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Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black

lung benefit trust or private foundation)

2009

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Form **990** (2009

OMB No 1545-0047

A		2009 calendar year, or tax year beginning , 2009, an	nd ending	, 20
В	Check if applicable	Please C Name of organization, number and street, city, town, state, and ZIP co	de D Employer	Identification number
П	Address cha	use IRS nge label or	75	-1180998
Н	Name chan	PRINTED TO THE PRINTED TO A COLOR	E Telephone	
Н		type. Notern 122218 Horiz Bollbarts 18500	1 '	0-692-2211
Н	Initial return	See Specific 4410 ENTEWNY DIVID		
Н	Terminated	Instruc- 4410 FAIRWAI BLVD	G Gross receipts	\$ <u>138547</u> .
Ш	Amended re		H(a) Is this	a group return
Ш	Application pending	F Name and address of principal officer. CHARLES L DENNIS	for affi	iliates? Yes 🛛 Yes 🛛 No
		4410 FAIRWAY WICHITA FALL TX 76308	H(b) Are all a	affiliates included?
T :	Tax-exem	pt status: X 501(c)(6) ∢ (insert no.) 4947(a)(1) or 527		attach a list tructions) Yes No
J	Website:			exemption number
_	Form of orga		of formation 1957	
	art I		or formation 1907	IN State of legal doffliche 121
	_	Summary		
	1	efly describe the organization's mission or most significant activities		
_	<u>P</u>	ROVIDE A CENTRAL FORUM REGARDING TRENDS AND	TECHNIQU	ES IN THE HOME
Governance		ONSTRUCTION INDUSTRY AND SERVE TO PROMOTE T	HE INDUST	RY TO THE HOME
па	В	UYING MARKET		
Ver	2 C	eck this box if the organization discontinued its operations or disposed of more	e than 25% of its ne	et assets
Ĝ		imber of voting members of the governing body (Part VI, line 1a)		3 12
		imber of independent voting members of the governing body (Part VI, line 1b)		4 12
Activities &	1		•	5 1
₹		tal number of employees (Part V, line 2a)		
Ç	6 To	tal number of volunteers (estimate if necessary)		6
_	7a To	tal gross unrelated business revenue from Part VIII, column (C), line 12		7a
	b No	t unrelated business taxable income from Form 990-T, line 34		7ь
			Prior Year	Current Year
	8 C	ontributions and grants (Part VIII, line 1h)	416	13. 41944.
Revenue		ogram service revenue (Part VIII, line 2g)	175	14. 13244.
Ver		· · · · · · · · · · · · · · · · · · ·		416.
್ಷ		restment income (Part VIII, column (A), lines 3, 4, and 7d)	407	
		her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	497	
		tal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1088	47. 138523.
	13 G	ants and similar amounts paid (Part IX, conumpte) times 1-3)		
	14 Be	nefits paid to or for members (Part IX, column to Hine 41.		
S	15 Sa	laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	191	50. 18537.
Expenses	16a Pr	ofessional fundraising fees (Part is column (A) Jine 11e)		
þe	h To	tal fundraising expenses, (Part X, column (D), line 25) 11134.	'	•
ă		- 101	731	50. 59679.
		her expenses (Part IX, column (A), lines (44-24f)	923	
		tal expenses - Add lines 13-17 (must equal Facility collumn (A), line 25)		
	19 R	evenue less expenses Subtract line 18 from line 12	165	· · · · · · · · · · · · · · · · · · ·
5 8	3		Beginning of Y	
Net Assets or Fund Balances	20 To	tal assets (Part X, line 16)	844	20. 74727.
Ass	21 To	tal liabilities (Part X, line 26)	700	00.
<u> </u>	22 N	t assets or fund balances Subtract line 21 from line 20 .	144	20. 74727.
_	art II	Signature Block	•	
		Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statement	ents, and to the hest of m	v knowledge
		and belief, it is true correctlend complete Deceration of preparer (other than officer) is based on all information of w		
		and belief, it is title admed and complete bedefault of peparer (other than officer) is based on an information of w	vilicii preparei nas any kir	/
٠.			1 2	5-14-2010
Sig		Vitales . (Klunes	<i>\</i>	
He	re	Signature of officer		ate
		CHARLES L DENNIS PRESIDEN	<u> </u>	
		Type or print name and title		
_		Preparer's Date	Check If	Preparer's identifying number (see instructions)
Pai	d	signature 5/14/10	self- employed ► X	
Pre	parer's	Firms name (or yours NATHAN P PLATT CPA	EIN	▶ 75-1994695
Use	Only	if self-employed),	308 Phone no	
_		address, and ZIP+4 2910 REMP WICHITA FALLS IX 76 discuss this return with the preparer shown above? (See instructions)	JOO PHONE NO	<u> </u>
Ma	v tne iKS			. 🔀 Yes 📗 No

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

	1990 (2009) NORTH TEXAS HOME BUILDERS ASSOC	75-1180998 Page 2
	rt III Statement of Program Service Accomplishments	
1	Briefly describe the organization's mission	THE TAX THE HOLD
	PROVIDE A CENTRAL FORUM REGARDING TRENDS AND TEC	
		NDUSTRY TO THE HOME
	BUYING MARKET	
2	Did the organization undertake any significant program services during the year which were not list	ted on
	the prior Form 990 or 990-EZ?	. Yes 🛛 No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts any program	m services? Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the exempt purpose achievements for each of the organization's three largest program se	ervices by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report t	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	a g. a
	anocasions to carrier, are total expenses, and revenue, in any, for each program correct repenses.	
42	(Code) (Expenses \$ including grants of \$) (Revenue \$
4a	(Code) (Expenses \$ including grants of \$) (Nevenue ψ
	PROVIDE A CENTRAL FORUM REGARDING TRENDS AND TEC	HNIQUES IN THE HOME
		NDUSTRY TO THE HOME
	BUYING MARKET	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$
40	(Code) (Expenses \$ including grants of \$) (Nevende ¢
4-	(Code:) (Expenses \$ including grants of \$) (Revenue \$
4c	(Code) (Expenses \$ including grants of \$) (Nevenue ψ
4d	,	
	(Expenses \$ including grants of \$)(Revenue \$	5
4e	Total program service expenses ▶	
4e	1 otal program service expenses	Form 990

Part IV Checklist of Required Schedules

			Yes	No_
1 1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
(complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3 1	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		X
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,			
	Part II	4		
	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	_		v
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		<u>X</u> _
	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to		İ	
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete	6		Х
	Schedule D, Part I	-		
	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	1	Х
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	·	8		Х
	complete Schedule D, Part III 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		Х
	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,		•	
	VII, VIII, IX, or X as applicable	11	х	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI.			
	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
1	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain a separate, independent audited financial statement for the tax year? If "Yes," complete			
;	Schedule D, Parts XI, XII, and XIII.	12		X
12A	Was the organization included in a consolidated, independent audited financial statement for the tax year? Yes No			
1	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1 1	1	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u> _
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			37
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		<u> </u>
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			37
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			v
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		_ <u>X</u>
	Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX,		Ì	v
	column (A), line 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	ا مر ا	,	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		х
	If "Yes," complete Schedule G, Part III	19		$\frac{X}{X}$
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	,	

r as	Checkist of Required Ochedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			.,
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's			
	current and former officers, directors, trustees, key employees, and highest compensated employee's? If "Yes,"			₩
0.4-	complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			х
_	24b through 24d and complete Schedule K. If "No," go to question 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
С		240		
	to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		<u> </u>
d 25-	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	240		
25a	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	25a		
b	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	230		
20	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,	1		
21	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties, directly or indirectly			
	(see Schedule L, Part IV instructions for definitions of "direct" and "indirect" and applicable filing thresholds,			
	conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	1		
-	Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family			
_	member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		Х
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 1	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		
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
38	Did the organization complete Schedule O and provide explanations for Part VI, lines 11 and 19?	38	Х	
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F	Statements Regarding Other IRS Filings and Tax Compliance				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	_			
	U.S. Information Returns. Enter -0- if not applicable	0	_		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	•	1.1	32 I	
_	gaming (gambling) winnings to prize winners?		1c	<u> </u>	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	-			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a		¬ ı	v l	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instruct	ions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by		الما	1	Х
	this return?		3a		
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		1.1		Х
	a financial account in a foreign country (such as a bank account, securities account, or other financial account (financial account, securities account, or other financial account (financial account).	11)?	4a		
D	If "Yes," enter the name of the foreign country				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank				
- -	and Financial Accounts West the experience a party to a probabled tax shelter transpoten at any time during the tax year?		5a	I	Х
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X _
b	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regard	ina	30		
·	Prohibited Tax Shelter Transaction?	···9	5c	I	
62	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	• •	"		
va	organization solicit any contributions that were not tax deductible?		6a		х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or		1		
_	gifts were not tax deductible?		6ь		
7	Organizations that may receive deductible contributions under section 170(c).		h	1	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		1 1	1	
	and services provided to the payor?		7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		_		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal				
	benefit contract?		. 7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		. 7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		. 7g	Х	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as req	uired?	7h	X	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting				
	organizations Did the supporting organization, or a donor advised fund maintained by a sponsoring organization	ation,		1	
	have excess business holdings at any time during the year?	•	8		
9	Sponsoring organizations maintaining donor advised funds.		1 - 1	1	
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	• •	9b	ŀ	
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12		_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]		_		
11	Section 501(c)(12) organizations. Enter				
a	Gross income from members or shareholders . 11a		-		
b	Gross income from other sources (Do not net amounts due or paid to other sources				
122	against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	I	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		1 .54	ı	
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Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	d for a	"No"	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instr	ıctıons		
Secti	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body 1a 1			
b	Enter the number of voting members that are independent	2		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		_ <u>X</u> _
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		_X_
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u>X</u>
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one of more members			
	of the governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		_X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following?	1		
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X_	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		_X_
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	. 10a		_X_
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	. 11		X
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	12a		<u>X</u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	nse to conflicts?	12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:	1		
а	The organization's CEO, Executive Director, or top management official?	15a		X
b	Other officers or key employees of the organization?	15b		X
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	1		
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	1		
	the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes it governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	000	_	
	organization ▶ORGANIZATION 4410 FAIRW WICHITA FA TX 76308 940-692	-221	T	

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Form **990** (2009)

Part VII 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. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees; and former such persons.

(A)	(B)			(C)			(D)	(E)	(F)
Name and Title	Average hours per week		Institutional trustee	Officer	a Key employee	Highest compensated employee	Pormer	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
CHARLES DENNIS										
PRESIDENT	5	Х		X				0	0	0
DOUG MCCULLOCH										
V-PRESIDENT	1			X				0	0	0
WAYNE PHARRIES										
ASSOC V-PRES	1			\mathbf{x}_{-}				0	0	0
BEN SHELTON				Γ						
TREASURER	1			X				0	0	0
TIM SAWYER										<u>_</u> _
SECRETARY	1			X				0	0	0
JOSE GARCIA										
PAST PRES	1	Х		X				0	0	0
BOBBY ROWLAND										
DIRECTOR	1	X				1		0	0	0
D BEDINGFIELD										
DIRECTOR	1	Х						0	0	0
RANDY WACHSMAN										
DIRECTOR	1	X						0	0	0
BRIAN HOOKER									· -	
DIRECTOR	1	Х						0	0	0
KIM HOLLY										
DIRECTOR	1	Х						0	0	0
DENNIS PROBST										
DIRECTOR	1	х						0	0	0
STAN MOUNTAIN										
ALT DIRECTOR	1	x						0	0	0
				T			-			
	1	i l	I	1	ı	l	ı	I	1	

Rev 1

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

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

Rev 1

		2009) NORTH TEXAS		BUILDERS	SASSOC		75-118	1998 Page 9
Part	VIII	Statement of Revenu	16				<u> </u>	
	•	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f	1a	41944.				
	h	Total. Add lines 1a-1f		. •	41944.			
Program Service Revenue	2a	MONTHLY MEETIN	īGS	Business Code 900099	13244.	13244.		
Æ	b							
<u>iç</u>	c							
Sen	d							
Ë	е_							
e dice	f	All other program service rev	/enue		12011			
<u> </u>	g	Total. Add lines 2a-2f		. ▶	13244.			
	3	Investment income (including other similar amounts)	g alviaenas	i, interest, and	416.	416.		
	4	Income from investment of tax-exempt	hond proceed		410.	410.		
	5	Royalties		` ,				
		(i) R	eal	(II) Personal				
	6a	Gross Rents						
	b	Less rental expenses						
	С	Rental income or (loss)			1	1		1
	d	Net rental income or (loss) Gross amount from		. 🕨				<u> </u>
	7a	sales of assets (I) Sec	urities	(II) Other				
	ь	other than inventory Less cost or other basis and sales						
	_	expenses						
	d	Gain or (loss) Net gain or (loss)	<u> </u>	•	İ	1		
	8a	Gross income from fundraising events	Ė			I		
ē		(not including \$						
Other Revenue		of contributions reported on line 1c)						
Ŗ		See Part IV, line 18	. а	82943.				
ther	b	Less direct expenses	b	24.	1	1		1
0	С	Net income or (loss) from ful	ndraisi <u>ng e</u>	vents >	82919.	82919.		
	9a	Gross income from gaming						
	ь	activities See Part IV, line 19 Less: direct expenses	9 a					
	c	Net income or (loss) from ga		ties	1			
		Gross sales of inventory, les						
		returns and allowances .	a					
	b	Less: cost of goods sold .	b		,	,		1
	С	Net income or (loss) from sa		ntory >				
		Miscellaneous Revenu	e	Business Code	1			1
	11a						.	
	Ь						<u> </u>	
	C	All other revenue						+
	d e	All other revenue						
	12	Total Revenue. Add lines 1h	. 2a. 3. 4. ^s	}				<u> </u>
	-	9c, 10c, and 11e		>	138523.	96579.		<u> </u>
BCA	Con	wright form software only 2009 Universa	I Tax Systems	Inc. All nghts reserved		9 Rev 1		Form 990 (2009)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4)	organizations must compl	ete all columns.
---------------------------------	--------------------------	------------------

_	An other organizations must complete t			(C)	
	ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	Management and general expenses	(D) Fundraising
	b, 9b, and 10b of Part VIII.	·	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22 .				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16			_	
4	Benefits paid to or for members				<u> </u>
5	Compensation of current officers, directors,				
	trustees, and key employees .				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages .	17220.	6888.	5166.	5166.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits		·		
10	Payroll taxes	1317.	527.	395.	395.
11	Fees for services (non-employees)				
	Management				
a	· ·				
b	Legal	600.		600.	
C	Accounting .	000.	ļ		
d	Lobbying			<u> </u>	
e	Professional fundraising services See Part IV, line 17		I	· · ·	
f	Investment management fees			,	
g	Other	·			
12	Advertising and promotion				010
13	Office expenses	727.	291.	218.	218.
14	Information technology				
15	Royalties .				
16	Occupancy	6316.	2526.	1895.	1895.
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				·
19	Conferences, conventions, and meetings	11200.	11200.		
20	Interest	6076.	2430.	1823.	1823.
21	Payments to affiliates .	22957.	22957.		
22	Depreciation, depletion, and amortization	613.	245.	184.	184.
23	Insurance .	850.	340.	255.	255.
24	Other expenses. Itemize expenses not	•		·	
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	AUTO	600.	240.	180.	180.
b	MISCELLANEOUS	3391.	1355.	1018.	1018.
c	NTHBA REPORTER	6349.	6349.		
d	THE VICILIA	5547.			
e	All other evenesses				
f	All other expenses	70016	55348.	11734.	11134.
25	Total functional expenses. Add lines 1 through 24f	78216.	33348.	11/34.	11134.
26	Joint Costs Check here ▶ ☐ if following				
	SOP 98-2. Complete this line only if the org				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	<u> </u>			Form 990 (2009

Part X **Balance Sheet** (A) (B) Beginning of year End of year 67099. 1 55319. ,1 Cash - non-interest-bearing 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Sch. L. 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L Notes and loans receivable, net 7 Assets 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 81471. basis Complete Part VI of Schedule D 10a 17321. 19408. 62063. Less: accumulated depreciation 10b 10c b 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 12 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 74727 16 Total assets. Add lines 1 through 15 (must equal line 34) 84420. 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified 22 persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 70000. 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities. Complete Part X of Schedule D 25 25 70000. Total liabilities Add lines 17 through 25 26 26 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. **Net Assets or Fund Balances** 14420. 27 74727. 27 Unrestricted net assets Temporarily restricted net assets 28 28 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 14420. 74727. 33 33 Total net assets or fund balances 84420. 34 74727. Total liabilities and net assets/fund balances 34

Form **990** (2009)

US990\$11

Form 9	990 (2009) NORTH TEXAS HOME BUILDERS ASSOC 75-11	30998	Pag	e 12
Par	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	. 2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			
	audit, review, or compilation of its financial statements and selection of an independent accountant?	. 2c		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were			
	issued on a consolidated basis, separate basis, or both	2d		
	separate basis consolidated basis both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits?	3b		
		Form	990	(2009)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

	e of the organization ORTH TEXAS HOME BUILDERS ASSO	nc		Employer id			ımber
					00770		
ГС	Organizations Maintaining Donor Adv		ar Funds or A	accounts.			
	Complete if the organization answered "Yes" to			4) F			
4	Total words as at and of con-	(a) Donor advised fund	<u>s</u>	(b) Funds and	otner ac	count	<u> </u>
1	Total number at end of year	·					
2	Aggregate contributions to (during year)						
3	Aggregate grants from (during year)				 		
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisor		Jonor advised tu	nds	п.,		
_	are the organization's property, subject to the organization	<u> </u>			∐ Yes	\sqcup	No
6	Did the organization inform all grantees, donors, and do	• •	-	•	п.,		
Б.	for charitable purposes and not for the benefit of the don		<u>-</u>		Yes	_	No
		f the organization answered "Yes"	to Form 990, Pa	irt IV, line 7.			
1	Purpose(s) of conservation easements held by the organ						
	Preservation of land for public use (e g , recreation of		Preservation of a	•	•		area
	Protection of natural habitat	<u>. </u>	Preservation of c	ertified histori	c structure)	
•	Preservation of open space						
2	Complete lines 2a-2d if the organization held a qualified	conservation contribution in the to	rm of a conserva	tion easemen	t on the la	st da	y or the
	tax year		-	T			
	-		ı		the End o	fthe	Year
a	Total number of conservation easements	• • •		2a			
þ	Total acreage restricted by conservation easements			2b			
С	Number of conservation easements on a certified historic			2c			
d	Number of conservation easements included in (c) acqui		· [2d			
3	Number of conservation easements modified, transferred	d, released, extinguished, or termir	nated by the orga	inization durin	g		
	the taxable year						
4	Number of states where property subject to conservation		_				
5	Does the organization have a written policy regarding the	• •	eporting of violati	ions,	П.,	\Box	
_	and enforcement of the conservation easements it holds				Yes	Ш	No
6	Staff and volunteer hours devoted to monitoring, inspecti		-	•			
7	Amount of expenses incurred in monitoring, inspecting, a	-					
8	Does each conservation easement reported on line 2(d)	above satisfy the requirements of	section 170(h)(4))(B)(I)	п.,		
_	and section 170(h)(4)(B)(ii)?				∐ Yes	\sqcup	No
9	In Part XIV, describe how the organization reports conse						nd
	include, if applicable, the text of the footnote to the organ	lization's financial statements that	describes the orç	ganization's ac	counting	for	
D-	conservation easements	a of Art Historical Tonon	Oth (Startian Ass			
Pal	till Organizations Maintaining Collection		es, or Other 3	olmilar Ass	ets.		
4 -	Complete if the organization answered "Yes" to				- ¢ 4 - 1 1		
ча	If the organization elected, as permitted under SFAS 116						
	treasures, or other similar assets held for public exhibition		ance of public se	ervice, provide	e, in Part X	uv, tr	те
	text of the footnote to its financial statements that describ	des these items.					
	16th						
þ	If the organization elected, as permitted under SFAS 116						
	sures, or other similar assets held for public exhibition, e	ducation, or research in furtheranc	e of public service	æ, provide the	tollowing	amo	unts
	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, historica		for financial gair	i, provide the t	following a	mou	nts
	required to be reported under SFAS 116 relating to these	e items:					
	Revenues included in Form 990, Part VIII, line 1		•	. ▶ \$_			
b	Assets included in Form 990, Part X .	• • • •		▶ \$ _			

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

Schedule D (Form 990) 2009

(ii) related organizations		• ••	-	3a(ii)	
b If "Yes" to 3a(II), are the related organization	. 3b				
4 Describe in Part XIV the intended uses of the	ne organization's endowment t	funds			
Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.					
Description of investment	(a) Cost or other	(b) Cost or other	(c) Depreciation	(d) Book v	alue
	basis (investment)	basis (other)			
1a Land .	15,000.			15,0	000.
b Buildings .	53,423.		51,205.	2,2	218.
a Leasahald improvements					

13,048.

e Other

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2009

10,858.

2,190.

19,408

d Equipment

Sche	dule D (Form 990) 2009 NORTH TEXAS HOME BUILDERS ASSOC	75-1	180998	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Finance	ial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	13	8,523.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		8,216.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		0,307.
4	Net unrealized gains (losses) on investments	. 4		
5	Donated services and use of facilities	5		_
6	Investment expenses	6		
7	Prior period adjustments	7		
8	Other (Describe in Part XIV)	8		
9	Total adjustments (net). Add lines 4-8	. 9		
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	. 10	6	0,307.
	t XII Reconciliation of Revenue per Audited Financial Statements Wit	h Revenue per R	eturn	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	•		
а	Net unrealized gains on investments			
b	Donated services and use of facilities 2b			
С	Recoveries of prior year grants . 2c			
d	Other (Describe in Part XIV)			
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line	·		
a	Investment expenses not included on Form 990, Part VIII, line 7b			
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	
	t XIII Reconciliation of Expenses per Audited Financial Statements Wi	th Expenses per	Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	·		
a	Donated services and use of facilities 2a			
b	Prior year adjustments	·		
c	Losses reported on Form 990, Part IX, line 25			
d	Other (Describe in Part XIV)			
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line1			
a	Investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV)		1	
-	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		5	
	t XIV Supplemental Information			
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an	d 4 Part IV lines 1h s	and 2h: Part V	line 4
Pan .	X: Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part	to provide any addition	iai imormation	•
				
				
				
			hadula D /For	000\ 2000

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

2009

Department of the Treasury

Internal Revenue Service

Name of the organization

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Employer identification number

NORTH TEXAS HOME BU	ILDERS AS	SSOC			75-1	180998	
Part I Fundraising Activities.	Complete if the org	ganızatıon	answei	red "Yes" to Form 990,	Part IV, line 17		
Indicate whether the organization a Mail solicitations b Internet and email solicitation c X Phone solicitations d In-person solicitations 2 a Did the organization have a writte Form 990, Part VII) or entity in co b If "Yes," list the ten highest paid in at least \$5,000 by the organization	s in or oral agreeme nnection with prof ndividuals or entit	e f g X ent with an fessional f	Solicita Solicita Specia ny indivi fundrais aisers) p	ation of non-government ation of government grad al fundraising events dual (including officers, ing services? oursuant to agreements	t grants nts directors, trustees or key under which the fundrais	. Yes 🛚 No	
(i) Name of individual	(ii) Activity	(iii) Dıd		(iv) Gross receipts	(V) Amount paid to (or	(vi) Amount paid to	
or entity (fundraiser)		raiser have custody or control of contributions?		from activity	retained by) fundraiser listed in col (i)	(or retained by) organization	
		Yes No					
				· 			
			₩.				
Total			•				
3 List all states in which the organiz	zation is registere	d or licens	sed to so	olicit funds or has been	notified it is exempt from	registration or licensing.	
			_				
					<u></u>		
			-				
					<u> </u>		
		<u></u>					

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000

			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events	
	•		PARADE/HOMES	SHOWCASE HME	2	(Add col (a) through	
			(event type)	(event type)	(total number)	col (c)	
ē			(eventipe)	(evening)			
Revenue	1	Gross receipts	30,004.	25,303.	22,041.	77,348.	
Şe	2	Less. (Charitable	30,001.	23,3331	22/022		
_	_	contributions)					
	3	Gross revenue (line 1					
	٦	minus line 2)	30,004.	25,303.	22,041.	77,348.	
		minus inte 2)	30,004.	23,303.	22,041.		
	4	Cook prizos					
	*	Cash prizes .					
	_	Non and arres					
Ses	5	Non-cash prizes					
ĕ	_	Death and the anata					
Ä	6	Rent/facility costs					
Direct Expenses	_						
	7	Food and beverages					
	8	Entertainment					
						2.4	
	9	Other direct expenses	24.			24.	
	10		Add lines 4 through 9 in colur			24.	
	11		ombine lines 3 and 10 in colum		<u></u>	77,324.	
Pa	ırt III	Gaming. Comple	ete if the organization answere	d "Yes" to Form 990, Part IV, II	ne 19, or reported more than	\$15,000 on Form 990-EZ	
		line 6a				(d) Total gaming (Add	
<u>o</u>			(a) Bingo (b) Pull tabs/Instant (c) Other gaming				
Revenue				bingo/progressive bingo		col (a) through col (c))	
چ							
	1	Gross revenue					
S	2	Cash prizes					
Š							
ά	3	Non-cash prizes					
Direct Expenses							
Ĭē	4	Rent/facility costs					
	5	Other direct expenses					
			Yes 0.0%	Yes 0.0%	Yes 0.0 %		
	6	Volunteer labor	No	No	No	•	
	7	Direct expense summary	. Add lines 2 through 5 in colu	ımn (d)			
	8	Net gaming income sum	mary Combine lines 1 and 7 in	column (d) .	▶	<u> </u>	
		-				Yes No	
9	En	ter the state(s) in which the	e organization operates gamin	g activities			
	a Ist	he organization licensed t	o operate gaming activities in e	each of these states?		9a	
	b If "	No," Explain					
					<u></u>		
10	a We	ere any of the organization	's gaming licenses revoked, su	uspended or terminated during	the tax year?	10a	
		Yes," Explain	-				
	_		·	-			
11	<u> </u>	es the organization opera-	te gaming activities with nonme	embers?		. 11	
12		- · · · · · · · · · · · · · · · · · · ·		t or a member of a partnership	or other entity formed to	<u> </u>	
•-		minister charitable gaming				12	
	au	gaming		·			

SCHEDULE O (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information to Form 990

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

► Attach to Form 990.

OMB No 1545-0047 2009

Open to Public
Inspection

Employer identification number

NORTH TEXAS HOME BUILDERS ASSOC 75-1180998 WHEN THE TAX RETURN HAS BEEN GIVEN TO THE ORGANIZATION BY THE CPA, THE PRESIDENT THEN REVIEWS THE TAX RETURN, AFTER THE REVIEW BY THE PRESIDENT, THE PRESIDENT THEN SIGNS AND MAILS TO THE IRS THE TAX RETURNS ARE NOT REQUIRED TO BE GIVEN TO OR APPROVED BY THE GOVERNING BODY BEFORE FILING UPON REQUEST, THE ORGANIZATION WILL MAKE COPIES OF ITS GOVERNING DOCUMENTS, AND FINANCIAL STATMENTS AND PROVIDE THEM TO ANYONE THAT REQUESTS THEM

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751-18-0998

Depreciation and Amortization Report

Tax Year 2009

BUILDERS ASSOCIATION NORTH TEXAS HOME

Form 4562

Sch C

Keep for your records

540 540 73 613 Current Depreciation Prior Depreciation 283 350 391 400 1,389 1,389 2,565 500 250 583 492 650 943 317 316 15,809 61,450 61,450 34,823 Method/ Convention 200DB/HY 200DB/HY SL/NA SL/HY SL/NA SL/NA SL/NA SL/NA SL/HY SL/NA SL/NA SL/NA SL/NA SL/MM SL/NA SL/NA SL/NA 10.0 10.0 10.0 10.0 10.0 10.0 10.0 20.0 10.0 20.0 10.0 10.0 10.0 7.0 39.0 5.0 5.0 7.0 Life 650 583 492 943 317 313 350 391 400 250 316 15,809 1,389 1,389 2,565 2,790 66,472 2,701 34,824 63,771 2,701 Depreciable Basis Special Depreciation Allowance Section 179 100.00 100.00 100.00 100.00 Business Use % 100.00 15,000 100.00 100.00 100.001 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 000 000 0 Land 15, 15, 63,771 943 313 350 391 400 250 316 1,389 1,389 2,790 2,701 492 650 317 66,472 2,701 34,824 15,809 2,565 Cost (net of land) 08/11/90 11/13/85 11/30/85 09/29/92 09/29/92 06/29/98 07/15/09 01/01/16 01/10/80 01/04/81 07/09/81 07/22/81 07/30/81 10/21/81 01/10/80 01/10/80 02/26/80 11/26/80 05/11/01 Date in Service Code SUBTOTAL CURRENT YEAR TABLE XEROX 6225 TYPEWRITER SUBTOTAL PRIOR YEAR **Asset Description** CANON NP1020 COPIER MIMEOGRAPH MACHINE CHAIRS & FIXTURES CONFERENCE TABLE PHONE MATE-LIGHT SOFA, LOVE SEAT, COMPAQ COMPUTER FILE CABINETS-4 OFFICE BUILDING DESK & CHAIR STACK CHAIRS MINI BLINDS NEW ROOFING DEPRECIATION CHAIRS-12 ADDITION TOTALS COPIER DESK LAND

S = Sold, A = Auto, L = Listed, H = Home Office Code:

FDIV3601 07/21/09

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