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Form **990**

 Department of the
 Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2015

**Open to Public
Inspection**

A For the 2015 calendar year, or tax year beginning 11-01-2015, and ending 10-31-2016

B Check if applicable

Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
 NORTHSHORE HOME BUILDERS ASSOCIATION
 FKA ST TAMMANY HOME BUILDERS ASSOCIATION

D Employer identification number
 72-0810727

Doing business as

E Telephone number

(985) 882-5002

Number and street (or P O box if mail is not delivered to street address) Room/suite
 28603 KRENTEL ROAD

F Gross receipts \$ 1,276,845

City or town, state or province, country, and ZIP or foreign postal code
 LACOMBE, LA 70445

H(a) Is this a group return for
subordinates? Yes No

Yes No

H(b) Are all subordinates
Included? Yes No
If "No," attach a list (see instructions)

H(c) Group exemption number ►

I Tax-exempt status 501(c)(3) 501(c) (6) (insert no) 4947(a)(1) or 527

J Website: ► WWW.STHBA.ORG

K Form of organization Corporation Trust Association Other ►

L Year of formation 1977

M State of legal domicile LA

Part I Summary

1 Briefly describe the organization's mission or most significant activities

THE ASSOCIATION IS DEDICATED TO ENHANCING THE QUALITY OF LIFE BY PROMOTING EXCELLENCE IN THE HOME BUILDING INDUSTRY THROUGH EDUCATION, NETWORKING, AND COMMUNITY INVOLVEMENT

2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	3	18
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	18
5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	7
6 Total number of volunteers (estimate if necessary)	6	75
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0

Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
		508,064	437,566
	9 Program service revenue (Part VIII, line 2g)	34,776	24,274
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	52,185	203
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	41,991	295,380
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	637,016	757,423

Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	21,753	104,250
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	159,422	142,484
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ►0		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	422,149	391,201
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	603,324	637,935
	19 Revenue less expenses Subtract line 18 from line 12	33,692	119,488

Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
		1,005,507	1,067,377
	21 Total liabilities (Part X, line 26)	64,703	7,087
	22 Net assets or fund balances Subtract line 21 from line 20	940,804	1,060,290

Part II Signature Block

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

Sign Here

Signature of officer

2017-09-11

Date

BLAKE MENDHEIM PRESIDENT

Type or print name and title

**Paid
Preparer
Use Only**

Print/Type preparer's name JAMES E TONGLET CPA	Preparer's signature JAMES E TONGLET CPA	Date	Check <input type="checkbox"/> if self-employed	PTIN P00737899
Firm's name ► ERICKSEN KRENTEL & LAPORTE LLP				Firm's EIN ► 72-0549733
Firm's address ► 4227 CANAL STREET NEW ORLEANS, LA 70119				Phone no (504) 486-7275

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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2015)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

THE ASSOCIATION IS DEDICATED TO ENHANCING THE QUALITY OF LIFE BY PROMOTING EXCELLENCE IN THE HOME BUILDING INDUSTRY THROUGH EDUCATION, NETWORKING, AND COMMUNITY INVOLVEMENT

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

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

Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

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

Yes No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses \$ including grants of \$) (Revenue \$
See Additional Data

See Additional Data

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

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

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

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

4d Other program services (Describe in Schedule O)

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

4e Total program service expenses ►

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?

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

4 Section 501(c)(3) organizations.
Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III

6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I

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

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV

10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V

11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable

- 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 the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII

12b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	Yes	No
1		No
2	Yes	
3		No
4		
5		No
6		No
7		No
8		No
9		No
10		No
11a	Yes	
11b		No
11c		No
11d		No
11e	Yes	
11f		No
12a		No
12b		No
13		No
14a		No
14b		No
15		No
16		No
17		No
18	Yes	
19		No
20a		No
20b		

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	No	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	No	
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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26	No	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	No	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	No	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	No	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	No	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	No	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	No	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	No	
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	No	
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	No	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	No	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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	No	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	12	
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	1	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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	7	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No	
b If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No	
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7 Organizations that may receive deductible contributions under section 170(c).	7a		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7b		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d		
d If "Yes," indicate the number of Forms 8282 filed during the year	7e		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7h		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	8		
8 Sponsoring organizations maintaining donor advised funds.	9a		
Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	9b		
9a Did the sponsoring organization make any taxable distributions under section 4966?			
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
10 Section 501(c)(7) organizations. Enter	10a		
a Initiation fees and capital contributions included on Part VIII, line 12	10b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 Section 501(c)(12) organizations. Enter	11a		
a Gross income from members or shareholders	11b		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13b		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	No	
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year

1a	18	Yes	No

If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O

b Enter the number of voting members included in line 1a, above, who are independent

1b	18	Yes	No

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	No
3	Yes

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?

4	No
5	No

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

6	Yes
7a	No

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

7b	No
8a	Yes

6 Did the organization have members or stockholders?

8b	Yes
9	No

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?

8a	Yes
8b	Yes

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

8b	No
9	No

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following

9	No
10a	No

a The governing body?

10a	No
10b	No

b Each committee with authority to act on behalf of the governing body?

10b	No
11a	Yes

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

11a	Yes
12a	Yes

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

12a	Yes
12b	No

10a Did the organization have local chapters, branches, or affiliates?

12b	No
11a	Yes

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?

11a	Yes
12a	Yes

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

12a	Yes
12b	No

b Describe in Schedule O the process, if any, used by the organization to review this Form 990

12b	No
13	No

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

13	No
14	Yes

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

14	Yes
15a	Yes

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done

15a	Yes
15b	Yes

13 Did the organization have a written whistleblower policy?

15b	Yes
16a	No

14 Did the organization have a written document retention and destruction policy?

16a	No
16b	No

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?

16b	No
17	No

a The organization's CEO, Executive Director, or top management official

17	No
18	No

b Other officers or key employees of the organization

18	No
19	No

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

19	No
20	No

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

20	No
21	No

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

21	No
22	No

►JILL STOLTZ 522 N NEW HAMPSHIRE ST STE 11 COVINGTON, LA 70433 (985) 327-7979

22	No
23	No

23	No
24	No

24	No
25	No

25	No
26	No

26	No
27	No

27	No
28	No

28	No
29	No

29	No
30	No

30	No
31	No

31	No
32	No

32	No
33	No

33	No
34	No

34	No
35	No

35	No
36	No

36	No
37	No

37	No
38	No

38	No
39	No

39	No
40	No

40	No
41	No

41	No
42	No

42	No
43	No

43	No
44	No

44	No
45	No

45	No
46	No

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

- List all of the organization's **current** key employees, if any See instructions for definition of "key employee"

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099- MISC)	(E) Reportable compensation from related organizations (W-2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Or director	Indi vidual trustee	Institutional Trustee	Officer	Key Employee	Highest Compensate d Person			
(1) BILL KIRK BOARD MEMBER	5 00	X						0	0	0
(2) BUDDY COATE BOARD MEMBER	5 00	X						0	0	0
(3) CARRIE SANDERS BOARD MEMBER	5 00	X						0	0	0
(4) CINDY CUSIMANO BOARD MEMBER	5 00	X						0	0	0
(5) CURTIS CONERLY BOARD MEMBER	5 00	X						0	0	0
(6) DAWN DUHE BOARD MEMBER	5 00	X						0	0	0
(7) ERIN LECORGNE BOARD MEMBER	5 00	X						0	0	0
(8) GLEN ALACK BOARD MEMBER	5 00	X						0	0	0
(9) JACK GAUTREAUX BOARD MEMBER	5 00	X						0	0	0
(10) JASON HAND BOARD MEMBER	5 00	X						0	0	0
(11) JOSEPH MISTICH TREASURER	5 00	X		X				0	0	0
(12) JULES GUDRY PAST-PRESIDENT	5 00	X		X				0	0	0
(13) KEITH WEST VICE PRESIDENT	5 00	X		X				0	0	0
(14) KYLE COOPER SECRETARY	5 00	X		X				0	0	0

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

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

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . . 1a b Membership dues 1b 393,926 c Fundraising events 1c 37,140 d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 6,500 g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f ► 437,566				
Program Service Revenue	2a MEETING/COMMITTEE b PUBLICATION c EDUCATION d e f All other program service revenue g Total. Add lines 2a-2f ► 24,274	Business Code			
	3 Investment income (including dividends, interest, and other similar amounts) ► 203 4 Income from investment of tax-exempt bond proceeds . . . ► 5 Royalties ►	900099	18,261	18,261	203
	6a Gross rents (i) Real 1,200 b Less rental expenses 0 c Rental income or (loss) 1,200 d Net rental income or (loss) ► 1,200	611430	2,245	2,245	
Other Revenue	7a Gross amount from sales of assets other than inventory (i) Securities b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) ►	(ii) Other			
	8a Gross income from fundraising events (not including \$ 37,140 of contributions reported on line 1c) See Part IV, line 18 . . .	a 675,188 b 511,339 c Net income or (loss) from fundraising events . . . ► 163,849			163,849
	9a Gross income from gaming activities See Part IV, line 19 . . .	a 99,893 b 8,083 c Net income or (loss) from gaming activities . . . ► 91,810	91,810	91,810	
	10a Gross sales of inventory, less returns and allowances . . .	a b Less cost of goods sold . . . b c Net income or (loss) from sales of inventory . . . ►			
	Miscellaneous Revenue	Business Code			
	11a INSURANCE & AFFINITY C 900099 b MISCELLANEOUS REVENUE 900099 c d All other revenue e Total. Add lines 11a-11d ► 38,521		28,120	28,120	
	12 Total revenue. See Instructions ►		757,423	155,805	0
					164,052

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	97,500			
2 Grants and other assistance to domestic individuals See Part IV, line 22	6,750			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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	132,756			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	9,728			
11 Fees for services (non-employees)				
a Management				
b Legal	2,730			
c Accounting	8,225			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,615			
12 Advertising and promotion				
13 Office expenses	37,917			
14 Information technology	1,842			
15 Royalties				
16 Occupancy	15,862			
17 Travel	26,818			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	26,244			
20 Interest				
21 Payments to affiliates	194,397			
22 Depreciation, depletion, and amortization	12,387			
23 Insurance	6,207			
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a MISCELLANEOUS EXPENSES	29,759			
b FLOWERS, GIFTS & AWARDS	13,289			
c MISCELLANEOUS BUILDING/	6,775			
d PUBLICATION EXPENSE	4,262			
e All other expenses	2,872			
25 Total functional expenses. Add lines 1 through 24e	637,935			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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

		(A) Beginning of year	(B) End of year
Assets	1 Cash—non-interest-bearing	85,167	1 175,168
	2 Savings and temporary cash investments	260,843	2 238,046
	3 Pledges and grants receivable, net	3	
	4 Accounts receivable, net	4	700
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	6	
	7 Notes and loans receivable, net	7	
	8 Inventories for sale or use	8	
	9 Prepaid expenses and deferred charges	9	29,651
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 772,859	
	b Less accumulated depreciation	10b 149,745	659,497 10c 623,114
	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	0	698
	16 Total assets. Add lines 1 through 15 (must equal line 34)	1,005,507	16 1,067,377
Liabilities	17 Accounts payable and accrued expenses	17	7,047
	18 Grants payable	18	
	19 Deferred revenue	19	
	20 Tax-exempt bond liabilities	20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D	21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	22	
	23 Secured mortgages and notes payable to unrelated third parties	62,520	23 0
	24 Unsecured notes and loans payable to unrelated third parties	24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	2,183	25 40
	26 Total liabilities. Add lines 17 through 25	64,703	26 7,087
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
	27 Unrestricted net assets	915,254	27 1,039,676
	28 Temporarily restricted net assets	16,299	28 15,863
	29 Permanently restricted net assets	9,251	29 4,751
	Organizations that do not follow SFAS 117 (ASC 958), check here ► <input type="checkbox"/> and complete lines 30 through 34.		
	30 Capital stock or trust principal, or current funds	30	
	31 Paid-in or capital surplus, or land, building or equipment fund	31	
	32 Retained earnings, endowment, accumulated income, or other funds	32	
	33 Total net assets or fund balances	940,804	33 1,060,290
	34 Total liabilities and net assets/fund balances	1,005,507	34 1,067,377

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	757,423
2	Total expenses (must equal Part IX, column (A), line 25)	2	637,935
3	Revenue less expenses Subtract line 2 from line 1	3	119,488
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . .	4	940,804
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,060,290

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII

1 Accounting method used to prepare the Form 990 Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis

2b Were the organization's financial statements audited by an independent accountant?
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis

2c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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?
3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		No
2b		No
2c		
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 72-0810727

Name: NORTHSORE HOME BUILDERS ASSOCIATION
FKA ST TAMMANY HOME BUILDERS ASSOCIATION

Form 990, Part III, Line 4a

4a (Code) (Expenses \$ including grants of \$) (Revenue \$)

THE ASSOCIATION IS DEDICATED TO ENHANCING THE QUALITY OF LIFE BY PROMOTING EXCELLENCE IN THE HOME BUILDING INDUSTRY THROUGH EDUCATION, NETWORKING, AND COMMUNITY INVOLVEMENT

2015

Open to Public
Inspection**SCHEDULE D**
(Form 990)**Supplemental Financial Statements**

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

► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.Department of the
Treasury
Internal Revenue Service**Name of the organization**NORTHSORE HOME BUILDERS ASSOCIATION
FKA ST TAMMANY HOME BUILDERS ASSOCIATION**Employer identification number**

72-0810727

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

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

(a) Donor advised funds (b) Funds and other accounts**1** Total number at end of year

2 Aggregate value of contributions to (during year)**3** Aggregate value of grants from (during year)**4** Aggregate value at end of year**5** Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No**6** Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.**1** Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or education)
 Protection of natural habitat
 Preservation of open space

Preservation of an historically important land area
 Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
2a	
2b	
2c	
2d	

a Total number of conservation easements**b** Total acreage restricted by conservation easements**c** Number of conservation easements on a certified historic structure included in (a)**d** Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register**3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____**4** Number of states where property subject to conservation easement is located ► _____**5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No**6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
► _____**7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
► \$ _____**8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No**9** In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items**b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items**(i)** Revenue included on Form 990, Part VIII, line 1 ► \$ _____**(ii)** Assets included in Form 990, Part X ► \$ _____**2** If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items**a** Revenue included on Form 990, Part VIII, line 1 ► \$ _____**b** Assets included in Form 990, Part X ► \$ _____

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

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

a <input type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange programs
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other
c <input type="checkbox"/> Preservation for future generations	

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

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

Part IV Escrow and Custodial Arrangements.

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

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

b If "Yes," explain the arrangement in Part XIII and complete the following table

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

Amount	
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

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

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

	(a) Current year	(b) Prior year	b (c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

a Board designated or quasi-endowment ►

b Permanent endowment ►

c Temporarily restricted endowment ►

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

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

(i) unrelated organizations

(ii) related organizations

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

3a(i)	Yes	No
3a(ii)		
3b		

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

Part VI Land, Buildings, and Equipment.

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

	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	Accumulated (c) depreciation	(d) Book value
1a Land			33,855	33,855
b Buildings		658,184	78,969	579,215
c Leasehold improvements				
d Equipment	80,820		70,776	10,044
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ►				623,114

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		

Total. (Column (b) must equal Form 990, Part X, col (B) line 12)

Part VIII Investments—Program Related.

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

Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

Total (Column (b) must equal Form 990, Part X, col (B), line 15.)

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

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . .	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	

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

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

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b . .	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	

Part XIII Supplemental Information

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

Return Reference	Explanation

Part XIII

Supplemental Information (*continued*)

Return Reference

Explanation

SCHEDULE G
(Form 990 or 990-EZ)Supplemental Information Regarding
Fundraising or Gaming Activities

2015

Open to Public
Inspection

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

► Attach to Form 990 or Form 990-EZ

► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990Department of the Treasury
Internal Revenue Service

Name of the organization

NORTHSHERE HOME BUILDERS ASSOCIATION
FKA ST TAMMANY HOME BUILDERS ASSOCIATION

Employer identification number

72-0810727

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

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

a <input type="checkbox"/> Mail solicitations	e <input type="checkbox"/> Solicitation of non-government grants
b <input type="checkbox"/> Internet and email solicitations	f <input type="checkbox"/> Solicitation of government grants
c <input type="checkbox"/> Phone solicitations	g <input type="checkbox"/> Special fundraising events
d <input type="checkbox"/> In-person solicitations	

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1		Yes	No			
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II Fundraising Events.

Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	(a)Event #1 RAISING THE ROOF (event type)	(b)Event #2 PARADE OF HOME (event type)	(c)Other events 7 (total number)	(d) Total events (add col (a) through col (c))
Revenue				
1 Gross receipts	545,000	98,550	68,778	712,328
2 Less Contributions		10,000	27,140	37,140
3 Gross income (line 1 minus line 2)	545,000	88,550	41,638	675,188
Direct Expenses				
4 Cash prizes	5,500		6,700	12,200
5 Noncash prizes			228	228
6 Rent/facility costs			17,236	17,236
7 Food and beverages	4,326	467	9,790	14,583
8 Entertainment			500	500
9 Other direct expenses	399,128	57,595	9,869	466,592
10 Direct expense summary Add lines 4 through 9 in column (d)				► 511,339
11 Net income summary Subtract line 10 from line 3, column (d)				► 163,849

Part III Gaming.

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

	(a)Bingo	(b)Pull tabs/Instant bingo/progressive bingo	(c)Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue				
1 Gross revenue			99,893	99,893
Direct Expenses				
2 Cash prizes			5,199	5,199
3 Noncash prizes			1,137	1,137
4 Rent/facility costs				
5 Other direct expenses			1,747	1,747
6 Volunteer labor	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input checked="" type="checkbox"/> No	
7 Direct expense summary Add lines 2 through 5 in column (d)				► 8,083
8 Net gaming income summary Subtract line 7 from line 1, column (d)				► 91,810

9 Enter the state(s) in which the organization conducts gaming activities LA

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

b If "No," explain _____

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

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers?

Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Yes No

13 Indicate the percentage of gaming activity conducted in

- a** The organization's facility
- b** An outside facility

13a	%
13b	100 000 %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ► JILL STOLTZ

Address ► 522 N NEW HAMPSHIRE ST STE 11
COVINGTON, LA 70433

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

Yes No

- b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____
- c** If "Yes," enter name and address of the third party

Name ►

Address ►

16 Gaming manager information

Name ►

Gaming manager compensation ► \$ _____

Description of services provided

►

Director/officer

Employee

Independent contractor

17 Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

Yes No

- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

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

Return Reference

Explanation

Schedule I (Form 990)

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

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

► **Attach to Form 990.**

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

**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue Service

Name of the organization

NORTHSHERE HOME BUILDERS ASSOCIATION

FKA ST TAMMANY HOME BUILDERS ASSOCIATION

Employer identification number

72-0810727

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

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

Yes No

No

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) SCHOLARSHIPS	9	6,750			

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation

Additional Data**Software ID:****Software Version:****EIN:** 72-0810727**Name:** NORTHSORE HOME BUILDERS ASSOCIATION
FKA ST TAMMANY HOME BUILDERS ASSOCIATION**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL ASSOCIATION OF HOMEBUILDERS 1201 15TH STREET NW WASHINGTON, DC 20005	88-0359303	501(C)(3)	11,000				THE ASSOCIATION STRIVES TO PROTECT THE AMERICAN DREAM OF HOUSING OPPORTUNITIES FOR ALL, WHILE WORKING TO ACHIEVE PROFESSIONAL SUCCESS FOR ITS MEMBERS WHO BUILD COMMUNITIES, CREATE JOBS AND STRENGTHEN OUR ECONOMY
BOYS & GIRLS CLUB 320 N CARROLLTON AVE STE 102 NEW ORLEANS, LA 70119	72-0648695	501(C)(3)	9,000				THE FUNDING HELPED TO SUPPORT THE HIRING AND TRAINING OF NEW YOUTH DEVELOPMENT STAFF TO HELP IMPROVE THE QUALITY OF CLUB PROGRAMS AND GREATER FOCUS ON OUTCOMES RELATED TO ACADEMIC SUCCESS, HEALTHY LIFESTYLES AND GOOD CHARACTER AND CITIZENSHIP IT ALLOWED US TO PURCHASE CRITICAL PROGRAM SUPPLIES TO KEEP CLUB MEMBERS ENGAGED IN ENRICHMENT ACTIVITIES THE PROCEEDS FROM THE RAFFLE HOUSE HAD A DIRECT IMPACT ON OVER 470 CHILDREN WHO ATTENDED THE COVINGTON AND SLIDELL CLUBS
ST TAMMANY HBA CHARITABLE TRUST 29021 BUILDERS DRIVE LACOMBE, LA 70445	72-1306027	501(C)(3)	10,000				TO PROVIDE FUNDING FOR SCHOLARSHIPS AND OTHER CHARITABLE NEEDS TO BE DETERMINED BY THE TRUST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TAMMANY TRACE FOUNDATION-ST TAMMANY PARISH GOVERNMENT 21490 KOOP DRIVE MANDEVILLE, LA 70471	72-1239773	501(C)(3)	12,000				LIKE OUR FIRST EXPLORERS, YOU CAN CRISSCROSS URBAN, SUBURBAN AND RURAL ST TAMMANY ON FOOT, SKATES, BICYCLES, AND HORSES AND IN WHEELCHAIRS THIS 31-MILE ASPHALTED TRAIL AND PARALLEL EQUESTRIAN TRAIL CONNECTS FIVE COMMUNITIES- COVINGTON, ABITA SPRINGS, MANDEVILLE, LACOMBE, AND SLIDELL. THE TRACE, AS LOCALS CALL IT, ALSO SERVES AS A WILDLIFE CONSERVATION CORRIDOR, LINKING ISOLATED PARKS, CREATING GREENWAYS, AND PRESERVING HISTORIC LANDMARKS AND WETLANDS. YOU CAN OBSERVE THE NATURAL HABITAT, BAYOUS, STREAMS AND RIVERS FROM THE VANTAGE POINT OF 31 BRIDGES BUILT ON THE ORIGINAL RAILROAD TRESTLES. THE GRANT SUPPORTS THESE VARIOUS ACTIVITIES AND PLACES
FOOD BANK OF COVINGTON 840 N COLUMBIA ST COVINGTON, LA 70433	72-1028539	501(C)(3)	23,000				THE COVINGTON FOOD BANK SERVES THE TRI-PARISH AREA OF ST TAMMANY, WASHINGTON AND TANGIPAHOA PARISHES. WE ARE COMMITTED TO OUR MISSION OF FEEDING THE HUNGRY AND SERVING THOSE IN NEED ON THE NORTHSIDE WITH DIGNITY AND COMPASSION. IN 2015-2016 WE SERVED OVER 1 MILLION POUNDS OF FOOD TO THE HUNGRY IN OUR COMMUNITY, PROVIDED VOUCHERS FOR CLOTHING AT OUR THRIFT STORE AND PROVIDED ALMOST 3,000 DENTAL PROCEDURES TO ADULTS IN NEED. WE UTILIZE FEDERAL POVERTY GUIDELINES PROVIDING REGULAR SERVICES TO THOSE THAT FALL AT OR BELOW 130% AND WHILE 65% THAT COME THROUGH OUR DOOR USE SERVICES FOR LESS THAN ONE YEAR, THE NUMBER OF PEOPLE IN NEED CONTINUES TO INCREASE. THESE FUNDS WOULD HELP US TO CONTINUE TO PROVIDE NEEDED SERVICES TO THOSE IN NEED.
HABITAT FOR HUMANITY ST TAMMANY WEST 1400 NORTH LN MANDEVILLE, LA 70471	72-0921695	501(C)(3)	25,000				THE RAFFLE HOUSE FUNDING WOULD BE USED TO PURCHASE SOME OF THE CONSTRUCTION MATERIALS NEEDED TO BUILD A NEW HOME IN THE FALL.

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

Department of the
Treasury
Internal Revenue
Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

2015**Open to Public
Inspection**

Name of the organization
NORTHSORE HOME BUILDERS ASSOCIATION
FKA ST TAMMANY HOME BUILDERS ASSOCIATION

Employer identification number

72-0810727

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 3	THE ORGANIZATION DELEGATED CONTROL OVER MANAGEMENT DUTIES CUSTOMARILY PERFORMED BY OR UNDE R THE DIRECT SUPERVISION OF OFFICERS, DIRECTORS OR TRUSTEES, OR KEY EMPLOYEES TO THE EMPLO YEEs

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS STOCKHOLDERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE COMPLETED FORM 990 WAS GIVEN TO EACH MEMBER OF THE BOARD OF DIRECTORS PRIOR TO FILING FOR THEIR DISCUSSION AND REVIEW. QUESTIONS FROM THE BOARD WERE PRESENTED TO THE MANAGEMENT TEAM AND CERTIFIED PUBLIC ACCOUNTANT TAX PREPARERS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OF DIRECTORS REGULARLY MONITORS COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY ALL BOARD MEMBERS ARE INFORMED OF THE CONFLICT OF INTEREST POLICY IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD EACH INDIVIDUAL COVERED BY THE CONFLICT OF INTEREST POLICY IS REQUIRED TO FILL OUT A CONFLICT OF INTEREST DISCLOSURE STATEMENT ANNUALLY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE PROCESS INCLUDES ALL OF THE FOLLOWING ELEMENTS 1 REVIEW AND APPROVAL BY THE BOARD OF DIRECTORS OR COMPENSATION COMMITTEE OF THE ORGANIZATION 2 USE OF DATA AS TO COMPARABLE COMPENSATION 3 CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST