAID FOR FOREIGN ASSIGNMENTS IN THE FOLLOWING

AMOUNTS:

GREGORY FOSTER	\$20,785	DONALD HASZCZYN	\$20,639
RICHARD K HATHAWAY	\$21,480	GERARD SNOWBALL	\$30,398
JONATHAN J GIBSON	\$16,365	CHARLITO AYCO	\$9,797
GREGOIRE MUSHYIRAHAMWE	\$19,455	PETER GAPE	\$33,611

TRAVEL FOR COMPANIONS

SCHEDULE J, PART I, LINE 1A

TRAVEL FOR COMPANIONS:

HOME LEAVE TRAVEL EXPENSES WERE PAID FOR EXPATRIATE FAMILIES ON FOREIGN

ASSIGNMENT IN THE FOLLOWING AMOUNTS:

GREGORY FOSTER	\$7,447	RICHARD K HATHAWAY	\$7,625
TORRE NELSON	\$977	GERARD SNOWBALL	\$15,290
JONATHAN J GIBSON	\$6,781	CHARLITO AYCO	2,502
GREGOIRE MUSHYIRAHAMWE	\$350	PETER GAPE	\$1,461

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

TAX INDEMNIFICATION AND GROSS-UP PAYMENTS

SCHEDULE J, PART I, LINE 1A

TAX INDEMNIFICATION AND GROSS-UP PAYMENTS: HOST COUNTRY TAXES WERE PAID

FOR FOREIGN ASSIGNMENTS IN THE FOLLOWING AMOUNTS:

GREGORY FOSTER	\$66,628	DONALD HASZCZYN	\$43,251
RICHARD K HATHAWAY	\$92,905	TORRE NELSON	\$22,291
GERARD SNOWBALL	\$40,142	JONATHAN J GIBSON	\$69,868
CHARLITO AYCO	\$54,006	GREGOIRE MUSHYIRAHAMWE	\$81,480
PETER GAPE	\$54,443		

U.S. FICA GROSS-UP WAS PAID IN THE FOLLOWING AMOUNTS:

RICHARD K HATHAWAY	\$4,222
TORRE NELSON	\$2,344
JONATHAN J GIBSON	\$2,563

SEVERANCE PAYMENTS

SCHEDULE J, PART I, LINE 4A

GREGOIRE MUSHYIRAHAMWE RECEIVED SEVERANCE PAY IN THE AMOUNT OF \$8,255

**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.**

OMB No. 1545-0047

2010

**Open To Public
Inspection**

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part 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	(d) Method of determining noncash contribution amounts
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	X	5,696.	2,854,424.	COST/SELLING PRICE
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	249.	2,164,717.	COST/SELLING PRICE
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	X	1.	119,000.	COST/SELLING PRICE
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 ► (<u>ATCH 1</u>)		197.	27,854,491.	
26 Other ► (<u> </u>)				
27 Other ► (<u> </u>)				
28 Other ► (<u> </u>)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30 a During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32 a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Yes No

30a		X
31	X	
32a	X	

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

Schedule M (Form 990) (2010)

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

THIRD PARTY AGREEMENT WITH CARS FOR HOMES PROGRAM

SCHEDULE M, PART I

HABITAT FOR HUMANITY INTERNATIONAL INC. HAS A SERVICE AGREEMENT WITH
ADVANCED MARKETING SERVICES (ARS). ARS PERFORMS OPERATIONAL SUPPORT
SERVICES THAT CONSIST OF ASSIGNMENT, TRANSPORTATION, PREPARATION AND SALE
OF ALL VEHICLES DONATED TO HABITAT. ARS, OPERATING AS AN AGENT FOR
HABITAT, PROCESSES STANDARD RECEIPT AND IRS FORMS 8283, 8282, AS WELL AS
IRS TAX FORMS 1098C.

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.ATTACHMENT 1SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

<u>DESCRIPTION</u>	<u>(A) CHECK</u>	<u>(B) NUMBER OF CONTRIBUTIONS</u>	<u>(C) REVENUES REPORTED</u>	<u>(D) METHOD OF DETERMINING</u>
DELTA SKY MILES	X	15.	370,795.	COST/SELLING PRICE
HOUSE BUILDING MATERIALS	X	182.	27,483,696.	COST/SELLING PRICE
TOTALS		<u>197.</u>	<u>27,854,491.</u>	

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.
▶ Attach to Form 990 or 990-EZ.**

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

SCHEDULE O - SUPPLEMENTAL INFORMATION

PART V, LINE 4B

THAILAND

AFGHANISTAN

SINGAPORE

BANGLADESH

CAMBODIA

NEPAL

VIETNAM

SOUTH AFRICA

CAMEROON

EGYPT

ETHIOPIA

COTE D'IVOIRE

JORDAN

MADAGASCAR

MOZAMBIQUE

SENEGAL

SLOVAKIA

COSTA RICA

HAITI

PAKISTAN

NICARAGUA

Name of the organization	Employer identification number
HABITAT FOR HUMANITY INTERNATIONAL, INC.	91-1914868

PROCESS UTILIZED TO REVIEW THE FORM 990

PART VI, QUESTION 11B

HFHI'S FORM 990 WAS PREPARED BY HFHI'S EXTERNAL AUDITOR, ERNST & YOUNG, LLP, IN CONSULTATION WITH REPRESENTATIVES OF HFHI'S FINANCE AND LEGAL DEPARTMENTS. THE COMPLETED VERSION OF THE FORM 990 WAS THEN REVIEWED BY HFHI'S CFO AND GENERAL COUNSEL. AFTER THIS REVIEW WAS COMPLETE, THE FORM 990 WAS PRESENTED TO THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS FOR ITS REVIEW AND APPROVAL. UPON COMPLETION OF REVIEW AND APPROVAL BY THE FINANCE COMMITTEE, THE FORM 990 WAS PROVIDED TO EACH MEMBER OF THE BOARD OF DIRECTORS SO THEY WOULD HAVE AN OPPORTUNITY FOR REVIEW AND COMMENT. UPON COMPLETION OF THE COMMENT PERIOD BY THE FULL BOARD, THE FORM 990 WAS FINALIZED AND FILED WITH IRS.

DESCRIPTION OF PROCESS TO MONITOR TRANSACTIONS FOR CONFLICTS OF INTEREST

PART VI, QUESTION 12C

HFHI CONDUCTS ANNUAL BOARD TRAINING, INCLUDING PERIODIC TRAINING ON HFHI'S CONFLICT OF INTEREST POLICY, THE ANNUAL DISCLOSURES REQUIRED, AND THE PROCESS FOR REVIEW AND APPROVAL OF ANY RELATED PARTY TRANSACTIONS. THE GOVERNANCE COMMITTEE OF THE BOARD OF DIRECTORS, WITH THE ASSISTANCE OF THE GENERAL COUNSEL, OVERSEES THE SUBMISSION OF THE ANNUAL DISCLOSURES BY THE DIRECTORS, OFFICERS, TRUSTEES AND KEY EMPLOYEES, REVIEWS THE DISCLOSURES TO DETERMINE WHETHER THERE ARE ANY INTERESTS THAT COULD GIVE RISE TO CONFLICTS, AND MONITORS OVERALL COMPLIANCE WITH THE POLICY. IF ANY ACTUAL OR POTENTIAL CONFLICT WERE TO ARISE, THE GENERAL COUNSEL WOULD

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HABITAT FOR HUMANITY INTERNATIONAL, INC.	91-1914868

WORK WITH THE GOVERNANCE COMMITTEE, THE BOARD AND MANAGEMENT, AS APPROPRIATE, TO FACILITATE THE ASSESSMENT OF THE FAIRNESS OF THE TRANSACTION, TO ENSURE THE RECUSAL OF ANY INTERESTED PARTIES FROM ANY DELIBERATIONS OR VOTING REGARDING THE TRANSACTION, AND OTHERWISE MONITOR COMPLIANCE WITH THE POLICY.

ADOPTION OF POLICIES BY BOARD OF DIRECTORS

PART VI, SECTION B, QUESTIONS 13 & 14

HFHI'S SENIOR MANAGEMENT ADOPTED AND IMPLEMENTED WHISTLEBLOWER AND RECORD RETENTION POLICIES SEVERAL YEARS AGO. HFHI'S MANAGEMENT MONITORS COMPLIANCE WITH THESE POLICIES AND PROVIDES REPORTS AS NECESSARY TO THE BOARD OF DIRECTORS. THE BOARD OF DIRECTORS HAS PROVIDED OVERSIGHT FOR THESE POLICIES, BUT DID NOT FORMALLY APPROVE THEM. THE HFHI BOARD EXPECTS TO ADOPT THESE POLICIES BY THE NEXT TAX YEAR END OF JUNE 30, 2012.

OFFICES & POSITIONS FOR WHICH PROCESS WAS USED, & YEAR PROCESS WAS BEGUN

PART VI, QUESTION 15A

HABITAT FOR HUMANITY INTERNATIONAL INC. (HFHI) HUMAN RESOURCES DEPARTMENT PARTICIPATES IN AND PURCHASES 3 WIDELY USED COMPENSATION SURVEYS THAT LIST MARKET SALARY PRACTICES OF INTERNATIONAL NON-PROFIT ORGANIZATIONS. BASED ON THIS REVIEW, THE HUMAN RESOURCES DEPARTMENT DETERMINES THE MARKET AVERAGE SALARY FOR THE CEO AND COMPARES HFHI'S ACTUAL INCUMBENT SALARY. THE HUMAN RESOURCES DEPARTMENT SENDS THE CEO'S SALARY ANALYSIS TO HFHI'S BOARD EXECUTIVE COMMITTEE, WHICH TAKES THE LEAD IN REVIEWING AND RECOMMENDING THE CEO'S SALARY FOR THE UPCOMING YEAR. AFTER THE

Name of the organization	Employer identification number
HABITAT FOR HUMANITY INTERNATIONAL, INC.	91-1914868

EXECUTIVE COMMITTEE APPROVAL, THE RECOMMENDATION IS PRESENTED TO THE FULL BOARD FOR FINAL APPROVAL.

PART VI, QUESTION 15B

HFHI'S HUMAN RESOURCES DEPARTMENT PARTICIPATES IN AND PURCHASES 3 WIDELY USED COMPENSATION SURVEYS THAT LIST MARKET SALARY PRACTICES OF INTERNATIONAL NON-PROFIT ORGANIZATIONS. BASED ON THIS REVIEW, THE HUMAN RESOURCES DEPARTMENT DETERMINES THE MARKET AVERAGE SALARY FOR THE EXECUTIVE DIRECT REPORTS TO THE CEO AND OTHER OFFICERS AND KEY EMPLOYEES AND COMPARES HFHI'S ACTUAL INCUMBENT SALARIES. THE HUMAN RESOURCES DEPARTMENT REVIEWS THE ANALYSIS WITH THE CEO AND SENIOR MANAGERS WHO MAKE SALARY RECOMMENDATIONS FOR THEIR DIRECT REPORTS FOR THE UPCOMING CALENDAR YEAR. THE HUMAN RESOURCES DEPARTMENT SENDS THE SALARY RECOMMENDATIONS TO THE GOVERNANCE COMMITTEE, WHICH TAKES THE LEAD IN REVIEWING AND DETERMINING THE COMMITTEE'S RESPONSE TO THE SALARY RECOMMENDATIONS. THE GOVERNANCE COMMITTEE'S DECISIONS ARE COMMUNICATED BACK TO STAFF IN HUMAN RESOURCES, WHO WORK WITH THE CEO AND OTHERS TO IMPLEMENT THE DECISIONS.

AVAIL OF GOV DOCS, CONFLICT OF INTEREST POLICY, & FIN STMTS TO GEN PUBLIC

FORM 990, PART VI, QUESTION 19

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VII

Name of the organization HABITAT FOR HUMANITY INTERNATIONAL, INC.	Employer identification number 91-1914868
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AVERAGE HOURS DEVOTED TO RELATED ORGANIZATIONS

GREGORY J. FOSTER, 1.00 HOUR, HABITAT FOR HUMANITY MIDDLE EAST
 MICHAEL E. CARSCADDON, 0.25 HOUR, HABITAT FOR HUMANITY MIDDLE EAST
 AARON LEWIS, 0.25 HOUR, HABITAT FOR HUMANITY MIDDLE EAST
 EDWARD K. QUIBELL, 0.25 HOUR, HABITAT FOR HUMANITY MIDDLE EAST
 ELIZABETH K. BLAKE, 0.25 HOUR, HABITAT FOR HUMANITY MIDDLE EAST

PART XI LINE 5 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES

UNREALIZED GAIN	286,348
IN KIND SERVICE INCOME	293,596
REVALUATION OF ANNUITY & MORTGAGES	(186,703)

TOTAL	393,241
	=====

 ATTACHMENT 1

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

DESPITE A GLOBAL ECONOMY THAT REMAINED FULL OF CHALLENGES, HABITAT FOR HUMANITY HAD ITS MOST PRODUCTIVE YEAR EVER IN FISCAL YEAR 2011 (JULY 1, 2010-JUNE 30, 2011). IN ALL, A RECORD 81,399 FAMILIES BENEFITED FROM HABITAT HOUSING SOLUTIONS DURING THE YEAR, UP 8.6 PERCENT FROM FY'10. HABITAT CONSTRUCTION-NEW HOUSES, REHABS AND REPAIRS-ROSE 40 PERCENT IN THE UNITED STATES. WORLDWIDE, NEARLY 200,000 PEOPLE NOT COUNTED IN THE DIRECT-CONSTRUCTION NUMBERS

Name of the organization	Employer identification number
HABITAT FOR HUMANITY INTERNATIONAL, INC.	91-1914868

ATTACHMENT 1 (CONT'D)

RECEIVED TECHNICAL ASSISTANCE AND HELP WITH LAND TENURE ISSUES THROUGH HABITAT'S WORK.

U.S. AFFILIATE PROGRAMS: HABITAT FOR HUMANITY INTERNATIONAL WORKS WITH MORE THAN 1,500 AFFILIATES IN ALL 50 STATES OF THE UNITED STATES, THE DISTRICT OF COLUMBIA, THE COMMONWEALTH OF PUERTO RICO, THE TERRITORY OF GUAM AND THE U.S. VIRGIN ISLANDS. THE WORK OF HABITAT FOR HUMANITY CANADA, CARRIED OUT BY 72 AFFILIATE OFFICES ACROSS THE COUNTRY, ALSO IS INCLUDED WITHIN THE U.S. PROGRAMS STRUCTURE. AFFILIATES BUILD, RENOVATE AND REPAIR DECENT, AFFORDABLE HOUSING WITH LOW-INCOME FAMILIES AND WORK COOPERATIVELY WITH LIKE-MINDED ORGANIZATIONS TO BUILD COMMUNITIES IN WHICH ALL RESIDENTS CAN LIVE IN DIGNITY. IN FISCAL YEAR 2011, U.S. AFFILIATES SERVED A RECORD 9,098 FAMILIES, BUILDING 4,583 NEW HOUSES, REHABILITATING 1,595 AND MAKING REPAIRS TO ANOTHER 2,920 HOMES-ALL NEW HIGHS. THE STRONG SHOWING WAS LINKED TO A FOCUS ON THREE AREAS: THE NEIGHBORHOOD REVITALIZATION INITIATIVE, NEIGHBORHOOD STABILIZATION PROGRAM EFFORTS AND STRENGTHENING RESTORE CAPACITY AS A FUNDRAISING VEHICLE FOR AFFILIATE WORK. THE NEIGHBORHOOD REVITALIZATION INITIATIVE, INCLUDING 160 U.S. AFFILIATES IN FY'11, HELPS AFFILIATES WORK TO TRANSFORM NEIGHBORHOODS USING A HOLISTIC APPROACH-JOINING RESIDENTS, OTHER NONPROFITS, BUSINESSES, GOVERNMENTS AND COMMUNITIES OF FAITH TO CREATE AND IMPLEMENT A SHARED VISION OF REVITALIZATION. NRI PROJECTS CAN INCLUDE A MIX OF NEW, ENERGY-EFFICIENT HOME CONSTRUCTION; REHABILITATION OF VACANT AND FORECLOSED PROPERTIES;

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HABITAT FOR HUMANITY INTERNATIONAL, INC.	91-1914868

ATTACHMENT 1 (CONT'D)

HOUSE REPAIRS FOR EXISTING LOW-INCOME HOMEOWNERS; AND WEATHERIZATION TO MAKE EXISTING HOUSES MORE ENERGY EFFICIENT AND, THEREFORE, MORE AFFORDABLE TO LOW-INCOME FAMILIES. OVERALL, MORE THAN 1,500 HABITAT HOMES WERE BUILT TO FULL ENERGY STAR CERTIFICATION IN FY'11. ABOUT 125 U.S. AFFILIATES USED FEDERAL NSP FUNDS AS A STIMULUS TO BUILD MORE HOMES. WITH FEDERAL FUNDS AWARDED DIRECTLY TO HABITAT FOR HUMANITY INTERNATIONAL, SEVEN AFFILIATES IN FY'11-IN FLORIDA, TEXAS, CALIFORNIA, NEW YORK AND WISCONSIN-WERE IN THE PROCESS OF STABILIZING COMMUNITIES BY BUILDING 1,062 AFFORDABLE HOMES. ANOTHER FOCUS OF ATTENTION WAS HABITAT RESTORES, OUTLETS WHERE HABITAT AFFILIATES SELL DONATED BUILDING MATERIALS AND HOUSE GOODS. RESTORES PROVIDE AN AFFORDABLE SOURCE OF HOME UPGRADING SUPPLIES, KEEP TONS OF MATERIAL OUT OF LANDFILLS, AND RAISE FUNDS TO BUILD HOUSES-ABOUT \$80 MILLION IN FY11. IN ADDITION TO WORK IN THEIR OWN COMMUNITIES, U.S. HABITAT AFFILIATES IN FY'11 CONTRIBUTED CASH TO HELP DELIVER HOUSING SOLUTIONS FOR MORE THAN 3,000 FAMILIES INTERNATIONALLY, INCLUDING SOME \$1.8 MILLION FOR HABITAT'S WORK RESPONDING TO THE DEVASTATING 2010 EARTHQUAKE IN HAITI. IN CANADA, AFFILIATES BUILT 217 NEW HOMES IN FY11, INCLUDING HABITAT FOR HUMANITY CANADA'S MILESTONE 2,000TH HOME. AFFILIATES REHABBED EIGHT ADDITIONAL HOMES IN FY'11. HFH CANADA ALSO LAUNCHED THE "360 BUILD SMART PARTNERSHIP" TO INCREASE FUTURE BUILDING CAPACITY BY FOCUSING ON BUILDING SUSTAINABLY, PROVIDING FINANCIAL EDUCATION FOR HOME PARTNERS, CREATING VOLUNTEER RETENTION PROGRAMS, DEVELOPING LOCAL

Name of the organization	Employer identification number
HABITAT FOR HUMANITY INTERNATIONAL, INC.	91-1914868

ATTACHMENT 1 (CONT'D)

PARTNERSHIPS AND FOSTERING SAFETY.

ATTACHMENT 2FORM 990, PART III - PROGRAM SERVICE, LINE 4B

INTERNATIONAL PROGRAM: OUTSIDE THE UNITED STATES, HABITAT FOR HUMANITY INTERNATIONAL PARTNERS WITH HABITAT-AFFILIATED ENTITIES WORLDWIDE IN CREATING ACCESS TO DECENT, AFFORDABLE HOUSING, AND ASSOCIATING WITH OTHER ORGANIZATIONS THAT HAVE A KINDRED PURPOSE. DURING FY'11, HABITAT WAS ACTIVE IN MORE THAN 80 COUNTRIES, DIVIDED ADMINISTRATIVELY INTO FOUR GEOGRAPHIC REGIONS: AFRICA-MIDDLE EAST, SERVING 13,503 FAMILIES IN FY'11; ASIA-PACIFIC, 22,600 FAMILIES SERVED; EUROPE-CENTRAL ASIA, 4,669 FAMILIES SERVED; AND LATIN AMERICA-CARIBBEAN, WITH 31,304 FAMILIES SERVED. WHILE HOUSING STRATEGIES VARY FROM LOCATION TO LOCATION BASED ON LOCAL NEEDS, HABITAT PROGRAMS IN FY'11 SHARED SOME GLOBAL THEMES: WORKING WITH PARTICULARLY VULNERABLE POPULATIONS; WORKING TO ENSURE THAT IMPROVED HOUSING INCLUDED THE INTERVENTIONS NECESSARY FOR IMPROVED HEALTH; BUILDING FUTURES AS WELL AS IMPROVED HOUSING BY EMPHASIZING TRAINING AND EDUCATION; AND EXPANDING THE USE OF HOUSING MICROFINANCE AS A MEANS OF ENABLING INCREMENTAL HOUSING IMPROVEMENTS IN LINE WITH FAMILIES' ECONOMIC CIRCUMSTANCES. HABITAT FOR HUMANITY WAS INVOLVED IN DISASTER RESPONSE PROJECTS AROUND THE GLOBE, INCLUDING IN HAITI, CHILE, JAPAN, ROMANIA, NEW ZEALAND, SRI LANKA, BRAZIL AND INDONESIA. GLOBALLY, HABITAT SERVED 26,982 FAMILIES WITH DISASTER RESPONSE

Name of the organization HABITAT FOR HUMANITY INTERNATIONAL, INC.	Employer identification number 91-1914868
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ATTACHMENT 2 (CONT'D)

AND MITIGATION PROJECTS IN FY'11. A VERY SMALL SAMPLING OF OTHER PROGRAMMATIC INITIATIVES FROM AROUND HABITAT'S WORLD DURING THE YEAR: IN AFRICA AND THE MIDDLE EAST, HABITAT ETHIOPIA SERVED 3,150 FAMILIES, THE LARGEST EVER FOR A COUNTRY IN AME FOR A SINGLE YEAR, FOLLOWED BY EGYPT WITH 2,200 AND KENYA AND MADAGASCAR, WHICH EACH REACHED MORE THAN 1,500 FAMILIES; HFH COTE D'IVOIRE LAUNCHED H.O.P.E., A PROGRAM TO SERVE MORE THAN 14,000 ORPHANS, VULNERABLE CHILDREN AND THEIR CAREGIVERS OVER THE NEXT FIVE YEARS; AND HFH MALAWI AND HFH GHANA STARTED HOUSING MICROFINANCE PILOT PROJECTS AIMED AT EXPONENTIALLY INCREASING THE NUMBER OF FAMILIES THAT CAN BE SERVED. IN THE ASIA-PACIFIC AREA, FY'11 SAW PLANNING FOR THE LAUNCH OF MICROBUILD INDIA, PART OF A BROADER HABITAT INITIATIVE THAT WILL OFFER WHOLESALE FINANCING TO MICROFINANCE INSTITUTIONS THAT WILL VENTURE INTO HOUSING FINANCE, WITH HABITAT PROVIDING TECHNICAL ASSISTANCE TO THE MFIS AND PARTNER FAMILIES; HFH CAMBODIA LAUNCHED A PILOT PARTNERSHIP PROGRAM TARGETING FAMILIES AND COMMUNITIES AFFECTED BY HIV-AIDS, WHILE HFH VIETNAM CONTINUED A WATER AND SANITATION INITIATIVE THAT ULTIMATELY WILL BENEFIT MORE THAN 180,000 PEOPLE; HFH NEPAL CELEBRATED ITS 10,000TH HOUSE BUILT; AND 1,600 YOUTH VOLUNTEERS HELPED HFH PHILIPPINES KICK OFF "I BUILD," A FOUR-YEAR INITIATIVE THAT WILL CELEBRATE 25 YEARS OF PROVIDING DECENT, AFFORDABLE HOMES IN THE COUNTRY. IN

Name of the organization	Employer identification number
HABITAT FOR HUMANITY INTERNATIONAL, INC.	91-1914868

ATTACHMENT 2 (CONT'D)

EUROPE-CENTRAL ASIA, HABITAT FOR HUMANITY EXPANDED ITS WORK INTO SERBIA AND BOSNIA & HERZEGOVINA; HFH ROMANIA HELPED MORE THAN 400 FAMILIES RECOVER FROM FLOODING THAT LEFT MORE THAN 15,000 PEOPLE DISPLACED; HFH MACEDONIA PARTICIPATED IN A PILOT PROJECT PROVIDING ENERGY-EFFICIENCY UPGRADES FOR APARTMENT BUILDINGS; AND HABITAT TAJIKISTAN WAS RECOGNIZED AT THE WORLD RECONSTRUCTION CONFERENCE FOR THE USE OF MULBERRY BRANCHES AS REINFORCEMENT IN HOME RECONSTRUCTION. IN HABITAT'S LATIN AMERICA AND CARIBBEAN AREA, WORK CONTINUED TOWARD THE GOAL OF SERVING 50,000 HAITIAN FAMILIES WITHIN FIVE YEARS OF THE CATASTROPHIC JANUARY 2010 EARTHQUAKE, WITH 16,670 FAMILIES SERVED THROUGH REPAIRS, REHABS AND NEW CONSTRUCTION IN FY'11 AND A MAJOR URBAN DEVELOPMENT PROJECT LAUNCHED IN THE SIMON-PELE NEIGHBORHOOD OF PORT-AU-PRINCE; HABITAT NATIONAL ORGANIZATIONS UNDERTOOK A VARIETY OF ADVOCACY INITIATIVES RESULTING IN TANGIBLE RESULTS IN CREATING ACCESS TO AFFORDABLE HOUSING; HFH HONDURAS CELEBRATED THE MILESTONE OF 10,000 FAMILIES SERVED; AND HABITAT EXPANDED ITS PARTNERSHIP WITH THE PAN-AMERICAN HEALTH ORGANIZATION FOR HEALTHY HOUSING PROJECTS.

ATTACHMENT 3

FORM 990, PART III - PROGRAM SERVICE, LINE 4C

PUBLIC AWARENESS AND EDUCATION: THROUGH THE PRINTED, SPOKEN AND ELECTRONIC WORD, HABITAT WORKS TO PUT SHELTER ON THE HEARTS AND MINDS OF PEOPLE IN SUCH A POWERFUL WAY THAT POVERTY HOUSING AND HOMELESSNESS BECOME SOCIALLY, POLITICALLY AND RELIGIOUSLY

Name of the organization	Employer identification number
HABITAT FOR HUMANITY INTERNATIONAL, INC.	91-1914868

ATTACHMENT 3 (CONT'D)

UNACCEPTABLE. HABITAT WORLD MAGAZINE IS THE FLAGSHIP PRINT PUBLICATION, WHILE HABITAT.ORG IS THE PRIMARY ELECTRONIC VEHICLE FOR DISTRIBUTION OF HABITAT INFORMATION TO THE PUBLIC. THE ORGANIZATION ALSO WAS ACTIVE IN SOCIAL MEDIA OUTREACH AND PRODUCED AND DISTRIBUTED WIDELY PLAYED PUBLIC SERVICE ANNOUNCEMENTS. THE ANNUAL JIMMY & ROSALYNN CARTER WORK PROJECT AND WORLD HABITAT DAY ACTIVITIES HELP SHINE THE SPOTLIGHT ON THE NEED FOR AFFORDABLE HOUSING. THE 2010 CARTER PROJECT SAW THE FORMER U.S. PRESIDENT AND FIRST LADY JOINING HUNDREDS OF VOLUNTEERS FOR A WEEK TO BUILD OR REHABILITATE HOMES IN WASHINGTON, D.C.; BALTIMORE AND ANNAPOLIS, MD.; MINNEAPOLIS AND ST. PAUL, MINN.; AND BIRMINGHAM, ALA. HABITAT'S SHELTER REPORT 2011, RELEASED IN CONJUNCTION WITH WORLD HABITAT DAY, FOCUSED ON THE CONNECTIONS BETWEEN HEALTH AND HOUSING, A THEME IN HABITAT'S BROAD, MULTIFACETED AND GLOBAL ADVOCACY EFFORTS TO HELP REMOVE CONSTRAINTS TO DECENT HOUSING FOR ALL. IN FY'11, WITH THE HELP OF COUNTLESS INDIVIDUAL AND CORPORATE FINANCIAL SUPPORTERS AND ABOUT 1 MILLION HANDS-ON VOLUNTEERS WHO LEARN OF HABITAT'S WORK THROUGH PUBLIC AWARENESS EFFORTS, HABITAT FOR HUMANITY CONTINUED TO CARRY OUT ITS MISSION:

Name of the organization	Employer identification number
HABITAT FOR HUMANITY INTERNATIONAL, INC.	91-1914868

ATTACHMENT 3 (CONT'D)

SEEKING TO PUT GOD'S LOVE INTO ACTION BY BRINGING PEOPLE TOGETHER
TO BUILD HOMES, COMMUNITIES AND HOPE.

ATTACHMENT 4

PART VII - CONTINUATION OF OFFICERS, DIRECTORS, TRUSTEES,
KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES

(1)=IND.TRUSTEE/DIR. (2)=INS.TRUSTEE (3)=OFFICER (4)=KEY EMP. (5)=HIGHEST COMP. (6)=FORMER

	(A) NAME AND TITLE	(B) HOURS	(C) POSITION						COMPENSATION FROM		
			(1)	(2)	(3)	(4)	(5)	(6)	(D) ORG.	(E) REL. ORG.	(F) OTHER
29	CHRISTOPHER D CLARKE SVP - MARKETING&COMMUNICATIONS	55.00				X			141,549.	0.	9,454.
30	MARK CROZET SVP - DEVELOPMENT	55.00				X			141,704.	0.	8,348.
31	LARRY D GLUTH SVP - UNITED STATES & CANADA	55.00				X			135,872.	0.	10,005.
32	EDWARD K QUIBELL SVP - ADMIN & CFO	55.00				X			160,052.	0.	9,451.
33	SUSAN DETITTA ASSISTANT SECRETARY	45.00				X			42,831.	0.	8,282.
34	HILARY HARP ASSISTANT SECRETARY	50.00				X			120,560.	0.	10,575.
35	AARON LEWIS ASSISTANT SECRETARY	50.00				X			95,748.	0.	4,131.
36	MARK ANDREWS VP HFHI HAITI RECOVERY	55.00				X			117,904.	0.	3,537.
37	GREGORY J FOSTER VP - AREA (AFRICA/MIDDLE EAST)	55.00					X		205,565.	0.	7,040.
38	DONALD S HASZCZYN VP - AREA (EUROPE/CENTRAL ASIA)	55.00					X		186,020.	0.	6,296.
39	RICHARD K HATHAWAY VP - AREA (ASIA PACIFIC)	55.00					X		311,003.	0.	4,127.
40	TORRE NELSON VP-LATIN AMERICA/CARRIB OFFICE	55.00					X		156,717.	0.	5,064.
41	CHARITO SARIAS AYCO DR PRGRM DEV & SUPPORT AP	50.00						X	188,402.	0.	6,020.
42	PETER P GAPE DIRECTOR - REGIONAL PRGRM AP	50.00						X	171,786.	0.	4,795.
43	GERARD G. SNOWBALL ASSOC DIR RESOURCE DEV/AP	45.00						X	191,252.	0.	5,308.
44	JONATHAN J GIBSON DIRECTOR OF FIN ADMIN/AME	50.00						X	185,980.	0.	3,701.
45	GREGOIRE MUSHYIRAHAMWE SR. AUDITOR/AME	45.00						X	184,714.	0.	3,193.

Name of the organization	Employer identification number
HABITAT FOR HUMANITY INTERNATIONAL, INC.	91-1914868
ATTACHMENT 5	

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
DEVELOPMENT INNOVATIONS GROUP 4330 EAST WEST HWY 1550 BETHESDA, MD 20814	PROFESSIONAL SVCS	1,603,989.
INFOCISION MANAGEMENT CORP 325 SPRINGSIDE DRIVE AKRON, OH 44333	DIRECT MARKETING	1,205,011.
THOMPSON HABIB & DENISON INC 80 HAYDEN AVENUE STE 300 LEXINGTON, MA 02421	DIRECT MARKETING	1,058,881.
DONOR SERVICES GROUP LLC 6715 W SUNSET BOULEVARD LOS ANGELES, CA 90028	DIRECT MARKETING	842,655.
BLACKBAUD INC 2 CANAL PARK STE 4300 CAMBRIDGE, MA 02141	HOSTING & DATA MGMT	749,081.
TOTAL COMPENSATION		<u>5,459,617.</u>

**SCHEDULE R
(Form 990)**Department of the Treasury
Internal Revenue Service**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

2010**Open to Public
Inspection**▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**▶ **Attach to Form 990.**▶ **See separate instructions.**

Name of the organization

HABITAT FOR HUMANITY INTERNATIONAL, INC.

Employer identification number

91-1914868

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) -----					
(2) -----					
(3) -----					
(4) -----					
(5) -----					
(6) -----					

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) HABITAT FOR HUMANITY MIDDLE EAST 52-2182590 1424 K STREET, NW WASHINGTON, DC 20005	ERADICATE POV	DC	501 (C) (3)	7	N/A	X	
(2) HABITAT FOR HUMANITY PURCHASING GROUP 52-2298238 121 HABITAT STREET AMERICUS, GA 31709	INSURANCE	GA	N/A	N/A	N/A	X	
(3) NADACIA HABITAT FOR HUMANITY INTL ZOCHOVA 6-8 811 03 BRATISLAVA, LO	ERADICATE POV	LO	N/A	N/A	N/A	X	
(4) HABITAT FOR HUMANITY HAITI ANGLE RUE LOUVERTURE FLABUERT PETION-VILLE, HA	ERADICATE POV	HA	N/A	N/A	N/A	X	
(5) -----							
(6) -----							
(7) -----							

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

Schedule R (Form 990) 2010

JSA

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91-1914868

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) -----												
(2) -----												
(3) -----												
(4) -----												
(5) -----												
(6) -----												
(7) -----												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) -----							
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?		
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to other organization(s)	1b	X
c Gift, grant, or capital contribution from other organization(s)	1c	X
d Loans or loan guarantees to or for other organization(s)	1d	X
e Loans or loan guarantees by other organization(s)	1e	X
f Sale of assets to other organization(s)	1f	X
g Purchase of assets from other organization(s)	1g	X
h Exchange of assets	1h	X
i Lease of facilities, equipment, or other assets to other organization(s)	1i	X
j Lease of facilities, equipment, or other assets from other organization(s)	1j	X
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	X
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	X
m Sharing of facilities, equipment, mailing lists, or other assets	1m	X
n Sharing of paid employees	1n	X
o Reimbursement paid to other organization for expenses	1o	X
p Reimbursement paid by other organization for expenses	1p	X
q Other transfer of cash or property to other organization(s)	1q	X
r Other transfer of cash or property from other organization(s)	1r	X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved	(d) Method of determining amount involved
(1) HABITAT FOR HUMANITY MIDDLE EAST	K	1,065,577.	
(2) HABITAT FOR HUMANITY HAITI	Q	13,340,336.	
(3) NADACIA HABITAT FOR HUMANITY INTERNATIONAL	Q	1,296,955.	
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership**(Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No
(1) _____										
(2) _____										
(3) _____										
(4) _____										
(5) _____										
(6) _____										
(7) _____										
(8) _____										
(9) _____										
(10) _____										
(11) _____										
(12) _____										
(13) _____										
(14) _____										
(15) _____										
(16) _____										

Schedule R (Form 990) 2010

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

FORM 990, SCHEDULE R, PART II

HFHI CONTROLS FOUR RELATED ENTITIES AS LISTED ON SCHEDULE R. HFH MIDDLE EAST FILES A SEPARATE FORM 990, WHICH SHOULD BE CONSULTED FOR ADDITIONAL INFORMATION ABOUT THAT ENTITY. HABITAT FOR HUMANITY HAITI AND NADACIA HABITAT FOR HUMANITY INTERNATIONAL ARE FOREIGN NON-PROFIT ENTITIES THAT DO NOT FILE U.S. INCOME TAX RETURNS.

RELATED ENTITIES

FORM 990, SCHEDULE R, PART V

HABITAT FOR HUMANITY INTERNATIONAL (HFHI) HAS DEVELOPED A PROGRAM THAT MAKES AVAILABLE VARIOUS NECESSARY LINES OF INSURANCE TO ITS U.S. AFFILIATES. IN ORDER FOR HABITAT FOR HUMANITY AFFILIATES TO PURCHASE INSURANCE, HFHI INCORPORATED A SPECIAL PURPOSE ENTITY TO COMPLY WITH THE FEDERAL LIABILITY RISK RETENTION ACT OF 1986. HABITAT FOR HUMANITY PURCHASING GROUP (PG) IS INCORPORATED AS A GEORGIA NONPROFIT CORPORATION AND UNDER GEORGIA'S PURCHASING GROUP STATUTE. THE PG IS CONTROLLED BY HFHI THROUGH HFHI STAFF WHO ACT AS BOARD MEMBERS, AND WHO HOLD ANNUAL AND SPECIAL MEETINGS AS NECESSARY TO REVIEW AND TO RENEW THE INSURANCE COVERAGE AND TO MAKE OTHER DECISIONS REGARDING THE INSURANCE PROGRAM. THE ENTITY EXISTS SOLELY TO PERMIT AFFILIATES TO PURCHASE THE INSURANCE, HAS NO FINANCIAL ACTIVITY AND HOLDS NO ASSETS.

Return by a U.S. Transferor of Property to a Foreign Corporation

► Attach to your income tax return for the year of the transfer or distribution.

Part I U.S. Transferor Information (see instructions)

Name of transferor <u>HABITAT FOR HUMANITY INTERNATIONAL, INC.</u>	Identifying number (see instructions) <u>91-1914868</u>
---	--

1 If the transferor was a corporation, complete questions 1a through 1d.

- a** If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by 5 or fewer domestic corporations? ☐ Yes ☐ No
- b** Did the transferor remain in existence after the transfer? ☒ Yes ☐ No

If not, list the controlling shareholder(s) and their identifying number(s):

Controlling shareholder	Identifying number

- c** If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation? ☐ Yes ☐ No
- If not, list the name and employer identification number (EIN) of the parent corporation:

Name of parent corporation	EIN of parent corporation

- d** Have basis adjustments under section 367(a)(5) been made? ☐ Yes ☒ No

2 If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under section 367), complete questions 2a through 2d.

a List the name and EIN of the transferor's partnership:

Name of partnership	EIN of partnership

- b** Did the partner pick up its pro rata share of gain on the transfer of partnership assets? ☐ Yes ☐ No
- c** Is the partner disposing of its **entire** interest in the partnership? ☐ Yes ☐ No
- d** Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? ☐ Yes ☐ No

Part II Transferee Foreign Corporation Information (see instructions)

3 Name of transferee (foreign corporation) <u>HABITAT FOR HUMANITY HAITI</u>	4 Identifying number, if any <u>FOREIGNUS</u>
--	---

5 Address (including country) ANGLE RUE LOUVERTURE ET FLABUERT #111

PETION-VILLE HAITI HA

6 Country code of country of incorporation or organization (see instructions)

HA

7 Foreign law characterization (see instructions)

NON-PROFIT CORPORATION

8 Is the transferee foreign corporation a controlled foreign corporation? ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see separate instructions.

Form **926** (Rev. 12-2008)

Part III Information Regarding Transfer of Property (see instructions)

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	VAR		13,340,336.		
Stock and securities					
Installment obligations, account receivables or similar property					
Foreign currency or other property denominated in foreign currency					
Inventory					
Assets subject to depreciation recapture (see Temp. Regs. sec. 1.367(a)-4T(b))					
Tangible property used in trade or business not listed under another category					
Intangible property					
Property to be leased (as described in Temp. Regs. sec. 1.367(a)-4T(c))					
Property to be sold (as described in Temp. Regs. sec. 1.367(a)-4T(d))					
Transfers of oil and gas working interests (as described in Temp. Regs. sec. 1.367(a)-4T(e))					
Other property					

Supplemental Information Required To Be Reported (see instructions):

Part IV Additional Information Regarding Transfer of Property(see instructions)**9** Enter the transferor's interest in the foreign transferee corporation before and after the transfer:(a) Before 100 % (b) After 100 %**10** Type of nonrecognition transaction (see instructions) ► SECTION 351**11** Indicate whether any transfer reported in Part III is subject to any of the following:

a Gain recognition under section 904(f)(3)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b Gain recognition under section 904(f)(5)(F)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
c Recapture under section 1503(d)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
d Exchange gain under section 987	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

12 Did this transfer result from a change in the classification of the transferee to that of a foreign corporation? ☐ Yes ☒ No**13** Indicate whether the transferor was required to recognize income under Temporary Regulations sections 1.367(a)-4T through 1.367(a)-6T for any of the following:

a Tainted property	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b Depreciation recapture	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
c Branch loss recapture	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
d Any other income recognition provision contained in the above-referenced regulations	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

14 Did the transferor transfer assets which qualify for the trade or business exception under section 367(a)(3)? ☐ Yes ☒ No**15a** Did the transferor transfer foreign goodwill or going concern value as defined in Temporary Regulations section 1.367(a)-1T(d)(5)(iii)? ☐ Yes ☒ No**b** If the answer to line 15a is "Yes," enter the amount of foreign goodwill or going concern value transferred ► \$ _____**16** Was cash the only property transferred? ☒ Yes ☐ No**17a** Was intangible property (within the meaning of section 936(h)(3)(B)) transferred as a result of the transaction? ☐ Yes ☒ No**b** If "Yes," describe the nature of the rights to the intangible property that was transferred as a result of the transaction:

Form **926** (Rev. 12-2008)

Return by a U.S. Transferor of Property to a Foreign Corporation

► Attach to your income tax return for the year of the transfer or distribution.

Part I U.S. Transferor Information (see instructions)

Name of transferor <u>HABITAT FOR HUMANITY INTERNATIONAL, INC.</u>	Identifying number (see instructions) <u>91-1914868</u>
---	--

1 If the transferor was a corporation, complete questions 1a through 1d.

- a** If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by 5 or fewer domestic corporations? ☐ Yes ☐ No
- b** Did the transferor remain in existence after the transfer? ☒ Yes ☐ No

If not, list the controlling shareholder(s) and their identifying number(s):

Controlling shareholder	Identifying number

- c** If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation? ☐ Yes ☐ No
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Name of parent corporation	EIN of parent corporation

- d** Have basis adjustments under section 367(a)(5) been made? ☐ Yes ☒ No

2 If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under section 367), complete questions 2a through 2d.

a List the name and EIN of the transferor's partnership:

Name of partnership	EIN of partnership

- b** Did the partner pick up its pro rata share of gain on the transfer of partnership assets? ☐ Yes ☐ No
- c** Is the partner disposing of its **entire** interest in the partnership? ☐ Yes ☐ No
- d** Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? ☐ Yes ☐ No

Part II Transferee Foreign Corporation Information (see instructions)

3 Name of transferee (foreign corporation) <u>NADACIA HABITAT FOR HUMANITY INTERNATIONAL</u>	4 Identifying number, if any <u>FOREIGNUS</u>
--	---

5 Address (including country) ZOCHOVA 6-8 81103

BRATISLAVA SLOVAK REPUBLIC LO

6 Country code of country of incorporation or organization (see instructions)

LO

7 Foreign law characterization (see instructions)

NON-PROFIT CORPORATION

8 Is the transferee foreign corporation a controlled foreign corporation? ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see separate instructions.

Part III Information Regarding Transfer of Property (see instructions)

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	VAR		1,296,955.		
Stock and securities					
Installment obligations, account receivables or similar property					
Foreign currency or other property denominated in foreign currency					
Inventory					
Assets subject to depreciation recapture (see Temp. Regs. sec. 1.367(a)-4T(b))					
Tangible property used in trade or business not listed under another category					
Intangible property					
Property to be leased (as described in Temp. Regs. sec. 1.367(a)-4T(c))					
Property to be sold (as described in Temp. Regs. sec. 1.367(a)-4T(d))					
Transfers of oil and gas working interests (as described in Temp. Regs. sec. 1.367(a)-4T(e))					
Other property					

Supplemental Information Required To Be Reported (see instructions):

Part IV Additional Information Regarding Transfer of Property(see instructions)**9** Enter the transferor's interest in the foreign transferee corporation before and after the transfer:(a) Before 100 % (b) After 100 %**10** Type of nonrecognition transaction (see instructions) ► SECTION 351**11** Indicate whether any transfer reported in Part III is subject to any of the following:

a Gain recognition under section 904(f)(3)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b Gain recognition under section 904(f)(5)(F)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
c Recapture under section 1503(d)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
d Exchange gain under section 987	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

12 Did this transfer result from a change in the classification of the transferee to that of a foreign corporation? ☐ Yes ☒ No**13** Indicate whether the transferor was required to recognize income under Temporary Regulations sections 1.367(a)-4T through 1.367(a)-6T for any of the following:

a Tainted property	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b Depreciation recapture	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
c Branch loss recapture	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
d Any other income recognition provision contained in the above-referenced regulations	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

14 Did the transferor transfer assets which qualify for the trade or business exception under section 367(a)(3)? ☐ Yes ☒ No**15a** Did the transferor transfer foreign goodwill or going concern value as defined in Temporary Regulations section 1.367(a)-1T(d)(5)(iii)? ☐ Yes ☒ No**b** If the answer to line 15a is "Yes," enter the amount of foreign goodwill or going concern value transferred ► \$ _____**16** Was cash the only property transferred? ☒ Yes ☐ No**17a** Was intangible property (within the meaning of section 936(h)(3)(B)) transferred as a result of the transaction? ☐ Yes ☒ No**b** If "Yes," describe the nature of the rights to the intangible property that was transferred as a result of the transaction:

Form **926** (Rev. 12-2008)