

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2008

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

, 2009 2008, and ending For the 2008 calendar year, or tax year beginning Jul 1 Jun 30 D Employer Identification Number C Name of organization Check if applicable Ploase us IRS label 84-1229714 Address change Habitat for Humanity of Boulder Valley dbs Flatirons Habitat for Humanity or print or type, See specific instruc-tions. Number and street (or P O box if mail is not delivered to street addr) E Telephone number Name change (303) 447-3787 2540 Frontier Ave. Indial return City, town or country State ZIP code + 4 Termination CO 80301 Boulder G Gross receipts \$ 2,218,759 Amended return H(a) is this a group return for affiliates? F Name and address of principal officer: Application pending Yes No H(b) Are all affiliates included? CO 80301 John Woods Same as C above Boulder If 'No.' attach a list (see instructions) Tax-exempt status IX 501(c) (3) ◄ (insert no.) 527 Website: ► www.flatironshabitat.org H(c) Group exemption number Type of organization: X Corporation Trust L Year of Formation: 1993 Association M State of legal domicile. CO Part Summary 1 Briefly describe the organization's mission or most significant activities: Habitat for Humanity of Boulder Valley works to create decent, affordable housing in partnership with those in need and to make shelter a matter of conscience with people everywhere. Check this box > 1 if the organization discontinued its operations or disposed of more than 25% of its assets. Number of voting members of the governing body (Part VI, line 1a) Activities & Number of independent voting members of the governing body (Part VI, line 1b) ... 5 19 Total number of volunteers (estimate if necessary) 2,800 6 Total gross unrelated business revenue from Part VIII, line-12, column (C) ... 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 596,298 979,558. 210,277. 188,921 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -14,273. 10,413. 173,269 -670. 12 972,761 2,199,578. Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... 13 42,698. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 391,352 550,841. 5,049. b Total fundraising expenses (Part IX, column (D), line 25) > 284,981 1,548,622. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 676,333 2,147,210. 19 Revenue less expenses. Subtract line 18 from line 12 296,428. 52,368. **End of Year** Beginning of Year 20 3,310,993 3,240,238. 21 388,431 265,307. Net assets or fund balances. Subtract line 21 from line 20 2,922,562 2,974,931. Signature Block Under penalties of pertury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is this, correct, and complete. Declaration of preparer to the complete of the complet Z Sign Here Signature of office Ē Type or print name and little. 2 Date Preparer's identifying number (see instructions) Check if 8 self-employed Raid 5/3/10 Preparer's Pfesignature Anderson Gedraene parer's Use ANDERSON PROFESSIONAL SERVICES, 1889 WILSON CIRCLE employed), address, and ZIP + 4 Only EIN 80516 ERIE CO Phone no May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2008)

TEEA0101

04/23/09

Form	1 990 (2008) Habitat for Humanity of Boulder Valley dba Flatirons Habitat for Humanity	84-122971	4 Page 2
Par	Statement of Program Service Accomplishments (see instructions)		
	Briefly describe the organization's mission.		
	Habitat for Humanity of Boulder		•
	Valley works to create decent, affordable housing in partnership		
			- -
	See Form 990, Page 2, Part III, Line 1 (continued)		
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 X No
	If 'Yes,' describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	s? 🗍	Yes X No
_	If 'Yes,' describe these changes on Schedule O		<u> </u>
4	Describe the exempt purpose achievements for each of the organization's three largest program services by and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allo	expenses. Section	n 501(c)(3)
	expenses, and revenue, if any, for each program service reported	cations to others	, the total
4 a	(Code:) (Expenses \$ 1,252,874. including grants of \$ 17,000.) (Re	venue \$	680,086.)
	Flatirons Habitat for Humanity (FHFH) completed construction of a		
	building. Each unit was sold to a low income family that partner		·
			·
	FHFH through the investment of "sweat equity" in their home. Another		
	unit building was approaching completion at year end with four los		-
	income families scheduled to occupy them in the 1st and 2nd quarte	er	
	of the next fiscal year. Home ownership for all Flatirons Habita	C	
	families is facilitated through the use of zero interest mortgages		·
	The cost of Habitat homes is reduced through the use of volunteer	labor	
	and homes are sold to homeowners at no profit to Habitat. Flatire		
	Habitat for Humanity subsidizes the construction and family service	<u>:es</u>	
	operating costs necessary to build its homes.		
	Flatirons Habitat for Humanity provides zero interest mortgages to its homeowners. When new mortgages are set up, it is discounted a interest rate set by Habitat for Humanity Int'l. creating discourt expense. As homeowners pay down their mortgages, Flatirons Habitat Humanity recognizes income from mortgage discount amortization. Habitat for Humanity currently provides interest-free mortgages to 35 families. FHFH had mortgages receivable of \$2.5 million outstated at year end.	at an nt at for Flatirons	
40	(Code) (Expenses \$ 345,849. including grants of \$ 0.) (Reflatirons Habitat for Humanity operates a ReStore which sells done	venue \$	413,407.)
	used merchandise to support the organization in achieving its miss		
	assa merenanarse to support the organization in achieving its miss	テ ローーー	
			
4	Other program services (Describe in Schedule O.)		·
-7-0		7 0	99.)
			
4 e	Total program service expenses ► \$ 1,841,638. (Must equal Part IX, Line 25, column (B).)		

•

Form 990 (2008) Habitat for Humanity of Boulder Valley dba Flatirons Habitat for Hu

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? .	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9	x	
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.	12	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		<u>X</u>
ı	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If 'Yes,' complete Schedule F, Part I	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II .	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		х
17	The state of the s	17		Χ
	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	Х	
	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III .	22	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		<u>x</u>
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K If 'No, 'go to question 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		<u> </u>
t	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26	х	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		X
A A		_		

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.			13.5
	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively	10.55	ં ફેંડું લુ	. <u>:</u>
	with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a	X	
	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b	_x	
	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	_ X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
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	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 .	35	х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
BA/		Form	990 (2008)

Form 990 (2008) Habitat for Humanity of Boulder Valley dba Flatirons Habitat for Hu

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1 a	a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	11		
t	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b	0	, '	
c	Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and reportable gaming	1 c	х	<u> </u>
2 a	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	19		7.7
2 b	If at least one is reported on line 2a, did the organization file all required federal employment	tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this retur	n. (see instructions)	1 - 100-		101 3,4
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year this return?	covered by	3 a		х
b	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3 b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature of financial account in a foreign country (such as a bank account, securities account, or other financial account.	r other authority over, a ancial account)?	. 4a		x_
b	o If 'Yes,' enter the name of the foreign country			- 1	125
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Formancial Accounts.	oreign Bank and	المراقعة المراقعة	<u>, , , , , , , , , , , , , , , , , , , </u>	
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax ${f y}$	year? .	5 a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter	transaction?	5 b		<u>X</u>
c	: If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Prohibited Tax Shelter Transaction?	Entity Regarding	5 c		
6 a	Did the organization solicit any contributions that were not tax deductible?		6a		X
b	o If 'Yes,' did the organization include with every solicitation an express statement that such con deductible?	tributions or gifts were not	6 b		
7	Organizations that may receive deductible contributions under section 170(c).		12 50	,	1
а	Did the organization provide goods or services in exchange for any quid pro quo contribution o	f more than \$75? .	. 7a	Х	
b	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b	X	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for white Form 8282?	ch it was required to file	7с		Х
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d	33-124	/ **	200
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums benefit contract?	s on a personal	. 7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benef	fit contract?	7 f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as rec	quired? .	7 g		
ħ	For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Fo	rm 1098-C as required?	7 h	Х	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and supporting organizations. Did the supporting organization, or a fund maintained by a sponsori excess business holdings at any time during the year?	section 509(a)(3) ing organization, have	193 ' 193 '		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			· ·	1.4
	Did the organization make any taxable distributions under section 4966?		9a		X
	Did the organization make any distribution to a donor, donor advisor, or related person?		9 b		Х
	Section 501(c)(7) organizations. Enter		5.5) (2), 1
	Initiation fees and capital contributions included on Part VIII, line 12	10a	67 6 2-7 34 43	- ' - 1 	., '' ., '-:
	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10Ь	\$5.00 A	34 gr 1	
	Section 501(c)(12) organizations. Enter		- C		
а	Gross income from other members or shareholders	11 a			1
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	116	13.4		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of J	•	12a		
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b	E. T.		1,000
2 A A			Form	oon /	2008 1

Form 990 (2008) Habitat for Humanity of Boulder Valley dba Flatirons Habitat for Hu 84-1229714 Page (Part VI) Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A.	Governing Body and Management				
	For each processes	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, de s, or changes in Schedule O See instructions.	scribe the circumstances,		Yes	No
1 a	•	number of voting members of the governing body	1a 12			2 2, 1
ŀ	Enter the	number of voting members that are independent .	1b 10	22.72	ار میناد استان	三国
2	Did any o officer, di	fficer, director, trustee, or key employee have a family relationship or a business rela rector, trustee or key employee?	tionship with any other .	2	X	لتن
3	Did the or	rganization delegate control over management duties customarily performed by or unos, directors or trustees, or key employees to a management company or other person	der the direct supervision	3		х
4	Did the or	rganization make any significant changes to its organizational documents		4		X
	since the	prior Form 990 was filed?				
		rganization become aware during the year of a material diversion of the organization's	s assets?	5		<u>X</u>
6	Does the	organization have members or stockholders?	•	6		X
	governing	•	•	. 7a		x
ŀ	Are any o	decisions of the governing body subject to approval by members, stockholders, or othe	er persons?	7b	3 -1 -	X
8	Did the or the follow	rganization contemporaneously document the meetings held or written actions undertaing:	aken during the year by	1		
	•	rning body?		8a	X	<u> </u>
		nmittee with authority to act on behalf of the governing body?		8b		X
9 8	Does the	organization have local chapters, branches, or affiliates?		9a		X
ı		oes the organization have written policies and procedures governing the activities of sches to ensure their operations are consistent with those of the organization?	such chapters, affiliates,	9 b		
10	Was a co describe	py of the Form 990 provided to the organization's governing body before it was filed? in Schedule O the process, if any, the organization uses to review the Form 990	All organizations must	10	х	
		iny officer, director or trustee, or key employee listed in Part VII, Section A, who cann ion's mailing address? If 'Yes,' provide the names and addresses in Schedule O	ot be reached at the	11		<u>x</u>
Sec	tion B.	Policies				
					Yes	No
		organization have a written conflict of interest policy? If 'No,' go to line 13		12a	Х	<u> </u>
	to conflic			12b	x	
	Schedule	organization regularly and consistently monitor and enforce compliance with the police O how this is done	cy? If 'Yes,' describe in	12c	х	
		organization have a written whistleblower policy?		13		X
		organization have a written document retention and destruction policy?		14	X	
15	Did the p persons,	rocess for determining compensation of the following persons include a review and ap comparability data, and contemporaneous substantiation of the deliberation and decis	oproval by independent sion:		732 gi	
	_	nization's CEO, Executive Director, or top management official?	• •	15a	X	
l		cers of key employees of the organization?		15 b	ur.	X m janjah
		the process in Schedule O. (see instructions)		4 (3)	4	7.4.5.5
16	Did the o entity dur	rganization invest in, contribute assets to, or participate in a joint venture or similar a ing the year?	rrangement with a taxable	16a	ار کامت	X
l	in joint ve	ias the organization adopted a written policy or procedure requiring the organization to enture arrangements under applicable federal tax law, and taken steps to safeguard to th respect to such arrangements?	o evaluate its participation ne organization's exempt	16b	<i>I</i> • • •	المناسبة ا
Sec	ction C.	Disclosures				
17	List_the_s	tates with which a copy of this Form 990 is required to be filled.				
18	inspectio	in 104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and in Indicate how you make these available. Check all that apply.	d 990-T (501(c)(3)s only) av	aılable	for pu	blic
	\Box	website X Another's website X Upon request				
19	statemen	in Schedule O whether (and if so, how) the organization makes its governing docume its available to the public				ıal
		name, physical address, and telephone number of the person who possesses the boo				
	► <u>Georg</u>	ene Anderson2540 Frontier Ave. Suite 109 Boulder C	<u>0 _80301 (3</u>	3 <u>03)</u> _4	47-3	<u>3787</u>
24/				Form	990 /	(2008)

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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) or 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 the organization did no	(B)	ate ar	ту о		r, dı c)	rector	, trus	stee, or key employee (D)	(E)	<u></u>
Name and Title	Average	Pos	ition	•	•	that app	ly)	, ,		(F)
ivanie and Title	hours per week	andividual trustee or director	mshiparel trustee	Offi-#		High est coincersated employee	Forne	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
John Woods										
Board president	10.00	Х	<u>L</u>	Х				0.	0.	0.
Spense Havlick	_[
Board VP	4.00	Х		Х				0.	0.	0.
Linda Barr										
Board secretary	5.00	Х		Х				0.	0.	0.
Gary Anderson										
Board member	2.00	Х				,		0.	0.	0.
Mike Acimovic										_
Board member	1.50	X						0.	0.	0.
David Beaty										
Board member	2.00	Х						0.	0.	0.
Keith Dietzen										
Board member	1.00	Х		,				0.	0.	0.
Sandra Moriarty										
Board member	3.00	Х						0.	0.	0.
Donald Reimer										
Board member	4.00	Х						0.	0.	0.
Greg Strong										
Board member	1.50	X						0.	0.	0.
Keith Tatum										
Board member	1.00	X						0.	0.	0.
Michelle Snyder										
Board member	1.00	Χ						0.		0.
John Lovell							\neg			
Executive director	40.00				Х			15,000.	0.	1,246.
Paul Casey										
Executive director	40.00			[X			44,368.	0.	4,039.
						-	1			·
	<u> </u>					!		_		

Part VII Section A. Officers, Directors, Trus	tees, k	(ey	En	pla	oye	es,	an	d Highest Con	npensated Er	nplovees (cont.)
(A)	(B)				c)			(D)	(E)	(F)
Name and Title	Average hours per week		_					Reportable compensation from the organization	Reportable compensation from	Estimated amount of other compensation
	per week	dividual trustee director	Institutional trustee	Officer	employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organization (W-2/1099-MISC)	from the organization and related organizations
1 b Total	•						>	59,368.	C	5,285.
2 Total number of individuals (including those in 1a) w organization ► 0	ho recei	ved	mor	e th	an \$	100	,000		npensation from	
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such inc. 4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th individual. 5 Did any person listed on line 1a receive or accrue co rendered to the organization? If 'Yes,' complete Schedule Did the organization? 	dividual ortable an \$150	com ,000	pen:)? If	satio 'Yes	on a s' cc	nd o ompl	other lete	compensation fro Schedule J for suc	om ch	3 X 4 X 5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensate	d inden	ende	nt c	ontr	actr	rs t	hat r	eceived more that	n \$100.000 of	
compensation from the organization									1	
(A) Name and business address	5							(B) Description of	f Services	(C) Compensation
2 Total number of independent contractors (including the	hose in	1) w	ho r	ecei	ved	moi	re th	ian \$100,000 in		Care well a
compensation from the organization ► 0	•									

	990 (2008) Habitat for Humanity of Boul	der Valley dba Flat	irons Habitat for H	umanity	84-1229714	Page 9
Pai	t VIII Statement of Revenue	الا المول الأن الي المول الأن الي المول الي الان	(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
	The company fraction of the control		rotal rotolias	exempt function revenue	business revenue	excluded from tax under sections 512, 513, or 514
13 S	1a Federated campaigns 1a		*			- 3
E A	b Membership dues . 1b			1.	-	1
P.G.	c Fundraising events . 1c	44,256.				1 to
E &	d Related organizations . 1d					
SIM.	e Government grants (contributions) 1e	7,299.				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1 f	928,003.	January Control	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
₽8	g Noncash contribns included in lns 1a-1f ⁻ \$	519,401.		, ,		
	h Total. Add lines 1a-1f	Business Code	979,558.			70 - 4
Ñ.	20.0-1	····	, , , , ,	600 006		12:35
₫	2a Sale of homes to Habitat families		680,086. 116,784.	680,086.	0.	0.
핑	<pre>b Mortgage discount amortization c ReStore sales</pre>	453310	413,407.	116,784. 413,407.	0.	0.
¥	c reprofe sales	400010	413,407.	413,407.	0.	0.
Σ.	e					
GRA	f All other program service revenue					
PROGRAM SERVICE REVENUE	g Total. Add lines 2a-2f		1,210,277.		N 45 / 15	等等等等。 1
	3 Investment income (including dividends	: interest and	1,210,27.	1 -1	1, - ,	, - 2 3 - 2 1, -
	other similar amounts)		10,413.	10,413.	0.	0.
	4 Income from investment of tax-exempt	bond proceeds				
	5 Royalties	. •				
	(i) Real	(II) Personal		新原理等是經	Carlot and and any of the	
	6a Gross Rents				The state of the s	
	b Less rental expenses		The second second			
	c Rental income or (loss)				2+4,	
	d Net rental income or (loss)	_	<u> </u>			
	7a Gross amount from sales of (i) Securities	(II) Other				TEXT TO
	assets other than inventory		E. ATRICA			A STATE OF THE STA
	b Less cost or other basis and sales expenses					
	c Gain or (loss)		م المراجع المر من المراجع الم			
	d Net gain or (loss)	<u> </u>				المستنعمين
u	8a Gross income from fundraising events					
OTHER REVENUE	(not including . \$ 44,256.		·		ا. اما حد فترسور	The state of the state of
	of contributions reported on line 1c).			解的人,也是我		· · · · · · · · · · · · · · · · · · ·
笳		a 9,584.				地数 第二次
5	b Less. direct expensesc Net income or (loss) from fundraising e	b 19,181.	-9,597.	-9,597.		1700. 33. 22. 22. 57. 51
	9a Gross income from gaming activities		-9,391.	-9,397.		
	b Less direct expenses	a b			الم	Trick the state of
	c Net income or (loss) from gaming activ	~		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	• • • •	illes .	र र . १ . अस्य प्र		4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SERVICE TO
	10a_Gross_sales_of_inventory,_less_returns and allowances	a				THE CASE OF THE PARTY OF THE PA
l	b Less cost of goods sold	b				Control of Figure 1
-	c Net income or (loss) from sales of inve	ntory ►				,
ľ	Miscellaneous Revenue	Business Code	1 441		- 147 - 147	11 14 14 14 14 14 14 14 14 14 14 14 14 1
	11a Miscellaneous income	900099	8,927.	8,927.	0.	0.
	b					
-	c					
	d All other revenue					
	e Total. Add lines 11a-11d	, ▶	8,927.		5-4-1 (*)	
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 9 10c, and 11e	5, 6d, 7d, 8c, 9c,	2,199,578.	1,220,020.	0.	0.

Part IX Statement of Functional Expenses

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

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

	oclude amounts reported on lines b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	nts and other assistance to governments organizations in the U.S. See Part IV, 21	25,698.	25,698.		
	nts and other assistance to individuals in U.S. See Part IV, line 22	17,000.	17,000.		The state of the s
orga	nts and other assistance to governments, inizations, and individuals outside the See Part IV, lines 15 and 16				
4 Bene	efits paid to or for members			13	ا المراجعة
	npensation of current officers, directors, tees, and key employees	47,500.	21,375.	16,625.	9,500.
dısqı secti	npensation not included above, to ualified persons (as defined under ion 4958(f)(1) and persons described in ion 4958(c)(3)(B)	50,299.	27,022.	6,898.	16,379.
	er salaries and wages .	396,883.	292,175.	39,589.	65,119.
8 Pens 401(sion plan contributions (include section (k) and section 403(b) employer tributions)	7,525.	4,396.	853.	2,276.
9 Othe	er employee benefits	23,485.	14,043.	1,685.	7,757.
10 Payr	roll taxes	25,149.	15,526.	2,795.	6,828.
11 Fees	s for services (non-employees) .				
a Man	agement				
b Lega	al				
c Acco	ounting	12,358.	0.	12,358.	0.
d Lobb	oying			7	
	fundraising svcs See Part IV, In 17 stment management fees	5,049.			5,049.
q Othe	_	7,871.	4,659.	3,212.	0.
•	ertising and promotion	3,689.	0.	0.	3,689.
	ce expenses	27,438.	7,620.	6,445.	13,373
	rmation technology	8,162.	600.	6,087.	1,475.
15 Roya	alties				
16 Occi	upancy	27,259.	19,843.	6,089.	1,327
expe	rel ments of travel or entertainment enses for any federal, state, or local lic officials				
•	ferences, conventions, and meetings	· · · · · · · · · · · · · · · · · · ·			
20 Inter	· · · · · · · · · · · · · · · · · · ·	3,306.	3,268.	38.	0.
	ments to affiliates .	3,300.	3,200.	50.	
-	reciation, depletion, and amortization	4,935.	724.	2,622.	1,589.
	rance	27,794.	25,592.	1,101.	1,101.
24 Othe cove and	er expenses Itemize expenses not ered above. (Expenses grouped together labeled miscellaneous may not exceed of total expenses shown on line 25				The state of the s
	scounts earned	235,616.	235,616.	0.	0.
	sts of homes sold	874,391.	874,391.	0.	0.
	Store lease costs	129,970.	129,970.	0.	0.
	st of mortgage sold	19,249.	19,249.	0.	0.
	d debts	26,358.	0.	0.	26,358
	other expenses	140,226.	102,871.	10,307.	27,048.
	I functional expenses. Add lines 1 through 24f	2,147,210.	1,841,638.	116,704.	188,868.
26 Join SOP orga cost	nt Costs. Check here Inf following 98-2. Complete this line only if the anization reported in column (B) joint is from a combined educational		_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	223,7011	
BAA	ipaign and fundraising solicitation		<u> </u>		Form 990 (2008

	•		(A) Beginning of year		(B) End of year
•	1	Cash — non-interest-bearing	105,573.	1	307,851.
	2	Savings and temporary cash investments .	575,468.	2	266,576.
	3	Pledges and grants receivable, net	65,987.	3	59,265.
	4	Accounts receivable, net	0.	4	333.
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.			333.
			97,225.	5	92,575.
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))	LANCE COLLEGE		multipo productiva and make the second
A		and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
S	7	Notes and loans receivable, net .	928,784.	7	989,867.
A S S E T S	8	Inventories for sale or use	111,225.	8	128,930.
Ś	9	Prepaid expenses and deferred charges .	25,949.	9	25,946.
	l	Land, buildings, and equipment cost basis 1,055,999.	情经过去的激素	₹ 4.1	
	b	Less: accumulated depreciation Complete Part VI of			Party Transport
		Schedule D	785,886.	10 c	987,268.
	11	Investments – publicly-traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	614,896.	15	381,627.
	16	Total assets Add lines 1 through 15 (must equal line 34)	3,310,993.	16	3,240,238.
	17	Accounts payable and accrued expenses	92,012.	17	104,230.
	18	Grants payable		18	
	19	Deferred revenue		19	
Ţ	20	Tax-exempt bond liabilities .		20	
Ê	21	Escrow account liability Complete Part IV of Schedule D	11,333.	21	11,623.
-AB-L-T-ES	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II		۰۱ دار پیکوت	
÷		of Schedule L	The same and the s		<u> </u>
Ē	23	Secured mortgages and notes payable to unrelated third parties	17,188.	22	74 454
3	24	Unsecured notes and loans payable	167,898.	23	74,454.
	25	Other liabilities. Complete Part X of Schedule D	100,000.	24	75,000.
	26	Total liabilities. Add lines 17 through 25	200 421	25	0.65 207
N1	20	Organizations that follow SFAS 117, check here X and complete lines	388,431.	26	265,307.
N E		27 through 29 and lines 33 and 34.		- "	
	27	Unrestricted net assets	2 (05 201		Literature
ASSET	28	Temporarily restricted net assets	2,695,381.	27	2,443,546.
Ī	29	Permanently restricted net assets	227,181.	28	531,385.
Q R	23	Organizations that do not follow SFAS 117, check here ► and complete	7-5 13 13 1	29	A STATE OF THE STA
		lines 30 through 34.		7	
OZC+	30	Capital stock or trust principal, or current funds		30	La di Liberta de la Ciaria del Ciaria de la Ciaria dela Ciaria de la Ciaria de la Ciaria de la Ciaria de la Ciaria dela Ciaria de la Ciaria de la Ciaria de la Ciaria de la Ciaria dela Ciaria de la Ciaria de la Ciaria de la Ciaria de la Ciaria dela Ciaria de la Ciaria de la Ciaria de la Ciaria dela Ciaria dela Ciaria dela Ciaria de la Ciaria de la Ciaria de la Ciaria de la Ciaria dela Ci
	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
Ĕ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ñ	33	Total net assets or fund balances	2 022 562	33	2 074 021
田人上人工しまり	34	Total liabilities and net assets/fund balances.	2,922,562. 3,310,993.	34	2,974,931.
		Financial Statements and Reporting	5,510,995.	34	3,240,238.
	17.771	2E LINGHOIG OUTCOM LING POLICE			Yes No
1	Δα	counting method used to prepare the Form 990. Cash X Accrual	Other		TES NO
		re the organization's financial statements compiled or reviewed by an independent ac			2a X
		re the organization's financial statements compiled or reviewed by an independent ac- re the organization's financial statements audited by an independent accountant?	countaint.		
		es the organization's infancial statements addited by an independent accountant? 'es' to 2a or 2b, does the organization have a committee that assumes responsibility	for oversight of the and		2b X
	rev	es to 2a of 2b, does the organization have a committee that assumes responsibility lew, or compilation of its financial statements and selection of an independent accour	itant?	ι,	2c X
3		a result of a federal award, was the organization required to undergo an audit or auditit Act and OMB Circular A-133?		ngle	
			•	-	3a X
		'es,' did the organization undergo the required audit or audits?			36
BA/	4				Form 990 (2008)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

Employer identification number

Onen to Buildin

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

			ty of Boulder Va								
Pär		Reason for P	ublic Charity Statu	us (All organizations	must c	omple	<u>te this</u>	part.)	(see ı	<u>nstruct</u>	ions)
The c	orga	nization is not a p	rivate foundation becau	se it is. (Please check onl	y one or	ganızatı	on)				
1		A church, conver	ition of churches or ass	ociation of churches descr	ibed in s	ection 1	170(b)(1))(A)(i).			
2	П	A school describe	ed in section 170(b)(1)(A)(ii). (Attach Schedule E)						
3	Ħ	t .		e organization described ii		170(b)	(1)(A)(iii). (Atta	ch Sche	dule H)	
4	Ħ			ed in conjunction with a ho							r the hospital's
-	_	name, city, and s	-	,	•				,		
5		l An organization o		of a college or university	owned or	roperate	ed by a	governr	nental u	nit descri	bed in section
6				governmental unit describ							
7		An organization t in section 170(b)	hat normally receives a (1)(A)(vi). (Complete P	substantial part of its sup art II)	port fror	n a gove	ernmenta	al unit d	or from t	ne gener	al public described
8				170(b)(1)(A)(vi). (Complete							
9	X	from activities rel	lated to its exempt func	(1) more than 33-1/3 % of tions — subject to certain ess taxable income (less s complete Part III)	exceptio	ns. and	(2) no n	nore tha	ın 33-1/3	3 % of its	support from gross
10		An organization of	organized and operated	exclusively to test for pub	lic safety	y. See s	ection 5	09(a)(4). (see i	nstructio	ns)
11		more publicly sur	poorted organizations of	exclusively for the benefit described in section 509(a zation and complete lines	(1) or se	ection 50	09(a)(2).	ons of, See s e	or carry ection 5	out the p	ourposes of one or Check the box that
		a 🗌 Type I	b Type II	c 💹 Type III	- Func	tionally	ıntegrate	ed		d 📗	Type III – Other
е		By checking this than foundation r 509(a)(2).	box, I certify that the or managers and other tha	ganization is not controlle n one or more publicly sup	d directly pported o	y or ındı organıza	rectly by itions de	one or scribed	more d	squalifie on 509(a	d persons other)(1) or section
f			n received a written det	ermination from the IRS to	hat is a T	Гуре І, Т	ype II o	r Type I	II suppo	rting orga	anization,
g	!	Since August 17,	, 2006, has the organiza	ation accepted any gift or	contribu	tion fron	n any of	the foll	owing pe	ersons?	Yes No
		(i) a person w	ho directly or indirectly governing body of the s	controls, either alone or to	ogether v	vith pers	sons des	cribed	n (II) an	d (III)	11g (i)
		· ·	ember of a person desc								11 g (ii)
		` '	•	n described in (i) or (ii) ab	ove?						
h		• •		the organizations the orga			•				
		(i) Name of Supported	I I I I I I I I I I I I I I I I I I I	are organizations the orga		SUDDON	5				11 g (iii)
		Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) I organizat (i) listed	s the ion in col	(v) Did y	ızatıon in (ı) of	ornanizat	s the ion in collized in the	
		Organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) I organizat (i) listed	s the	(v) Did y the organ	ızatıon in (ı) of	ornanizat	on in cot	11 g (iii)
		Organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) l organizat (i) listed gove docur	s the ion in col i in your rning ment?	(v) Did y the organ col (your su	ization in (i) of ipport?	organizat (i) organi U	zed in the	11 g (iii)
		Organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) l organizat (i) listed gove docur	s the ion in col i in your rning ment?	(v) Did y the organ col (your su	ization in (i) of ipport?	organizat (i) organi U	zed in the	11 g (iii)
	-	Organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) l organizat (i) listed gove docur	s the ion in col i in your rning ment?	(v) Did y the organ col (your su	ization in (i) of ipport?	organizat (i) organi U	zed in the	11 g (iii)
		Organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) l organizat (i) listed gove docur	s the ion in col i in your rning ment?	(v) Did y the organ col (your su	ization in (i) of ipport?	organizat (i) organi U	zed in the	11 g (iii)
		Organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) l organizat (i) listed gove docur	s the ion in col i in your rning ment?	(v) Did y the organ col (your su	ization in (i) of ipport?	organizat (i) organi U	zed in the	11 g (iii)
		Organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) l organizat (i) listed gove docur	s the ion in col i in your rning ment?	(v) Did y the organ col (your su	ization in (i) of ipport?	organizat (i) organi U	zed in the	11 g (iii)
		Organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) l organizat (i) listed gove docur	s the ion in col i in your rning ment?	(v) Did y the organ col (your su	ization in (i) of ipport?	organizat (i) organi U	zed in the	11 g (iii)
		Organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) l organizat (i) listed gove docur	s the ion in col i in your rning ment?	(v) Did y the organ col (your su	ization in (i) of ipport?	organizat (i) organi U	zed in the	11 g (iii)
		Organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) l organizat (i) listed gove docur	s the ion in col i in your rning ment?	(v) Did y the organ col (your su	ization in (i) of ipport?	organizat (i) organi U	zed in the	11 g (iii)
		Organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) l organizat (i) listed gove docur	s the ion in col i in your rning ment?	(v) Did y the organ col (your su	ization in (i) of ipport?	organizat (i) organi U	zed in the	11 g (iii)
		Organization		(described on lines 1-9 above or IRC section (see instructions))	(iv) I organizat (i) Iistec gove docur Yes	s the ion in col in your rrining ment?	(v) Did y the organ col (your su Yes	ization in (i) of ipport?	organizat (i) organi U : Yes	No	11 g (iii)
Tota		Organization		(described on lines 1-9 above or IRC section	(iv) I organizat (i) Iistec gove docur Yes	s the ion in col in your rrining ment?	(v) Did y the organ col (your su	ization in (i) of ipport?	organizat (i) organi U	zed in the	11 g (iii)

Schedule A (Form 990 or 990-EZ) 2008 Habitat for Humanity of Boulder Valley dba Flatirons Habitat for 84-1229714

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

	(Complete only if you check	•				id 170(B)(1)(A)(4	·· ·
Sec	tion A. Public Support				T		
begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
4	Total. Add lines 1-3						
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						
Sec	tion B. Total Support	1		r -			
	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
9	Net income form unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc (see ins	tructions)			12	
13	First five years. If the Form 990 organization, check this box and	is for the organiza stop here.	tion's first, second	d, third, fourth, or	fifth tax year as a	a section 501(c)(3)	>
_	tion C. Computation of Pu						
	Public support percentage for 20			e 11, column (f)		. 14	<u>%</u>
	Public support percentage for 20	•	•			15	%
16 a	33-1/3 support test – 2008. If the and stop here. The organization				he line 14 is 33-1/	/3 % or more, check	this box
t	33-1/3 support test – 2007. If the and stop here. The organization	e organization did qualifies as a publ	not check a box o licly supported org	n line 13, or 16a, ganization	and line 15 is 33-	1/3% or more, chec	k this box
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts'	meets the 'facts-ar	nd-circumstances'	test, check this b	ox and stop here.	Explain in Part IV h	1% now . ► [
b	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts-ar	nď-circumstances'	test, check this b	ox and stop here.	Explain in Part IV h	
18	Private foundation. If the organiz	zation did not ched	k a box on line, 1	3, 1 <u>6a, 16b, 17a,</u>			
BAA					Sc	hedule A (Form 990	or 990-EZ) 200

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

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

Sact	ion A. Public Support						·
		(2) 2004	(b) 2005	(6) 2006	(d) 2007	(e) 2008	(n Total
Caler	ndar year (or fiscal yr beginning in)	(a) 2004	(D) 2005	(c) 2006	(0) 2007	(6) 2008	(f) Total
•	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')	386,659.	575,327.	883,438.	554,173.	957,819.	3,357,416.
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt			·			
3	purpose Gross receipts from activities that are not an unrelated trade or business	950,730.	682,282.	1,110,377.	662,797.	1,219,861.	4,626,047.
	under section 513 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		55,000.		32,125.	25,129.	112,254.
6	Total. Add lines 1-5	1,337,389.	1,312,609.	1,993,815.	1,249,095.	2,202,809.	8,095,717.
	Amounts included on lines 1, 2, 3 received from disqualified persons	4,200.	2,167.	1,075.	7,284.	4,500.	19,226.
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000	E20 201	220 677	656 026		690 096	2 104 000
		538,301.	228,677.	656,936.	7 004	680,086.	2,104,000.
	Add lines 7a and 7b	542,501.	230,844.	658,011.	7,284.	684,586.	2,123,226.
8	Public support (Subtract line	97 97	divitable and the series	PART CARREST SECTION OF COLUMN	क्षित्र । अनेश केन्द्र को को की होता है।	A NOT COMMENTS	5 070 404
	7c from line 6.)	是1945年,1945年 1	tradition of the	Control of the Contro	養養的技術。	- AND	5,972,491.
	tion B. Total Support			r	I		
Cale	ndar year (or fiscal yr beginning in) 🟲	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
				11 002 015	11 2/0 NOS	מחס כחכנו	
-	Amounts from line 6	1,337,389.	1,312,609.	1,993,013.	1,249,093.	2,202,609.	8,095,717.
-	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.						50,115.
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form	3,828.	10,522.	9,750.	15,022.	10,993.	
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.	3,828.	10,522.	9,750.	15,022.	10,993.	50,115.
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is	3,828.	10,522. 10,522. 2,951.	9,750. 9,750. 4,171.	15,022. 15,022. 2,081.	10,993. 10,993. 4,956.	50,115. 50,115. 15,000.
10 a b 11 12	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990	3,828. 3,828. 841.	10,522. 10,522. 2,951.	9,750. 9,750. 4,171.	15,022. 15,022.	10,993. 10,993. 4,956.	50,115. 50,115. 15,000. 8,160,832.
10 a b c 11 12 13 14	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check-this-box and	3,828. 3,828. 841.	10,522. 10,522. 2,951. tion's first, second	9,750. 9,750. 4,171.	15,022. 15,022.	10,993. 10,993. 4,956.	50,115. 50,115. 15,000. 8,160,832.
10 a b c 11 12 13 14	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check-this-box-and-tion C. Computation of Pu	3,828. 3,828. 841. s for the organiza stop here blic Support P	10,522. 10,522. 2,951. tion's first, second	9,750. 9,750. 4,171.	15,022. 15,022.	10,993. 10,993. 4,956. a section 501(c)(3	50,115. 50,115. 15,000. 8,160,832.
10 a b c 11 12 13 14	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check-this-box and tion C. Computation of Pu	3,828. 3,828. 841. stop-here blic Support P 08 (line 8, column	10,522. 10,522. 2,951. tion's first, second ercentage (f) divided by line	9,750. 9,750. 4,171. d, third, fourth, or	15,022. 15,022.	10,993. 10,993. 4,956. a section 501(c)(3	50,115. 50,115. 15,000. 8,160,832. 73.18%
10 a b c 11 12 13 14 Sec 15 16	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check-this-box-and-tion C. Computation of Pu Public support percentage from 20	3,828. 3,828. 841. stop-here blic Support P 08 (line 8, column 2007 Schedule A,	10,522. 10,522. 2,951. tion's first, secondary for the secondary first secondary for the secondary	9,750. 9,750. 4,171. d, third, fourth, or	15,022. 15,022.	10,993. 10,993. 4,956. a section 501(c)(3	50,115. 50,115. 15,000. 8,160,832.
10 a b c 11 12 13 14 Sec 15 16	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check-this-box and tion C. Computation of Pu	3,828. 3,828. 841. stop-here blic Support P 08 (line 8, column 2007 Schedule A,	10,522. 10,522. 2,951. tion's first, secondary for the secondary first secondary for the secondary	9,750. 9,750. 4,171. d, third, fourth, or	15,022. 15,022.	10,993. 10,993. 4,956. a section 501(c)(3	50,115. 50,115. 15,000. 8,160,832. 73.18% 81.82%
10 a b c 11 12 13 14 Sec 15 16	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check-this-box-and-tion C. Computation of Pu Public support percentage from 20	3,828. 3,828. 841. 841. Stop-here blic Support P 08 (line 8, column and a col	2,951. 2,951. tion's first, second ercentage (f) divided by line Part IV-A, line 27 me Percentage	9,750. 9,750. 4,171. 4,171. 4,171. 1, third, fourth, or	15,022. 15,022. 2,081.	10,993. 10,993. 4,956. a section 501(c)(3	50,115. 50,115. 15,000. 8,160,832. 73.18% 81.82% 0.61%
10 a b c 11 12 13 14 Sec 15 16 Sec 17 18	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check-this-box-and-tion C. Computation of Pupublic support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for Investment Income pe	3,828. 3,828. 3,828. 841. s for the organiza stop-here blic Support P 08 (line 8, column 2007 Schedule A, restment Incoror 2008 (line 10c, rom 2007 Schedule	2,951. 2,951. tion's first, second ercentage (f) divided by line Part IV-A, line 27 me Percentage column (f) divided e A, Part IV-A, line	9,750. 9,750. 9,750. 4,171. 4,171. 4,third, fourth, or 13, column (f)) 9 1 by line 13, column 27h.	15,022. 15,022. 2,081. fifth tax year as a	10,993. 10,993. 4,956. 4,956. 5 section 501(c)(3	50,115. 50,115. 15,000. 8,160,832. 73.18% 81.82% 0.61% 0.42%
10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this-box-and-tion C. Computation of Pupublic support percentage from 20 public support percentage from 21 investment income percentage from 23-1/3 support tests — 2008. If the more than 33-1/3%, check this between the sale of capital support tests — 2008. If the more than 33-1/3%, check this between the sale of capital support tests — 2008. If the more than 33-1/3%, check this between the sale of capital support tests — 2008. If the more than 33-1/3%, check this between the sale of capital support tests — 2008. If the more than 33-1/3%, check this between the sale of capital support tests — 2008. If the more than 33-1/3%, check this between the sale of capital support tests — 2008. If the more than 33-1/3%, check this between the sale of capital support tests — 2008.	3,828. 841. 841. s for the organiza stop-here blic Support P 08 (line 8, column 2007 Schedule A, restment Incor or 2008 (line 10c, rom 2007 Schedule ne organization did ox and stop here.	2,951. 2,951. tion's first, second ercentage (f) divided by line Part IV-A, line 27 me Percentage column (f) divided e A, Part IV-A, line if not check the both organization	9,750. 9,750. 4,171. d, third, fourth, or 13, column (f)) 1 by line 13, colume 27h. 1 ox on line 14, and qualifies as a put	15,022. 15,022. 2,081. 2,081. fifth tax year as a solution (f))	10,993. 10,993. 4,956. a section 501(c)(3) 15 16 17 18 nan 33-1/3%, and ganization	50,115. 50,115. 15,000. 8,160,832. 73.18% 81.82% 0.61% 0.42% line 17 is not X
10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check-this-box-and-tion C. Computation of Public support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage from 133-1/3 support tests — 2008. If the	3,828. 3,828. 3,828. 841. s for the organization did this box and stop here.	10,522. 10,522. 10,522. 10,522. tion's first, second ercentage (f) divided by line Part IV-A, line 27 me Percentage column (f) divided e A, Part IV-A, line d not check the bothe organization d not check a box here. The organi	9,750. 9,750. 9,750. 4,171. 4,171. 4,171. 4,171. 4,171. 5, third, fourth, or 1, third, fourth, or 2, 13, column (f)) 2, 1 2, 2, 2, 3 2, 3, 2, 3 2, 4,171. 4,171. 2, 4,171. 2, 1,171. 2, 1,171. 2, 2,171. 2, 3,171. 2, 3,171. 2, 4,171. 2, 4,171. 2, 1,171. 2, 1,171. 2, 1,171. 2, 1,171. 2, 1,171. 2, 1,171. 2, 1,171. 2, 1,171. 2, 1,171. 2, 1,171. 3, 1,171. 4, 1,171.	15,022. 15,022. 2,081. 2,081. fifth tax year as a fifth tax year and year and year and year and year a	10, 993. 10, 993. 10, 993. 4, 956. a section 501(c)(3 15 16 17 18 nan 33-1/3%, and ganization ore than 33-1/3%, ted organization	50,115. 50,115. 15,000. 8,160,832. 73.18% 81.82% 0.61% 0.42% line 17 is not X

Schedule A (Form 990 or 990-EZ) 2008 Habitat for Humanity of Boulder Valley dba Flatirons Habitat for 84-1229714 Page	4
Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)	_
•	_
	•
Other Income Part III, Line 12	
Description: Other income	. .
2004: 841.	-
2005: 2951.	-
2006: 4171.	-
2007: 2081.	<u>.</u> .
2008: 4956.	-
	-
	-
	-
	-
	-
	-
	_
	_
	-
	. .
	-
	_
	_

TEEA0404 10/07/08

BAA

Schedule A (Form 990 or 990-EZ) 2008

	Sup	porting	Statement	t of:
--	-----	---------	-----------	-------

Form	990	q	9/Government	Grants
------	-----	---	--------------	--------

Description	Amount
Boulder County	7,299.
Total	7,299.

Supporting Statement of:

Form 990 p 9/Noncash

Description	Amount	
	Description	Description

Boulder Bins - storage space	2,100.
Cost Effective Conservation	1,330.
Misc donations with value less than \$500	1,525.
Total	519,401.

Supporting Statement of:

Form 990 p 9/Total Revenue Investment

Description	Amount
Interest income	10,413.

Total <u>10,413.</u>

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Schedule **D** (Form 990) 2008

Habitat for Humanity of Boulder Valley dba Flatirons Habitat for Humanity 84-1229714 開始性間 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?? Partil Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e g , recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 19 Held at the End of the Year a Total number of conservation easements 2a 2b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Ranill Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, 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 the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2008 Habitat fo				84-122		Page 2
Part III Organizations Maintain	ng Collection	is of Art, Histo	rical Treasures, o	r Other Similar Ass	sets (cont	inued)
Using the organization's accession a that apply):	and other records	, check any of the	following that are a sig	nificant use of its collec	tion items (d	check all
a Public exhibition		d Loan o	or exchange programs			
b Scholarly research		e Other				
c Preservation for future generation	ons					
4 Provide a description of the organization Part XIV					ın	
5 During the year, did the organization assets to be sold to raise funds rath	solicit or receive er than to be mai	donations of art, ntained as part of	historical treasures, or the organization's colle	other similar	Yes	No
Part IV Trust, Escrow and Cust IV, line 9, or reported ar	odial Arrange amount on F	ments Comple orm 990, Part	ete if organization X, line 21.	answered 'Yes' to	Form 990,	, Part
1 a Is the organization an agent, trustee included on Form 990, Part X?			•	r assets not	Yes	X No
b If 'Yes,' explain the arrangement in I	Part XIV and com	iplete the following	ı 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 amo		Part X, line 21?	•	•	X Yes	∐ No
b if 'Yes,' explain the arrangement in I				00 Deat IV June 10		
Part V Endowment Funds Comp		·				
<u> </u>	(a) Current year	(b) Prior year	(c) Two years back	k (d) Three years back	(e) Four	years back
1 a Beginning of year balance	·	NEW STREET	1.00 M Can 17 Can 19 10 10 10 10 10 10 10 10 10 10 10 10 10	Carlos Services		13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b Contributions		「「「「「」」」	CANCERSON CONTRACTOR	17.17 (2.21) (2.15) (2.15) (2.15) (2.15) (2.15) (2.15) (2.15) (2.15) (2.15) (2.15) (2.15) (2.15) (2.15) (2.15)	4.25	124 274 1 m
c Investment earnings or losses .						7 2 4 4
d Grants or scholarships		The state of the s			11361114	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
e Other expenditures for facilities and programs		7.00			- Sent	
f Administrative expenses		, = (+) · ,				
g End of year balance			<u> </u>	1: 1: 1:	A Markey	32, 72 1)
2 Provide the estimated percentage of	the year end bal	ance held as				
a Board designated or quasi-endowme	ent >	%				
b Permanent endowment	%					
c Term endowment ►	%					
3a Are there endowment funds not in thoroganization by:	e possession of	the organization th	at are held and admini	stered for the	Ye	s No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(II), are the related orga	nizations listed a	s required on Sch	edule R?		3b	
4 Describe in Part XIV the intended us	es of the organiz	ation's endowmen	t funds.			
Part VI Investments—Land, Bui	dings, and E	quipment. See	Form 990, Part X	, line 10.		
Description of investment		est or other basis investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book	(Value
1 a Land		965,283.		Ty 1 The Walter Dr.	9 (65,283.
b Buildings						
c Leasehold improvements .			33,948.	32,436.		1,512.
d Equipment			56,768.	36, 295.		20,473.
e Other						
Total. Add lines 1a-1e (Column (d) should	equal Form 990,	Part X, column (E	3), line 10(c).)	•	98	37,268.
BAA				Sche	dule D (Form	

positions under FIN 48

	-1229714 Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements	
1 Total revenue (Form 990, Part VIII, column (A), line 12)	2,199,578.
2 Total expenses (Form 990, Part IX, column (A), line 25)	2,147,210.
3 Excess or (deficit) for the year Subtract line 2 from line 1	52,368.
4 Net unrealized gains (losses) on investments	
5 Donated services and use of facilities	
6 Investment expenses	····
7 Prior period adjustments	
8 Other (Describe in Part XIV)	1.
9 Total adjustments (net) Add lines 4-8	1.
10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	52,369.
1 Total revenue, gains, and other support per audited financial statements	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 2,218,759.
a Net unrealized gains on investments 2a	14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b Donated services and use of facilities	1 - 34
c Recoveries of prior year grants	
d Other (Describe in Part XIV)	
e Add lines 2a through 2d	2e 19,181.
3 Subtract line 2e from line 1	3 2,199,578.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1.	2,133,370.
a Investments expenses not included on Form 990, Part VIII, line 7b . 4a	
b Other (Describe in Part XIV)	
c Add lines 4a and 4b	4c
5 Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5 2,199,578.
Pain XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return
1 Total expenses and losses per audited financial statements	1 2,166,390.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	TER .
a Donated services and use of facilities 2a	
b Prior year adjustments 2b	
c Losses reported on Form 990, Part IX, line 25	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
d Other (Describe in Part XIV) 2d 19,181.	
e Add lines 2a through 2d	2e 19,181.
3 Subtract line 2e from line 1	3 2,147,209.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	12 - 24 - 25 - 25 - 25 - 25 - 25 - 25 - 2
a Investments expenses not included on Form 990, Part VIII, line 7b	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
b Other (Describe in Part XIV) . 4b 1.	
c Add lines 4a and 4b	4c 1.
5 Total expenses. Add lines 3 and 4c (This should equal Form 990, Part I, line 18.)	5 2,147,210.
Part XIV Supplemental Information	
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, Iir ine 4, Part X; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	nes 1b and 2b, Part V,
Pt X Escrow funds from homeowners for payment of property	
taxes, insurance and HOA dues	
Pt XI Line 8 Rounding	
Pt XII Line 2d Event costs	
Pt XIII Line 2d Event costs	
Pt_XIII_Line_4b	
Pt_IV_Line_2bEscrow funds for property taxes, insurance & HOA dues	

Schedule D	(FORM 990) 2008 Habitat for Humanity of Boulder Valley dba Flatirons Habitat for Hu	04-1229/14	Page 5
Part XIV	Supplemental Information (Continued)		
<u> </u>			
			-
- - -			
-			
_ _			
-			
			
_			
	,+,-,e,=,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-		
			

BAA

SCHEDULE G (Form-990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service

Must be completed by organizations that answer 'Yes' to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Open to Public #

Name of the organization					Employer Identific	
Habitat for Humanity of Box	ulder Valley	dba Fl	atirons	Habitat for Hum	anity 84-122971	. 4
Part : Fundraising Activities	. Complete if	the orga	nization	answered 'Yes' to	Form 990, Part IV	. line 17.
Indicate whether the organization						,
	i raiscu iulius (ilii	ough any c	or trie rollo			
Mail solicitations				Solicitation of non-		
Email solicitations				Solicitation of gove	rnment grants	
Phone solicitations				Special fundraising	events	
In-person solicitations						
2a Did the organization have written employees listed in Form 990, Pa	or oral agreeme	nt with any	/ individual	l (including officers, dire	ectors, trustees or key	□vaa □ua
						Yes No
b If 'Yes,' list the ten highest paid in	ndividuals or enti	ties (fundr	aisers) pui	rsuant to agreements up	nder which the fundraise	er is to be
compensated at least \$5,000 by	the organization	Form 9901	±∠ filers ar	re not required to compl		
		()			(v) Amount paid to	6.0 Americal and to
(i) Name of individual	(ii) Activity		fundraiser dy or control	(iv) Gross receipts	(or retained by) fundraiser listed in	(vi) Amount paid to (or retained by)
or entity (fundraiser)			ibutions?	from activity	col.(i)	organization
		+				
		Yes	No			1
		1				
			,			
*		 				
]	J l			J
		<u> </u>				
			İ	1 100		
·· - · · · · · · · · · · · · · · · · · · ·		 				
		ļ				
		 	-			
			ľ			
		ļ				
		İ	i I			
		1				
			1			
		<u> </u>	<u> </u>			
Total			▶		<u> </u>	<u> </u>
3 List all states in which the organior licensing	zation is registere	ed or licen	sed to solu	cit funds or has been no	otified it is exempt from	registration
		_				
		 -				
	. 	- 				-
	 -					
						
	. 					

		G (Form 990 or 990-EZ) 2008 Habitat for				
Par	t II	Fundraising Events. Complete if	the organization a	nswered 'Yes' to Fo	orm 990, Part IV, li	ne 18, or
		reported more than \$15,000 on F	(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
			BDT	Holy Smokes	NONE	(Add col (a) through col (c))
R			(event type)	(event type)	(total number)	001 (0)/
KE>E20E	1	Gross receipts	43,151.	6,702.		49,853.
E	2	Less Charitable contributions .	34,952.	5,817.		40,769.
	3	Gross revenue (line 1 minus line 2) .	8,199.	885.		9,084.
•	4	Cash prizes				
DIRECT	5	Non-cash prizes .				
	6	Rent/facility costs .			·	
EXPENSES	7	Other direct expenses	18,199.	482.		18,681.
E S	8	Direct expense summary. Add lines 4- th	rough 7 in column (d)		•	18,681.
		Net income summary. Combine lines 3 ar		· <u>·</u>		-9,597.
Pai	till	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye ·	s' to Form 990, Par	t IV, line 19, or rep	ported more than
RE>EXUE			(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
E E	1	Gross revenue				
F	2	Cash prizes .				
DIRECT	3	Non-cash prizes				
C S T E S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes %	Yes %	
	7	Direct expense summary. Add lines 2 thro	ough 5 in column (d)		•	
	8	Net gaming income summary. Combine li	nes 1 and 7 in column ((d)	•	
		er the state(s) in which the organization op ne organization licensed to operate gaming	• •			YES NO 9a
		o,' Explain				
	- -					
		e any of the organization's gaming license: es,' Explain	s revoked, suspended o	r terminated during the t	ax year?	. 10a
11	Doe	s the organization operate gaming activitie	s with nonmembers?			11

Schedule G (FORM 990 of 990-EZ) 2008 Habitat for Humanity of Boulder Valley dba Flatirons Habitat for	or Humanity 84-12297	<u> 14 </u>		Page 3
	1 1		YES	NO
13 Indicate the percentage of gaming activity operated in		-17		- '
a The organization's facility	13a - %	_		-
b An outside facility	13b 8	_		
14 Provide the name and address of the person who prepares the organization's gaming/special ever	nts books and records:	3 -		.^
		<i>[</i> *.		1 -
Name. •		١	- 1'-,	ļ ,
		1		. 3
Address: -			ĺ	-
	_			
15a Does the organization have a contact with a third party from whom the organization receives gam	3	15 a		<u> </u>
b If 'Yes,' enter the amount of gaming revenue received by the organization \$	and the amount	***	١.	
of gaming revenue retained by the third party \$				-
c If 'Yes,' enter name and address				
N .		* 5 =	. , .	<u>.</u> , ,
Name [.] •				٠,٠
A LL		-	3.5	
Address: -		3 , # - 47 (\$# 1		1. 94
10. Common management and the second and			17.5	7
16 Gaming manager information		100		
Manage B				يار ا غاد ا
Name: •		13. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18	454 A 464	-4 ,. '
Coming manager componentian b. C		Control of the	4	74 to 5.7
Gaming manager compensation ► \$, d.
Description of services provided: ►		1 0		54. ·
Description of services provided:		T 1,27	-	, <u>,</u>
Director/officer Employee Independent contractor			٠	
		12.1		1
17 Mandatory distributions		2.5	- ' - ' -	-7.
			·	` ¬',
a Is the organization required under state law to make charitable distributions from the gaming procistate gaming license?	eeds to retain the	17a		
b Enter the amount of distributions required under state law distributed to other exempt organization	s or spent in the	1, 2		
organization's own exempt activities during the tax year: ► \$,° _ ; °	3	
BAA TEEA3703 07/18/08	Schedule G (Form 99	0 or 99	0-EZ)	2008

SCHEDIII F.I		Grante and Oth	Grants and Other Assistance to Organizations	Organization	U	!	OMB No 1545-0047
(Form 990)		Governmen	Governments and Individuals in the U.S	Is in the U.S.	<u>,</u>		2008
Department of the Treasury Internal Revenue Service	O	Complete if the organization	rganization answered 'Yes,' on Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.	orm 990, Part IV, lines	21 or 22.	I	Open to Public Inspection
Name of the organization						Employer identification number	ation number
Habitat for Huma	Habitat for Humanity of Boulder Valley dba	ev dba Flatirons	Habitat	for Humanity		84-1229714	4
1 Does the organization the selection criteria	Does the organization maintain records to substantiate the amount of the selection criteria used to award the grants or assistance?	ot to	the grants or assistance, the grantees' eligibility for the grants or assistance, and	itees' eligibility for the	grants or assistance, a		X Yes No
2 Describe in Part IV the	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	nonitoring the use of gran	at funds in the United Sta	ites.)
Part.II.] Grants and C 990, Part IV, Part IV and S	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' on F 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule 1.1 (Form 990) if additional space is needed	nments and Organiat received more the	Organizations in the United States. Complete if the organization answered 'Yes' on Form more than \$5,000. Check this box if no one recipient received more than \$5,000. Use are is needed	ed States. Complet ons box if no one r	e if the organizati ecipient received	ion answered 'Ye more than \$5,00	es' on Form 00. Use
1 (a) Name and address of organization or government	of organization (b) EIN	(c) IRC section	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Habitat for Humanit 121 Habitat St. Americus GA 31709	Humanity_Intl St. 31709	3 501(c)(3)	25, 698.				Intl programs
2 Enter total number of section 501(c)(3) at 3 Enter total number of other organizations	Enter total number of section 501 (c)(3) and government organizations Enter total number of other organizations	nt organizations					
BAA For Privacy Act and	BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	s, see the Instructions fo	r Form 990.	TEEA3901	12/19/08	Sched	Schedule I (Form 990) 2008

Schedule I (Form 990) 2008 Page 2 'Yes' on Form 990, Part IV, line 22. (f) Description of non-cash assistance Part IV 3 Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information 84 - 1229714Habitat for Humanity Intl (HFHI). Tithe is to be used to fund international -Flathrons Habitat for Humanity tithes 10% of unrestricted donations to ... _building_programs_that_comply_with_the_policies_established_by_HFHI.___ HFHI reports back to FHFH on a regular basis as to where the money has (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered been used and how many homes have been built with the FHFH tithe. Habitat for Humanity of Boulder Valley dba Flatirons Habitat for Humanity (d) Amount of non-cash assistance 14,000 3,000 (c) Amount of cash grant Use Schedule I-1 (Form 990) if additional space is needed (b) Number of recipients (a) Type of grant or assistance FHLB mortgage assist Schedule 1 (Form 990) 2008 car loan Pt_I Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pay off Part III. BAA

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.
► To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Open to Public

Name of the organization							ployer i			mber		
Habitat for Humanity of Boulder Va	alley	dba F	latiror	s Habitat	for Hu	manity 84	-12	2971	. 4			
Excess Benefit Transactions To be completed by organizations that	(sect	ered 'Yes	1(c)(3) a s' on Form	nd section 990, Part IV,	501(c)(line 25a o	4) organiza r 25b, or Forn	n 990-	EZ, Pa	y). irt V, I	ine 40	1 -	
1 (a) Name of disqualified person					(b) Description	on of transaction					(c) Cor	rrected?
1 (a) Name of disqualified person				· · · · · · · · · · · · · · · · · · ·			<u> </u>	_	-		Yes	No
												<u> </u>
											-	
						•					 	
2 Enter the amount of tax imposed on the org	ganızatı	on mana	agers or di	squalified per	sons durii	ng the year ur	nder	▶ \$				·
3 Enter the amount of tax, if any, on line 2, a	bove, r	eimburse	ed by the o	organization				▶ \$				
To be completed by organiza Part V, line 38a.	sted F tions	erson : that an	s. swered	'Yes' on Fo	orm 990	, Part IV, lı	ne 26	5 or I	orm	990-	-EZ,	
(a) Name of interested person and purpose	(b) Loan the orga	to or from anization?	(c)	Original pal amount	(d) B	(d) Balance due		(e) In default?		ult? (f) Approved by board or committee?		Vritten ement?
	То	From					Yes	No	Yes	No	Yes	No
Michelle Snyder Mortgage-Habitat homeow		X		105,429.		92,575.		Х	X	 	X	
		<u> </u>		-	_		-		-		 	-
											 	<u> </u>
					_		10 3 8 7 3 mg	de cada	7. 45.	-3356 (3)	794 - 1	1 2 2 2
Total			to d Done	▶ \$		92,575.			1		des	
Part III. Grants or Assistance Benefi To be completed by organiza	tting i tions	that an	i ed Pers Iswered	'Yes' on Fo	rm 990	, Part IV, li	ne 27	7.				
(a) Name of interested person				interested person		T	mount of		or type o	f assist	ance	
									-			
Business Transactions Involution To be completed by organiza	l ving l tions	interes that an	ted Pers	ons. 'Yes' on Fo	orm 990	, Part IV, Iı	ne 28	 3a, 2	8b, c	 or 280	 c.	
(a) Name of interested person		elationship ested perso organizati	n and the	(c) Amou transacti	nt of on \$	(d) Des	cription	of trans	action		organi	aring of ization's nues?
					0 000			- 4			Yes	No
Gary L. Anderson	 	d mem			<u>0,299.</u> 1 090	Contract Sale of co					7	X
Keith Dietzen/Keymark	DOAL	a mem	mer	3	1,090.	Sale of co.	m Jen	aler	1418/	avcs	 	 ^
		-										
	<u> </u>					<u> </u>						
BAA For Privacy Act and Paperwork Reduction	Act No	itice, sec	e the instr	uctions for Fo	orm 990.	Sch	redule	L (Fo	rm 99	u or 9	90-EZ	.) 200

SCHEDULE M (Form 990)

Non-Cash Contributions

► To be completed by organizations that answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

(b)

(c)

OMB No 1545-0047

2008

Open to Public -Inspection

(d)

Department of the Treasury Internal Revenue Service Name of the organization

Part | Types of Property

Name of the organization

Habitat for Humanity of Boulder Valley dba Flatirons Habitat for Humanity 84-1229714

(a)

		Check if applicable	Number of Contributions	Revenues reported on Form 990, Part VIII, line 1g	Metho	od of determ revenues	ining
1	Art-Works of art .						
2	Art-Historical treasures						
3	Art-Fractional interests .	-					
4	Books and publications .		14506 · 4504 · 450	24,456.	Annual	sales re	evenue
5	Clothing and household goods	Х	1、西北湖东北京	386,951.			
6	Cars and other vehicles .	X	2			sales re	
7	Boats and planes						
8	Intellectual property						
9	Securities—Publicly traded						
10	Securities-Closely held stock						
11	Securities-Partnership, LLC, or trust interests						
12	Securities-Miscellaneous						
13	Qualified conservation contribution (historic structures)						
14	Qualified conservation contribution (other)						
15	Real estate—Residential						
16	Real estate—Commercial						
17	Real estate-Other .	X	1	450,000.	Bldr Cty	assessor fu	ll value
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ► (Construction materials) .	_X	3	11,897.	Compar	able sa	les
26	Other ► (Laptop_computer)	X	1	2,774.	Compar	abl <u>e</u> sai	<u>les</u>
27	Other ► ()			· · · · · · · · · · · · · · · · · · ·			
_28	Other ► ()		<u> </u>				
29	Number of Forms 8283 received by the organizatio organization completed Form 8283, Part IV, Donee	n during the Acknowled	tax year for contribution gement .	ns for which the	29		T .:
30 a	During the year, did the organization receive by co- hold for at least three years from the date of the in	ntribution ar itial contribu	ny property reported in P ition, and which is not re	art I, lines 1-28 that it equired to be used for e	must xempt	Yes	No
_	purposes for the entire holding period?	,	•		ļ	30 a	X
	If 'Yes,' describe the arrangement in Part II.				_		
31	Does the organization have a gift acceptance police	that requir	es the review of any nor	n-standard contributions	57	31	<u> </u>
32a	Does the organization hire or use third parties or renoncash contributions?	lated organ	izations to solicit, proces	ss, or sell		32 a	X
b	If 'Yes,' describe in Part II.				ĺ	5.4	
33	If the organization did not report revenues in colum describe in Part II.	ın (c) for a t	ype of property for which	n column (a) is checked	i,		
BAA	For Privacy Act and Paperwork Reduction Act No	tice, see the	Instructions for Form 9	90.	Schedul	e M (Form 9	90) 2008

Schedule	M (Form 990) 20	08 Habitat for	Humanity of Bou	lder Valley dba	Flatirons Habitat f	for Humanity 8	34-1229714	Page 2
Part II	Supplementa and 33. Also	al Information complete this	Complete this part for any a	s part to provi dditional infor	de the informatio mation.	n required b	34-1229714 by Part I, lines 30b	, 32b,
						-		•
	· 							
- -						-	· ·	
		·				· 		
						-		
							-	
		. 					· 	
		· 					· ·	
		· 						
					_		· 	
							· 	
							· 	
		· – – – – – – –						
							·	
- 							- 	
		· 						
							· 	
		· - -						
	· 	· 					· 	
		· 						
		· 	-					
-		·					·	

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

Bepartment of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Open to Public . Inspection"

Employer identification number

Habitat for Humanity of Boulder Valley dba Flatirons Habitat for Humanity 84-1229714
Pt_VI-C, Line 19 The governing documents, conflict of interest policy and financial
statements are available during normal working hours at the corporate office
Pt_VI-A, Line 10 The 990 was prepared by the Finance Director and Executive
Director in conjunction with the Finance Committee. Copies
of the 990 were provided to all Board members prior to
the May 3, 2010 Board meeting. At the Board meeting the
treasurer_reviewed_the_990_with_the_attendees_and
responded to guestions from Board members.
Pt_VI-B, Line 12c As part of the annual audit, the external auditors
review areas where there might be a potential conflict
of interest between board members, management and the
organization. A guestionnaire has been developed for board
members and other interested parties to complete annually
disclosing any transactions that might create a conflict
of interest.
Pt_VI-B, Line 15 A new executive director was hired during the fiscal year.
A committee appointed by the board, reviewed several salary
surveys and contacted other Habitat affiliates to determine
the appropriate salary range. The board approved the range
prior to soliciting applicants. The salary offered to and
accepted by the new executive director was within the board
approved range. During the same fiscal year, a new finance
director was hired on a part-time, contract basis. Based
upon the number hours to be worked and the hourly rate, the total
compensation paid was less than to the predecessor and the new
finance director was more qualified in terms of education and

TEEA4901 12/19/08

Schedule 0 (Form 990) 2008	Page 2
Name of the organization Habitat for Humanity of Boulder Valley dba Flatirons Habitat for Human	Employer identification number i + v 84~1229714
madical for numarity of boulder variety and fractions habitate for numari	,
experience. All other salary adjustments we	ere calculated
with consideration of comparable jobs per se	everal salary
surveys. In the following year, the board im	mplemented_a
formal annual salary review process	
Pt_VI-A, Line 8 Minutes are kept of each board meeting, publ	ished and
approved at the subsequent meeting	
Pt VI-A, Line 8 Any delegation of authority from the board t	o committees
is limited in scope	
Pt_VI-A, Line 2 Keith Dietzen - business relationship	
Pt VI-A, Line 2 Gary Anderson - family relationship	
Pt_VI-B, Line 13 The Employee Handbook does outline the police	cy_for_elevating
grievances to the board when employees do no	ot_feel_that
issues have not been satisfactorily addresse	ed_by_management.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2008

OMB No 1545-0047

Open to Public Inspection

Employer identification number

84-1229714

 Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 See separate instructions. Department of the Treasury Internal Revenue Service Name of the organization

Habitat for Humanity of Boulder Valley dba Flatirons Habitat for Humanity

(F)
Direct controlling
entity (E) End-of-year assets (**D)** Total income (C)
Legal domicile (state or foreign country) (B) Primary activity (A) | Name, address, and EIN of disregarded entity Part'I' Identification of Disregarded Entities

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
FHFH Community Housing Dev Org 30-0174334	Pro				
2540 Frontier Ave #109, Boulder CO 80301	able housing	CO	501(c)(3)	170(b)(1)(a)(vi) FHFH	FHFH
	-				
	-				
BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	e Instructions for Form 990.	2	TEEA5001 12/23/08	Schedu	Schedule R (Form 990) (2008)

84-1229714

Part VI Unrelated Organizations Taxable as a Partnership

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

(A) Name, address, and EIN of entity	IN of entity	(B) Primary activity	(C) Legal Domicile (State or Foreign Country)	Are all partners section 501(c)(3) organizations?	(E) Share of end-of-year assets	(F) Disproportionate allocations?	(G) Code V-UBI amount In Box 20 of Schedule K-1 Form (1063)	(H) General or managing partner?	al or ging er?
				Yes No		Yes No	(200)	Yes	٩
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
	 					_		_	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
						_			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
						-			
1									
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•							
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
:									
ВАА			TEEA5004 01/21/09				Schedule R (Form 990) (2008)) (066 u	2008)
								ŧ	

Supporting Statement of:

Form 990 p 9/Line 11 Rel/Exem Fun Rev-1

Description	Amount
Grocery card net income Miscellaneous	3,890. 5,037.
Total	8,927.

Supporting Statement of:

Form 990 p 11/Line 5, column (A)

	Amount	
Mortgage	receivable from BOD member	97,225.
Total		97,225.

Supporting Statement of:

Form 990 p 11/Line 17, column (A)

Description	Amount
Accounts payable	62,141.
Payroll liabilities	27,436.
Sales tax payable	2,435.
Total	92,012.

Supporting Statement of:

Form 990 p 11/Line 17, column (B)

Description	Amount
Accounts payable	71,477
Payroll liabilities	26,440
Sales tax payable	3,160
Miscellaneous payable	3,153

Total 104,230.

Supporting Statement of:

Form 990 p 10/Line 24f

	(C)			
		(B)	Management and	(D)
Description	(A) Total	Program Services	General	Fundraising
Maintenance/Utlities	4,496		4,496	
Newsletter	9,460			2,365
Direct appeal	7,346	<u> </u>		7,346
Auto expense	6,292		612	2,152
Family services	5,439	5,439		
HOA dues	5,319	5,319		
Small tools/const supplies	4,606	4,606		
Property taxes	2,520	2,520		
Safety equipment	3,437	3,437		
Advertsing	3,689			3,689
Dues & memberships	2,957	200		2,757
Bank/credit card fees	3,040		1,428	1,612
ReStore advertising	18,869	18,869		
ReStore other op exp	44,445	44,445		
Other expense	18,311	7,413	3,771	7,127
Total Line 24f	140,226	102,871	10,307	27,048

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

with those in need and to make shelter a matter of conscience with people everywhere.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

4d Describe the exempt purpose achievements for each of the organization's other program services. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

Code Description:
Expenses 7,299.
Grants Of 0.
Revenue 7,299.

Description:
7,299. The Keys from the Community program teams volunteer coaches with a Habitat homeowner to encourage and enable the homeowner to implement a concrete plan to move from poverty to economic stability. During the fiscal year, the organization provided 35 volunteers with the six hour Bridges out of Poverty training. There were nine graduates of the 16 week Getting Ahead program who were matched with coaches in the following year