

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2015
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2015 calendar year, or tax year beginning 07/01/15, and ending 06/30/16

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <p align="center">Pensacola Habitat For Humanity, Inc.</p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p>300 West Leonard Street</p> City or town, state or province, country, and ZIP or foreign postal code <p>Pensacola FL 32501</p>	D Employer identification number <p align="center">59-2186044</p> E Telephone number <p align="center">850-434-5456</p> G Gross receipts \$ 8,729,236
F Name and address of principal officer: <p>Timothy H. Evans 300 West Leonard Street Pensacola FL 32501</p>		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
J Website: ▶ pensacolahabitat.org		L Year of formation: 1981
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		M State of legal domicile: FL

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To build houses and improve communities in partnership with low and very low income families in Escambia County and Santa Rosa County, Florida.		
	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 2015 (Part V, line 2a)	5	45
	6	Total number of volunteers (estimate if necessary)	6	4577
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	7,500
	b Net unrelated business taxable income from Form 990-T, line 34	7b	-160	
Revenue	8	Contributions and grants (Part VIII, line 1h)	4,067,357	2,862,400
	9	Program service revenue (Part VIII, line 2g)		0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,073	34,548
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,042,592	3,209,355
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,114,022	6,106,303
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
14		Benefits paid to or for members (Part IX, column (A), line 4)		0
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,953,355	2,159,387
16a		Professional fundraising fees (Part IX, column (A), line 11e)		0
		b Total fundraising expenses (Part IX, column (D), line 25) ▶ 176,501		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,922,446	3,276,444
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,875,801	5,435,831
19		Revenue less expenses. Subtract line 18 from line 12	-761,779	670,472
Net Assets or Fund Balances		20	Total assets (Part X, line 16)	43,523,768
	21	Total liabilities (Part X, line 26)	5,833,710	6,297,267
	22	Net assets or fund balances. Subtract line 21 from line 20	37,690,058	38,360,530

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 Timothy H. Evans	Date	
	Type or print name and title Executive Director		
Paid Preparer Use Only	Print/Type preparer's name James D. Carlson	Preparer's signature <i>James D. Carlson</i>	Date 11/17/16
	Firm's name ▶ Carlson & Company, Chartered	Firm's EIN ▶	Check <input type="checkbox"/> if self-employed
	Firm's address ▶ Pensacola, FL 32504	Phone no. 850-476-6900	

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

To build houses and improve communities in partnership with low and very low income families in Escambia County and Santa Rosa County, Florida.

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 organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ **3,846,038** including grants of \$) (Revenue \$ **3,386,527**)

To provide home ownership for low income families by building affordable houses and financing them to the buyer at no interest.

4b (Code:) (Expenses \$ **344,221** including grants of \$) (Revenue \$ **412,037**)

To provide affordable home furnishings and building supplies for low income families.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

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

4e Total program service expenses **4,190,259**

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		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? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	X	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	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? If "Yes," complete Schedule D, Part VI	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		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? If "Yes," complete Schedule D, Part VIII		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? If "Yes," complete Schedule D, Part IX	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
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? If "Yes," complete Schedule J		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
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?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
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? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	13
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
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	45
2b	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
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
4b	If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
6b	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).		
7a	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
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
7d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
7h	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. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders	11a	
11b	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	
12b	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.		
13a	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	
13b	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	
13c	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
14b	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 or note to any line in this Part VI

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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
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?		<input checked="" type="checkbox"/>
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?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?		<input checked="" type="checkbox"/>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		<input checked="" type="checkbox"/>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		<input checked="" type="checkbox"/>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	<input checked="" type="checkbox"/>	
b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
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		<input checked="" type="checkbox"/>

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		<input checked="" type="checkbox"/>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<input checked="" type="checkbox"/>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	<input checked="" type="checkbox"/>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<input checked="" type="checkbox"/>	
12c			
13	Did the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
14	Did the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
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	<input checked="" type="checkbox"/>	
b	Other officers or key employees of the organization	<input checked="" type="checkbox"/>	
	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?	<input checked="" type="checkbox"/>	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	<input checked="" type="checkbox"/>	
16b			

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **None**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records: **Dianne McMaster**, **300 W. Leonard Street**, **Pensacola**

FL 32501 850-434-5456

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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) Larry Vogelsang	10.00									
Chairman	0.00	X		X			0	0	0	
(2) Al Coby	10.00									
Vice Chairman	0.00	X		X			0	0	0	
(3) Dr. Gary Cumberland	10.00									
Secretary	0.00	X		X			0	0	0	
(4) Ron Tuttle	10.00									
Treasurer	0.00	X		X			0	0	0	
(5) Donna Adams	2.00									
Director	0.00	X					0	0	0	
(6) Gerald Adcox	2.00									
Director	0.00	X					0	0	0	
(7) Michael Adkins	2.00									
Director	0.00	X					0	0	0	
(8) Mei Davis	2.00									
Director	0.00	X					0	0	0	
(9) Julie Griffin	2.00									
Director	0.00	X					0	0	0	
(10) Shirley Henderson	2.00									
Director	0.00	X					0	0	0	
(11) Sandra Hodges	2.00									
Director	0.00	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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(12) Pat Hubbard	2.00									
Director	0.00	X						0	0	
(13) Albert Jackson Jr.	2.00									
Director	0.00	X						0	0	
(14) T.J. Jenkins	2.00									
Director	0.00	X						0	0	
(15) Dr. Dione King	2.00									
Director	0.00	X						0	0	
(16) Larry Northup	2.00									
Director	0.00	X						0	0	
(17) Tina Pace	2.00									
Director	0.00	X						0	0	
(18) Betty Salter	2.00									
Director	0.00	X						0	0	
(19) John Reble	2.00									
Director	0.00	X						0	0	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A								178,176		
d Total (add lines 1b and 1c)								178,176		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		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? If "Yes," complete Schedule J for such individual		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? If "Yes," complete Schedule J for such person		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. Report compensation for the calendar year ending with or within the organization's tax year.

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(20) Chuck Reese	2.00									
Director	0.00	X						0	0	
(21) Josh Womack	2.00									
Director	0.00	X						0	0	
(22) Karen Wright	2.00									
Director	0.00	X						0	0	
(23) Timothy H. Evans	45.00									
Executive Director	0.00			X				101,529	0	
(24) Hal Major	38.00									
Chief Oper. Officer	0.00			X				76,647	0	
1b Sub-total								178,176		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	
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? If "Yes," complete Schedule J for such individual	4	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	

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. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	298,100			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,564,300			
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f		2,862,400			
Program Service Revenue	2a	Busn. Code				
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		24,848	24,754	94	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real	25,256			
		(ii) Personal				
	b Less: rental exps.					
	c Rental inc. or (loss)	25,256				
	d Net rental income or (loss)		25,256	17,756	7,500	
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other	9,700			
	b Less: cost or other basis & sales exps.					
	c Gain or (loss)	9,700				
	d Net gain or (loss)		9,700	9,700		
	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					
	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						
10a Gross sales of inventory, less returns and allowances	a	2,643,429				
	b Less: cost of goods sold	2,622,933				
c Net income or (loss) from sales of inventory		20,496	-368,805	389,301		
Miscellaneous Revenue	Busn. Code					
11a Mortgage Discount Amortizatio		3,050,814	3,050,814			
b Late Fee Income		82,884	82,884			
c Income - Spc Evnt - Food Truc		16,189	16,189			
d All other revenue		13,716	13,716			
e Total. Add lines 11a-11d		3,163,603				
12 Total revenue. See instructions.		6,106,303	2,847,008	7,500	389,395	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

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 domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	178,176	115,814	62,362	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,436,741	915,059	425,037	96,645
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	25,925	16,137	8,882	906
9 Other employee benefits	228,727	154,767	58,729	15,231
10 Payroll taxes	289,818	206,377	69,478	13,963
11 Fees for services (non-employees):				
a Management				
b Legal	94,256	81,814	12,442	
c Accounting	25,000		25,000	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	65,689	38,014	1,750	25,925
13 Office expenses	146,168	43,658	78,679	23,831
14 Information technology	40,423	4,524	35,899	
15 Royalties				
16 Occupancy	156,633	113,163	43,470	
17 Travel	43,631	43,631		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	16,688	16,688		
20 Interest	107,827	80,540	27,287	
21 Payments to affiliates	28,297	28,297		
22 Depreciation, depletion, and amortization	162,494	32,612	129,882	
23 Insurance	116,778	58,804	57,974	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Cost of houses transferre	7,466,155	7,466,155		
b Note payable discount amo	59,709	59,709		
c Miscellaneous expenses	31,153		31,153	
d Admin - Loan Renewal Cost	15,789		15,789	
e All other expenses	-5,300,246	-5,285,504	-14,742	
25 Total functional expenses. Add lines 1 through 24e	5,435,831	4,190,259	1,069,071	176,501
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	687,466	1	776,568
	2	Savings and temporary cash investments	302,042	2	189,154
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	673,576	4	240,427
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other 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). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	27,592,517	7	28,693,959
	8	Inventories for sale or use	74,457	8	61,724
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3,892,255		
	b	Less: accumulated depreciation	10b 935,269	10c	2,956,986
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	1,443,659
	14	Intangible assets		14	217,471
	15	Other assets. See Part IV, line 11	11,152,924	15	10,077,849
16	Total assets. Add lines 1 through 15 (must equal line 34)	43,523,768	16	44,657,797	
Liabilities	17	Accounts payable and accrued expenses	193,889	17	161,899
	18	Grants payable		18	
	19	Deferred revenue	51,550	19	118,960
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	644,158	21	644,926
	22	Loans and other 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	4,944,113	23	5,371,482
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	5,833,710	26	6,297,267
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	28,359,033	27	29,331,619
	28	Temporarily restricted net assets	9,307,993	28	9,005,879
	29	Permanently restricted net assets	23,032	29	23,032
	Organizations that do not follow SFAS 117 (ASC 958), 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	37,690,058	33	38,360,530	
34	Total liabilities and net assets/fund balances	43,523,768	34	44,657,797	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,106,303
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,435,831
3	Revenue less expenses. Subtract line 2 from line 1	3	670,472
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	37,690,058
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	38,360,530

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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	
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
3b	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.		

Public Charity Status and Public Support

OMB No. 1545-0047

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

2015

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

Pensacola Habitat For Humanity, Inc.

Employer identification number

59-2186044

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 (Form 990 or 990-EZ).)
- 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g 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 (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	13,351,181	11,081,560	3,613,761	4,067,357	2,862,400	34,976,259
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	13,351,181	11,081,560	3,613,761	4,067,357	2,862,400	34,976,259
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						34,976,259

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	13,351,181	11,081,560	3,613,761	4,067,357	2,862,400	34,976,259
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	-120,262	-1,733	3,375	71	24,848	-93,701
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	45,190	31,160	25,642	17,322	25,256	144,570
11 Total support. Add lines 7 through 10						35,027,128
12 Gross receipts from related activities, etc. (see instructions)					12	5,437,505

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**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	99.85%
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	99.87%

16a **33 1/3% support test—2015.** 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

b **33 1/3% support test—2014.** 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

17a **10%-facts-and-circumstances test—2015.** 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b **10%-facts-and-circumstances test—2014.** 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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 VI.)						
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**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2015. 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—2014. 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 Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part II, Line 10 - Other Income Detail

Rent 5 year total \$ 144,570

Schedule of Contributors

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

2015

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

Pensacola Habitat For Humanity, Inc.

59-2186044

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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

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 its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Pensacola Habitat For Humanity, Inc.	Employer identification number 59-2186044
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Ascension Health Ministry Sacred Heart Hospital 4040 Vincennes Circle Indianapolis IN 46268	\$ 134,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	R & L Enterprises, Inc. A Franchise of Papa John's 3208 Gulf Breeze Parkway Gulf Breeze FL 32563-5514	\$ 168,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	Great Southern Restaurant Group of Pensacola, Inc. P.O. Box 710 Pensacola FL 32591	\$ 180,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	Fulford Harbour, LLC Hilton Pensacola Beach 113 Bay Bridge Drive Gulf Breeze FL 32561	\$ 190,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	Gene's Floor Coverings, Inc. 4021 Navy Blvd. Pensacola FL 32507	\$ 90,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	O'Connor Management Group, Inc. McDonald's 1110 North 9th Avenue Pensacola FL 32501	\$ 182,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Pensacola Habitat For Humanity, Inc.	Employer identification number 59-2186044
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Carpenter's Campers, Inc. 8450 Pensacola Blvd. Pensacola FL 32534	\$ 181,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	Gulf Power Company One Energy Place Pensacola FL 32520	\$ 92,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	H&S Development, LLC DBA Hampton Inn 113 Baybridge Drive Gulf Breeze FL 32561	\$ 175,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	Pete Moore Automotive Team 103 New Warrington Road Pensacola FL 32523	\$ 134,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2015

Open to Public Inspection

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

Pensacola Habitat For Humanity, Inc.

59-2186044

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of 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?, 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?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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, 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?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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 section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue, Assets. Rows include: 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 XIII, the text of the footnote to its financial statements that describes these items. 1b 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) Revenue included on 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 Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

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
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

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

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" on 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 XIII 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, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on 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	23,032	23,032	23,032	23,032	22,855
b Contributions					
c Net investment earnings, gains, and losses					177
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	23,032	23,032	23,032	23,032	23,032

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶ %
- b** Permanent endowment ▶ **100.00** %
- c** Temporarily restricted endowment ▶ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

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		X
(ii) related organizations		X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?		

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		805,526		805,526
b Buildings		2,421,836	488,864	1,932,972
c Leasehold improvements				
d Equipment		664,893	446,405	218,488
e Other		0	0	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶				2,956,986

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. 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)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) Construction in progress	10,077,849
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	10,077,849

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	6,106,303
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	6,106,303
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 XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	6,106,303

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	5,435,831
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	5,435,831
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 XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	5,435,831

Part XIII Supplemental Information.

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, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part IV, Line 2b - Escrow Liability Arrangement Explanation

Homeowner escrow funds to cover homeowner insurance premiums and real estate taxes are collected each month.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Pensacola Habitat For Humanity, Inc.

Employer identification number

59-2186044

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

The executive director, chief operating officer, accountant, and board of directors review and approve the Form 990 before filing with IRS.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

All directors are required to discuss and sign conflict of interest statement annually.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The organization uses comparability data from Habitat For Humanity International (HFHI) during compensation reviews. The HFHI study includes detailed compensation reports of various positions across the country according to affiliate size and metropolitan statistical area. This data was used by the Executive Committee to determine the compensation for the Executive Director.

Form 990, Part VI, Line 15b - Compensation Process for Officers

The organization uses comparability data from Habitat For Humanity International (HFHI) during compensation reviews. The HFHI study includes detailed compensation reports of various positions across the country according to affiliate size and metropolitan statistical area. This data is used by the Executive Committee to determine the compensation for the Chief Operating Officer and other key employees.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Name of the organization

Employer identification number

Pensacola Habitat For Humanity, Inc.

59-2186044

The organization makes its Form 990, governing documents, conflict of interest policy, and most recent audited financial statements available to the public upon request.

Federal Statements**Statement 1 - Form 4562, Line 42 - Amortization**

<u>Description</u>	<u>Amortization Beg Date</u>	<u>Amortizable Amount</u>	<u>Code Section</u>	<u>Period / Percent</u>	<u>Current Year Amortization</u>
NMTC POB HFHI Structuring fee	9/01/15	\$ 78,692	248	30.0	\$ 2,186
NMTC Affiliate Exp Reserve	9/01/15	106,289	248	7.0	12,653
NMTC Closing Cost	9/01/15	48,681	248	30.0	1,352
Total		\$ <u>233,662</u>			\$ <u>16,191</u>

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS:									
4	'94 Utility Trailer	6/01/94	575			575	5 HY 200DB	575	0
5	Four Line Telephone	11/13/98	167			167	5 HY S/L	167	0
6	Fax	8/01/98	500			500	5 HY S/L	500	0
7	2 Four Line Telephones	7/17/97	360			360	7 HY S/L	360	0
8	Karaoke K-3-950	9/03/93	360			360	5 HY S/L	360	0
9	TV & VCR IK	4/20/93	300			300	5 HY S/L	300	0
10	5 Telephones	8/09/95	950			950	7 HY 200DB	950	0
11	Bank Vault	8/09/99	759			759	7 HY 200DB	759	0
12	Fireproof File Cab	11/01/98	759			759	7 HY S/L	759	0
13	Bookcase	1/01/97	133			133	7 HY S/L	133	0
14	2 Drawer File Cab	7/15/96	339			339	7 HY S/L	339	0
15	Paper Cutter	5/15/92	120			120	7 HY 200DB	120	0
16	Office Desk	3/04/93	150			150	7 HY 200DB	150	0
17	4 File Cabinet IK	2/23/93	100			100	7 HY 200DB	100	0
18	4 Drawer File IK	3/27/92	130			130	5 HY 200DB	130	0
19	Desk IK	1/01/91	150			150	7 HY 200DB	150	0
20	Desk IK	7/01/91	150			150	7 HY 200DB	150	0
21	HPDJ895CXI Printer	7/13/99	370			370	5 HY 200DB	370	0
22	Network	12/16/98	440			440	5 HY S/L	440	0
23	Software	12/10/98	250			250	5 HY S/L	250	0
24	Computer Surge & Cab	2/27/92	133			133	5 HY S/L	133	0
25	Surge Protector	4/20/95	250			250	5 HY 200DB	250	0
26	Laser Printer	6/27/96	1,092			1,092	5 HY 200DB	1,092	0
27	Desk IK	12/01/90	100			100	7 HY 200DB	100	0
28	IntelPentiumIII Computer (Kim's)	9/10/99	1,896			1,896	5 HY 200DB	1,896	0
29	Sharp Fax FO-	7/06/00	849			849	5 HY 200DB	849	0
30	95 GMC Panel Truck #1	2/16/00	10,001			10,001	5 HY 200DB	10,001	0
33	HP Deskjet 970	1/20/00	375			375	5 HY 200DB	375	0
34	Vodavi Telephone System (11phones)	2/15/01	2,060			2,060	7 HY 200DB	2,060	0
36	36 Stack Chairs	1/10/01	771			771	7 HY 200DB	771	0
37	Refrigerator	2/22/01	781			781	7 HY 200DB	781	0
38	Chairs	2/26/01	600			600	7 HY 200DB	600	0
39	Kim's Computer	5/01/01	1,632			1,632	5 HY 200DB	1,632	0
42	Gateway Computer	9/01/01	1,603			1,603	5 HY 200DB	1,603	0
71	Building -5810 N. Palafox St.	2/01/07	548,938			548,938	39 MMS/L	117,880	14,075
72	Drop ceiling and walls	2/28/07	12,261			12,261	15 HY S/L	6,947	816
78	Asbestos Removal	7/10/07	28,087			28,087	5 HY S/L	28,087	0
			<u>618,491</u>			<u>618,491</u>		<u>182,119</u>	<u>14,891</u>
Other Depreciation:									
2	Gateway Computer	10/29/01	1,519			1,519	5 MO S/L	1,519	0
3	Gateway Computer	2/19/02	1,218			1,218	5 MO S/L	1,218	0
41	99 Chevy Box Truck	1/28/02	16,000			16,000	5 MO S/L	16,000	0
48	68 Stack Chairs	9/18/02	1,369			1,369	7 MO S/L	1,369	0
49	Gateway Printer	7/22/02	2,200			2,200	5 MO S/L	2,200	0
50	Gateway Computer	1/03/03	1,411			1,411	5 MO S/L	1,411	0
51	Gateway Computer	1/03/03	1,411			1,411	5 MO S/L	1,411	0
52	Gateway Computer	4/23/03	1,106			1,106	5 MO S/L	1,106	0
56	Irondog Tractor	8/27/03	2,450			2,450	5 MO S/L	2,450	0
57	Computer - New	9/30/03	992			992	5 MO S/L	992	0
58	Gateway Laptop	10/21/03	1,430			1,430	5 MO S/L	1,430	0
59	2003 Ford 3500	3/09/05	13,000			13,000	5 MO S/L	13,000	0
60	2000 Chevy 2500	5/10/05	11,000			11,000	5 MO S/L	11,000	0
64	Center Floor Sh	9/30/05	3,048			3,048	7 MO S/L	3,048	0
65	2000 Chevy 14'	10/26/05	17,995			17,995	5 MO S/L	17,995	0
66	DR Field/Brush	9/30/05	2,354			2,354	5 MO S/L	2,354	0
69	GMC Truck 0112072004	1/12/07	14,500			14,500	5 MO S/L	14,500	0
70	Land - 5810 N. Palafox	2/01/07	337,000			337,000	0 -- Land	0	0
73	Unix Server for Main Office	2/06/08	5,325			5,325	5 MO S/L	5,325	0
76	Storefront Signs	3/06/08	18,488			18,488	5 MO S/L	18,488	0
80	Land - 6606 Elva Street	6/30/08	131,364			131,364	0 -- Memo	0	0
81	Milton Homestore	7/01/08	265,214			265,214	39 MO S/L	35,419	567
82	Milton ReStore Pole Barn	2/04/09	30,919			30,919	10 MO S/L	14,429	258
83	Insulation	6/30/10	2,040			2,040	7 MO S/L	947	24
84	Paving	6/30/10	2,815			2,815	7 MO S/L	1,307	34
85	Double Metal Doors,Frame, Install	2/01/10	1,047			1,047	15 MO S/L	378	70
86	Pole Barn Pensacola Restore	2/12/09	44,733			44,733	10 MO S/L	28,704	4,473
87	Pole Barn engineering services - Pensacola	2/16/09	2,886			2,886	10 MO S/L	1,828	288

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Basis for Depr	PerConv Meth	Prior	Current
88	4 Computers	5/14/09	3,204			3,204	5 MO S/L	3,205	0
89	(2) II Optiplex 360 Computers	7/06/09	1,494			1,494	5 MO S/L	1,495	0
90	Dell Optiplex 380	2/09/10	853			853	5 MO S/L	853	0
91	Dell Optiplex 960	2/09/10	1,062			1,062	5 MO S/L	1,062	0
92	2001 Chev Exp Box Truck	12/31/09	1,250			1,250	5 MO S/L	1,250	0
93	RCH Forklift	10/20/09	21,415			21,415	5 MO S/L	21,415	0
94	Fleetco Trucks	11/16/09	2,825			2,825	5 MO S/L	2,825	0
95	Utility Trailer	6/30/10	1,500			1,500	5 MO S/L	1,500	0
96	2003 Nissan Frontier	12/31/09	5,200			5,200	5 MO S/L	5,200	0
98	Building Improvements	7/01/08	1,171			1,171	39 MO S/L	157	3
99	Chain Link Fence	7/24/08	8,995			8,995	5 MO S/L	8,995	0
100	Sign for Building	7/31/08	1,260			1,260	5 MO S/L	1,260	0
101	Electrical	8/05/08	4,425			4,425	5 MO S/L	4,425	0
102	Lumber	7/31/08	1,867			1,867	5 MO S/L	1,867	0
103	Alarm	7/31/08	650			650	5 MO S/L	650	0
110	Minitower and Laptop	7/15/10	2,243			2,243	5 MO S/L	2,243	0
111	Dell Computer	9/16/10	1,010			1,010	5 MO S/L	960	50
112	Dell Computer	9/30/10	837			837	5 MO S/L	795	42
113	Dell Computer	11/10/10	1,100			1,100	5 MO S/L	1,027	73
114	2 Dell Optiplex Computers	11/12/10	1,877			1,877	5 MO S/L	1,752	125
115	Peachtree Update	1/14/11	2,503			2,503	5 MO S/L	2,253	250
116	KMS Phone System	9/22/10	2,500			2,500	5 MO S/L	2,375	125
117	KMS Headset and Router	1/18/11	380			380	5 MO S/L	336	44
118	KMS Move Phone System	1/19/11	8,005			8,005	5 MO S/L	7,071	934
119	Deck	4/01/11	725			725	5 MO S/L	616	109
120	5 Ton 13 Seer AC Condenser	6/14/11	3,500			3,500	10 MO S/L	1,429	350
121	Rug Rack	11/15/10	200			200	5 MO S/L	187	13
122	Refridgerator - Store Use	4/12/11	321			321	5 MO S/L	273	48
123	Shelving	4/15/11	3,855			3,855	5 MO S/L	3,277	578
124	Level Floor	8/03/10	57			57	7 MO S/L	26	0
125	Replace 5 ton AC Unit	6/09/11	3,079			3,079	10 MO S/L	718	26
127	Land Leonard Street	11/02/10	337,162			337,162	0 -- Land	0	0
128	Building Purchase	9/22/10	10,000			10,000	39 MO S/L	1,218	256
129	Groundwater Sampling	9/28/10	2,732			2,732	39 MO S/L	333	70
130	Asbestos Survey	10/14/10	600			600	39 MO S/L	73	15
131	Purchase of Bldg Bal Due	11/02/10	139,147			139,147	39 MO S/L	16,650	3,567
132	Purchase of Bldg Leonard St	11/02/10	434,251			434,251	39 MO S/L	51,962	11,133
133	Design Development	1/05/11	2,544			2,544	39 MO S/L	294	65
134	Architectural Services	2/17/11	13,482			13,482	39 MO S/L	1,498	346
135	Roll Up Door Install	5/04/11	350			350	39 MO S/L	37	9
136	Wiring	5/12/11	3,490			3,490	39 MO S/L	373	89
137	Utilities ECUA	6/08/11	108			108	39 MO S/L	11	3
138	Bid Doc Printing Drawings	6/13/11	280			280	39 MO S/L	29	8
139	Overhead Door	6/16/11	500			500	39 MO S/L	51	13
141	Computer	8/31/11	1,922			1,922	5 MO S/L	1,474	384
142	Dell Computer	3/18/12	1,189			1,189	5 MO S/L	773	238
143	Dell Computer	3/20/12	1,139			1,139	5 MO S/L	740	228
144	Dell Computer	3/20/12	1,520			1,520	5 MO S/L	988	304
145	Dell switch 48 port	10/06/11	2,622			2,622	5 MO S/L	1,967	524
146	Dell Computer	10/06/11	1,038			1,038	5 MO S/L	779	207
147	Dell Computer	10/11/11	1,156			1,156	5 MO S/L	867	231
148	Dell computer	3/18/12	1,189			1,189	5 MO S/L	773	238
149	Dell Computer	10/11/11	1,076			1,076	5 MO S/L	807	215
150	Dell Computer	3/18/12	1,189			1,189	5 MO S/L	773	238
151	KMS 3 phones	12/13/11	785			785	7 MO S/L	402	112
152	KMS Phone System Move	12/13/11	4,845			4,845	7 MO S/L	2,480	692
153	KMS 3 Phones	1/18/12	801			801	7 MO S/L	391	114
154	Kesco - Ice Maker	1/31/12	1,825			1,825	5 MO S/L	1,247	365
155	Adcox Imports 2007 Camry	12/06/11	14,799			14,799	5 MO S/L	10,606	2,960
156	Furniture - First American Title	12/15/11	5,000			5,000	7 MO S/L	2,560	714
157	Furniture - First Amer Title Donation	12/15/11	119,556			119,556	7 MO S/L	61,201	17,080
158	Wall Scaffolding	3/27/12	3,500			3,500	7 MO S/L	1,625	500
159	Asbestos Abatement - Cross Environmental Svcs	7/18/11	15,370			15,370	39 MO S/L	1,544	394
160	ECUA Rental 30 CY	7/20/11	53			53	39 MO S/L	5	2
161	Wescon Corp 1st Draw	7/27/11	133,169			133,169	39 MO S/L	13,374	3,414
162	ECUA Water Impact Fees	8/18/11	1,171			1,171	39 MO S/L	115	30
163	Wescon Corp 2nd Draw on Renovations	8/26/11	152,348			152,348	39 MO S/L	14,974	3,906
164	Cameras, DVR/300	9/14/11	2,799			2,799	39 MO S/L	275	72
165	ECUA Sewer Impact Fee	9/15/11	564			564	39 MO S/L	55	15
166	Camera from Home Depot	9/22/11	87			87	39 MO S/L	8	3
167	Security Camera Cable Install by Gulf Tech	9/28/11	4,638			4,638	39 MO S/L	446	119
168	Gulf Power - move power to new bldg	9/29/11	716			716	39 MO S/L	69	18

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
169	Construction Draw Wescon Corp	9/25/11	158,318				158,318	39 MO S/L	15,223	4,059
170	Construction Draw Wescon Corp	10/25/11	80,040				80,040	39 MO S/L	7,525	2,052
171	Balance of Cable Install - Gulf Tech Comm	11/09/11	994				994	39 MO S/L	93	26
172	Grading work by Bellview Site Contractors	11/10/11	600				600	39 MO S/L	56	16
173	Final Draw Wescon Corp	12/13/11	72,235				72,235	39 MO S/L	6,637	1,852
174	Access system - Panhandle Alarm & Phone Co	12/20/11	5,002				5,002	39 MO S/L	449	128
175	Alarm System - Panhandle Alarm & Phone Co	12/20/11	1,080				1,080	39 MO S/L	97	28
176	Cable Installaton - Gulftech Comm	12/22/11	567				567	39 MO S/L	51	14
177	Repair Overhead Warehouse Door	12/28/11	250				250	39 MO S/L	22	7
178	Bal of Constr Adm - Pinder Martin Assoc	1/13/12	1,696				1,696	39 MO S/L	152	44
179	Final Draw Wescon Corp	1/17/12	2,181				2,181	39 MO S/L	191	56
180	Cable Install - Gulftech Comm	1/18/12	1,172				1,172	39 MO S/L	103	30
181	AC Unit for Server Rm/ Duct Work	2/16/12	994				994	39 MO S/L	85	25
182	Windows for Office / Krauss Contract Sales	2/27/12	2,447				2,447	39 MO S/L	209	63
183	Materials to finish inventory/file room	3/07/12	103				103	39 MO S/L	9	2
184	Fill dock Well - Bellview Site Contractors	3/20/12	985				985	39 MO S/L	82	25
185	Remove & Replace Parking Area- Bellview Site	3/20/12	23,267				23,267	39 MO S/L	1,939	596
186	Refurbishing of existing light pole and sign	3/20/12	5,972				5,972	39 MO S/L	498	153
187	Install Gutter & Downspout	3/27/12	325				325	39 MO S/L	27	8
188	Centipede Sod - Andrews Sodding & Lawn	4/12/12	1,350				1,350	39 MO S/L	113	34
189	Final Grade - Andrews Sodding & Lawn	4/05/12	100				100	39 MO S/L	8	3
190	Addl Work by Bellview Site Contractors	4/05/12	5,183				5,183	39 MO S/L	432	133
191	Sod Installation - Extra Labor Andrews Sodding	4/05/12	125				125	39 MO S/L	10	4
192	Extra Hand dirt work Andrews Sodding	4/12/12	285				285	39 MO S/L	24	7
193	Full Color Indoor Signs - Pensacola Signs	4/13/12	1,675				1,675	39 MO S/L	140	43
194	AC unit for Storage Unit	4/16/12	1,049				1,049	39 MO S/L	85	27
195	Parking Bumpers	4/23/12	810				810	39 MO S/L	66	21
196	Re run 2 story DS Avalon Gutter Company	4/23/12	150				150	39 MO S/L	12	4
197	3 addl parking bumpers	4/23/12	68				68	39 MO S/L	6	1
198	CL Fence - A-1 Hurricane Fence	4/25/12	11,813				11,813	39 MO S/L	960	303
199	Patch holes in parking lot - Andre Heard	4/25/12	415				415	39 MO S/L	34	10
200	Cabling for Projector - Gulftech Comm	5/02/12	220				220	39 MO S/L	18	6
201	Cabling 4-3, 4-4, 4-18-12	5/02/12	466				466	39 MO S/L	38	12
202	Office Signage	5/09/12	975				975	39 MO S/L	79	25
203	3/8" x 4" HDG Carriage Bolt - Swift Supply	5/10/12	25				25	39 MO S/L	2	1
204	6x6x12 PT Post - Swift Supply	5/10/12	54				54	39 MO S/L	4	2
205	Repair asphalt in parking lot - Gulf Coast En	5/10/12	11,800				11,800	39 MO S/L	960	302
206	Paint for Parking Lot - Lowes	5/15/12	318				318	39 MO S/L	26	8
207	Full Color Vinyl Wall Mural - Pensacola Signs	5/17/12	2,112				2,112	39 MO S/L	167	54
208	Vista Sign Skeleton	5/17/12	1,634				1,634	39 MO S/L	130	42
209	6" Brushed Silver Foam Lettering Installed	5/17/12	889				889	39 MO S/L	70	23
210	AC Unit Replacement - Wright Company	5/30/12	3,215				3,215	39 MO S/L	254	83
211	120" x 60" Identity Sign - Pensacola Signs	6/12/12	3,225				3,225	39 MO S/L	255	83
212	Electrical Supplies for Warehouse Electric	6/25/12	321				321	39 MO S/L	25	9
213	Landscape Package 1	6/26/12	671				671	39 MO S/L	52	18
214	Loan Closing Costs	11/02/11	6,723				6,723	39 MO S/L	330	14
215	A-1 Service Asphalt Driveways Draw #1	8/11/11	7,300				7,300	15 MO S/L	1,906	488
216	A-1 Service Asphalt Driveway Draws 2 & 3	8/08/11	14,600				14,600	15 MO S/L	3,812	975
217	Supplies for Camera Install - Home Depot	9/22/11	188				188	5 MO S/L	141	38
218	Payne Automotive Painting	7/01/11	1,200				1,200	5 MO S/L	960	240
219	5 ton AC Unit - King Air Systems	8/10/11	3,079				3,079	7 MO S/L	953	37
220	Roofing Work	6/29/12	19,400				19,400	7 MO S/L	3,464	231
221	Truck Repairs Robert Tau Automotive	9/02/11	2,755				2,755	5 MO S/L	2,113	551
224	Dell Optiplex	7/01/11	875				875	5 MO S/L	700	175
225	Sage Software	2/16/12	1,269				1,269	5 MO S/L	1,072	197
226	KMS Phone System	8/26/11	5,955				5,955	5 MO S/L	4,566	1,191
227	Camera Install	9/14/11	3,129				3,129	5 MO S/L	2,399	626
228	Dell Laptop Computer	6/30/12	1,663				1,663	5 MO S/L	998	332
229	Light Fixtures	7/10/12	4,820				4,820	5 MO S/L	1,205	80
230	Shelving KMart	1/22/13	600				600	5 MO S/L	290	120
231	3 Monitors and Battery Back Up	9/17/12	1,602				1,602	5 MO S/L	881	321
232	Lap top	11/26/12	1,436				1,436	5 MO S/L	742	287
233	Monitors/Switch	5/30/13	5,617				5,617	5 MO S/L	2,340	1,124
234	Computer, Keyboard, & Mouse	11/26/12	1,155				1,155	5 MO S/L	597	231
235	Peachtree Software	7/01/12	1,394				1,394	5 MO S/L	1,022	279
236	Forklift	4/23/13	1,500				1,500	5 MO S/L	650	300
237	Freezer for Warehouse	7/17/12	489				489	7 MO S/L	204	70
238	AC Repair - Wright Company	8/15/12	287				287	39 MO S/L	21	8
239	Drywall finishing	5/30/13	347				347	39 MO S/L	19	8
240	Drywall L&W Supply	6/04/13	287				287	39 MO S/L	15	8
241	Electrical - Stuart Irvy	6/05/13	1,895				1,895	39 MO S/L	101	49
242	Swift supply	6/05/13	437				437	39 MO S/L	23	12

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
243	Floorcovering - Gene's	6/12/13	610			610	39 MO S/L	33	15
244	Electrial - Stuart Irby	6/12/13	224			224	39 MO S/L	12	6
245	Pinnacle Cabinets	6/13/13	569			569	39 MO S/L	30	15
246	Home room - card services	6/30/13	14			14	39 MO S/L	1	0
247	Roof Leak repair	8/23/12	1,140			1,140	39 MO S/L	83	29
248	Phone Cable	8/20/12	2,350			2,350	5 MO S/L	509	39
249	Lighting Upgrade	7/23/12	11,906			11,906	10 MO S/L	1,389	99
250	Roofing costs	7/01/12	745			745	10 MO S/L	93	9
251	Dell Server - Exchange	8/01/13	16,606			16,606	5 MO S/L	6,366	3,321
252	Time Clock	2/01/14	3,758			3,758	5 MO S/L	1,065	752
253	Kohler VTWN 46" ATR (Lowe's)	10/01/13	2,469			2,469	5 MO S/L	864	494
254	2004 Dodge Ram	10/01/13	8,100			8,100	5 MO S/L	2,835	1,620
255	Passenger Van (Whibbs)	1/01/14	34,858			34,858	5 MO S/L	10,457	6,972
256	F-250 (Sansing)	1/01/14	31,000			31,000	5 MO S/L	9,300	6,200
257	Toro ZT Mower (Tool Shack)	3/01/14	5,599			5,599	5 MO S/L	1,493	1,120
258	Brush Mower (Coastal Mach)	3/01/14	2,700			2,700	5 MO S/L	720	540
259	Trailer - Big Tex	2/01/14	2,244			2,244	5 MO S/L	648	449
260	Trailer - Bendron 8 x 12	2/01/14	2,876			2,876	5 MO S/L	850	576
261	Trailer - Bendron 8 x 16	2/01/14	6,744			6,744	5 MO S/L	1,567	1,276
262	TV - West Conf Room	2/01/14	1,590			1,590	7 MO S/L	322	227
263	Awning	9/01/13	633			633	39 MO S/L	30	16
264	Awning	12/01/13	632			632	39 MO S/L	26	16
265	Security Cameras	1/01/14	963			963	39 MO S/L	37	25
266	Security Cameras	1/01/14	962			962	39 MO S/L	37	25
267	Alarm & Access addition	3/01/14	1,915			1,915	39 MO S/L	66	49
268	The Mortgage Office SW	9/24/13	49,980			49,980	5 MO S/L	17,493	9,996
269	Dell - Peggy Fowler Computer	5/01/15	1,008			1,008	5 MO S/L	34	201
270	Dell - 3 computers	8/20/14	3,344			3,344	5 MO S/L	557	669
271	Dell computer - Leticia Taylor	3/19/15	1,023			1,023	5 MO S/L	51	205
272	Ranger (Lee's Glass)	9/18/14	9,300			9,300	5 MO S/L	1,395	1,860
273	Box Truck (Penske)	3/30/15	20,000			20,000	5 MO S/L	1,000	4,000
274	Roof Exhaust Fans (Air Design)	11/20/14	14,409			14,409	39 MO S/L	0	368
275	Box Truck - ReStore	11/20/14	28,905			28,905	5 MO S/L	3,372	5,781
276	AC Unit/Admin office	11/10/15	14,426			14,426	39 MO S/L	0	216
277	Awning (Markham)	5/04/16	1,043			1,043	39 MO S/L	0	2
278	Coffee pot - breakroom	5/19/16	521			521	7 MO S/L	0	6
279	Frontier Motors - Truck	7/06/15	22,006			22,006	5 MO S/L	0	4,034
280	Box Truck	7/07/15	20,335			20,335	5 MO S/L	0	3,728
281	Laptop - NR	8/01/15	1,855			1,855	5 MO S/L	0	340
282	Dell computer - Summer	8/01/15	1,120			1,120	5 MO S/L	0	205
283	Dell Computer - Blaise	2/01/16	1,195			1,195	5 MO S/L	0	100
Total Other Depreciation			3,273,764			3,273,764		606,849	131,410
Total ACRS and Other Depreciation			3,273,764			3,273,764		606,849	131,410
Amortization:									
284	NMTC POB HFHI Structuring fee	9/01/15	78,692			78,692	30 MOAmort	0	2,186
285	NMTC Affiliate Exp Reserve	9/01/15	106,289			106,289	7 MOAmort	0	12,653
286	NMTC Closing Cost	9/01/15	48,681			48,681	30 MOAmort	0	1,352
			233,662			233,662		0	16,191
Grand Totals			4,125,917			4,125,917		788,968	162,492
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			4,125,917			4,125,917		788,968	162,492

Net Operating Loss Carryover Worksheet

Form **990-T**

2015

For calendar year 2015, or tax year beginning **07/01/15**, ending **06/30/16**

Name

Pensacola Habitat For Humanity, Inc.

Employer Identification Number

59-2186044

Preceding Taxable Year	Prior Year			Current Year	Next Year Carryover
	Adj. To NOL Inc/(Loss) After Adj.	NOL Utilized (Income Offset)	Carryovers to Current Year	Income Offset By NOL Carryback / Carryover Utilized	
18th 06/30/98					
17th 06/30/99					
16th 06/30/00					
15th 06/30/01					
14th 06/30/02					
13th 06/30/03					
12th 06/30/04					
11th 06/30/05					
10th 06/30/06					
9th 06/30/07					
8th 06/30/08					
7th 06/30/09					
6th 06/30/10					
5th 06/30/11					
4th 06/30/12					
3rd 06/30/13					
2nd 06/30/14					
1st 06/30/15					
NOL carryover available to current year			0		
Current year	-160				160
NOL carryover available to next year					160

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
Interest Income	\$ 94		14			
Interest Income - Homeowners	12,262					
K-1 investment income from le	12,492					
Total	<u>\$ 24,848</u>					

Federal Statements

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

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
Uncollectible mortgage ex	\$ 13,938	\$ 13,938	\$	\$
Program Fee Income	-2,640		-2,640	
Workshop Fee - Delinquenc	-12,102		-12,102	
Program overhead allocati	-1,912,914	-1,912,914		
Mortgages net of discount	-3,386,528	-3,386,528		
Total	<u>\$ -5,300,246</u>	<u>\$ -5,285,504</u>	<u>\$ -14,742</u>	<u>\$ 0</u>

Schedule A, Part II, Line 1(e)

Description	Amount
Grants - HFHI/ SHOP 12	\$ 16,911
Grants - HFHI/ SHOP 13	281,189
Community Tax Credit Donations	1,568,250
Grants/Awards/Foundations	21,500
Donations - Restricted	17,003
Mortgage Settlement Funds	373,741
Spons Home - Publix	75,000
Century - Neighborworks	38,000
Gifts and donations	470,806
Allow for Sched B Contributions	-1,529,500
Ascension Health Ministry	
Cash Contribution	134,250
R & L Enterprises, Inc.	
Cash Contribution	168,500
Great Southern Restaurant Group	
Cash Contribution	180,000
Fulford Harbour, LLC	
Cash Contribution	190,500
Gene's Floor Coverings, Inc.	
Cash Contribution	90,250
O'Connor Management Group, Inc.	
Cash Contribution	182,500
Carpenter's Campers, Inc.	
Cash Contribution	181,000
Gulf Power Company	
Cash Contribution	92,500
H&S Development, LLC	
Cash Contribution	175,500
Pete Moore Automotive Team	
Cash Contribution	134,500
Total	<u>\$ 2,862,400</u>

Schedule A, Part II, Line 12

Description	Amount
Interest Income - Homeowners	\$ 12,262
K-1 investment income from le	12,492
Discounts - Notes Payable acq	13,716
Mortgage Discount Amortizatio	3,050,814
Late Fee Income	82,884
Income - Spc Evnt - Food Truc	16,189
Sale of Rehab Homes	2,231,392
Home rents	17,756
Total	\$ <u>5,437,505</u>