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TIIT 1

# **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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. 2023

ч г	OI LIN	e 2023 Calendar year, or tax year beginning 000 1, 2025 and	enuing U	ON 30, 2024		
	heck if oplicabl	C Name of organization Habitat for Humanity of Greater Dayton		D Employer identifi	cation number	
	Addre	inabitat for numanity of Greater Dayton	•			
	_ Name			31-11044	5.6	
$\vdash$	」chang ⊤Initial		Daniel Inc.			
$\vdash$	_return ∏Final	Number and street (or P.O. box if mail is not delivered to street address)  115 W. Riverview Ave.	Room/suite	E Telephone numbe 937-586-		
	return termin ated	<u>.</u>			6,684,605.	
	ated ∏Amen			G Gross receipts \$		
	return	Daycon, OH 45405		H(a) Is this a group r		
	Application pendi			for subordinates		
		same as C above		H(b) Are all subordinates in		
		empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) (	or 527	1	list. See instructions	
	Vebsi			H(c) Group exemption		
K F Pa	orm of I <b>rt I</b>	forganization: X Corporation Trust Association Other  Summary	L Year	of formation: 1983	M State of legal domicile: OH	
		Briefly describe the organization's mission or most significant activities: Seek	ing to	nut God's	love into	
ဨ		action, Habitat for Humanity brings peopl				
ğ		Check this box if the organization discontinued its operations or dispos				
ē		and the second of the second o		_	15	
હ		Number of independent voting members of the governing body (Part VI, line 1b)			15	
∞		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			32	
ţį					5066	
Activities & Governance					0.	
₹		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.	
		Tect difficulted business taxable moonle from 550 1,1 arti, file 11		Prior Year	Current Year	
	8	Contributions and grants (Part VIII, line 1h)		1,787,454.	2,280,666.	
Revenue		Program service revenue (Part VIII, line 2g)		2,012,078.	2,677,379.	
ě		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-4,861.	739,266.	
a l		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-10,235.	44,883.	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,784,436.	5,742,194.	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.	
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.	
ا پ	45	Solarion other componentian ampleyee hanafite (Part IV column (A) lines 5.10)		1,356,352.	1,376,688.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  171, 45		0.	0.	
ᇹ	b.	Total fundraising expenses (Part IX column (D), line 25) 171.45	53.			
찗		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,404,801.	3,615,765.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,761,153.	4,992,453.	
		Revenue less expenses. Subtract line 18 from line 12		23,283.	749,741.	
P S				ginning of Current Year	End of Year	
t Assets or nd Balances	20	Total assets (Part X, line 16)		7,606,415.	8,097,690.	
Ass Ba	21	Total liabilities (Part X, line 26)		1,344,215.	1,065,004.	
喜	22	Net assets or fund balances. Subtract line 21 from line 20		6,262,200.	7,032,686.	
	rt II	Signature Block	•	•		
Jnde	er pena	 ulties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	y knowledge and belief, it is	
rue,	correc	st, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge,	/0005	
		TVOLVMUN T 110220		04/24	/2025	
Signature of officer Date						
Here Norman Miozzi, Executive Director						
		Type or print name and title				
		Print/Type preparer's name Preparer's signature		Date Check	PTIN	
Paid		Paula Hume Paula Hume	0	04/24/25 self-emplo	P00537516	
rep	arer	Firm's name Barnes, Dennig & Co., LTD			1-1119890	
Jse	Only	Firm's address 40 N Main Street, Suite 2000				
		Dayton, OH 45423-1002		Phone no. 93	7-223-7272	
/lay	the II	RS discuss this return with the preparer shown above? See instructions			X Yes No	

	Habitat for Humanity of Greater Dayton,	
	1990 (2023) Inc. 31-1104456	Page 2
Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	Seeking to put God's love into action, Habitat for Humanity brings	
	people together to build homes, communities, and hope to realize our	
	vision of a world where everyone has a decent place to live. Habitat	
	for Humanity of Greater Dayton adheres to a strict non-proselytizing	
2	Did the organization undertake any significant program services during the year which were not listed on the	
		X No
	If "Yes," describe these new services on Schedule O.	
3	<u> </u>	X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, a	
	revenue, if any, for each program service reported.	
4a	2.060.414	201.
	Construction: Habitat for Humanity's affordable housing construction	
	program provides low income families an opportunity for home ownersh	
	through the construction of decent, energy-efficient, affordable	
	housing in Montgomery, Greene and Clark Counties. As noted in 2021,	
	Habitat for Humanity of Greater Dayton officially expanded into Clar	k
	County, Ohio during 2020. For fiscal year 2024, our construction and	
	neighborhood repair programs continued to benefit from the American	
	Rescue Plan grants that were awarded to us.	
	nobodo 11dii gidiio oldo wolo dwalada oo da	
4b	(Code:) (Expenses \$ 831,227 • including grants of \$) (Revenue \$)	455.
	ReStore: The Habitat for Humanity of Greater Dayton ReStore program	
	sells quality used and surplus household furnishings and building	
	materials that are donated to the ReStore and sold to the general	
	public. The proceeds from these sales help support the mission of th	e
	agent to build homes in Montgomery, Greene and Clark Counties, Ohio.	
	noted above the Springfield, Ohio ReStore began operations on March	
	2022 and the success has been beyond expectations.	_,
40	(Code:) (Expenses \$393,739 • including grants of \$) (Revenue \$309,	938.
40	Family Services: The family services program provides direct deliver	V
	of services to qualified low income families throughout Greene,	1
	Montgomery and Clark Counties, Ohio through four phases of The Habit	at
	for Humanity Program: Prospect, Selection, Pre-Purchase and	<u>uc</u>
	Post-Closing.	
	1000 Clobing.	
	-	

87,498. including grants of \$
penses 4,374,878.

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

100,785.)

Form **990** (2023)

Form 990 (2023) Inc.
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			,,
_	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	_		.,
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	l _		- V
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
_	Schedule D, Part III	8		
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?		Х	
40	If "Yes," complete Schedule D, Part IV	9	Λ	_
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	х	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	Λ	
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		Х	
_	Part VI	11a	Λ	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11b		x
•	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	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ч	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1.0		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	<u> </u>
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	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
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		X

Part IV Checklist of Required Schedules (continued)

22 X  23 Dd the organization report more than \$5.000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 if "Trey", complete Schedule I, Part I and III and I				Yes	No
24 Define organization answer "Yes" to Part VII, Section A, Jine S. 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? "Yes," corplete Schedule I, Part III 25 Define 25 Schedule IV, Part IV, III 25 Define 25 Schedule IV, Part III 25 Define 25 Defi	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directions, fustlesse, key employees, and highest compensated employees? If "Yee," compete Schedule I, Part IV.  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 "Yee," answer lines 240 through 24d and complete Schedule II, If "No," go to line 25a.  25b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  26c Did the organization minetal any exception of tax-exempt bonds beyond a temporary period exception?  26d Did the organization minetal any exception of tax-exempt bonds beyond a temporary period exception?  26d Did the organization and any exception of the second of th		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
Schedule / Late day of the year, that was issued after December 31, 2002? // "Yes," answer lines 24b through 24d and complete Schedule K. If "No." go to line 25a.  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization mixes any proceeds of tax-exempt bonds beyond a temporary period exception?  d Did the organization mixes any proceeds of tax-exempt bonds beyond a temporary period exception?  d Did the organization mixes any proceeds of tax-exempt bonds beyond a temporary period exception?  d Did the organization mixes any proceeds of tax-exempt bonds beyond a temporary period exception?  d Did the organization mixes and "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization axes that it engaged in an excess benefit transaction with a disqualified person during the year? if "Yes," complete Schedule L, Part I.  25a Section 50(163), 501(164), and 501(162) organizations. Did the organization engage in an excess benefit transaction has not been reported on any of the organization's pilor Forms 980 or 980-E27 if "Yes," complete Schedule L, Part I.  25b Did the organization proper tay amount on Part X, line 5 or 22, for reace/substantial contributor, or 35% controlled entity or family member of any of these persons? if "Yes," complete Schedule L, Part II.  27c Did the organization provide again or other assistance to any current or forms officer, director, fustee, key employee, creator or founder, substantial contributor or employee thereof any of threse persons? if "Yes," complete Schedule L, Part II.  28c Did the organization provide again or other assistance to any current or forms officer, director, fustee, key employee, creator or founder, substantial contributor? If "Yes," complete Schedule L, Part III.  28c Did the organization provide again or other assistance to any current or forms officer, director, fustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
24a Dd 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 "Yea," arrawer lines 24th through 24d and complete Schedule K. If "No.", "go to line 25a		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
stated day of the years, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a  b Did the organization meet any proceeds of tax exempt bonds beyond a temporary period exception?  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d  25a Section 50(16)3, 501(04), and 501(0/29) 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 Section 50(16)3, 501(04), and 501(0/29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  25b Is the organization aware that tengaged in an excess benefit transaction with a disqualified person along the state of the organization are provided on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part II  25b Is the organization aware that tengaged 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 provide a grant or other assistance to any current or forms officer, director, trustee, key employee, creator or former officer, director, fustee, key employee, creator or former officer, director, fustee, key employee thereod, or family member of any of these persons? If "Yes," complete Schedule L, Part IV  b A family including an employee threeod, or family member of any of these persons? If "Yes," complete Schedule L, Part IV  b A family including an employee threeod, or family member of any of these persons? If "Yes," complete Schedule L, Part IV  c A 355e Controlled entity of one or more individuals and/or organization seconde in line 28a or 28b If "Yes," complete Schedule		Schedule J	23		<u> X</u>
Schedule K. If "No." po to line 25a	24a				
b Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds?  24d 25a Section 501(c)(8), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? "Yes," complete Schedule I, Part I   25a   X    b Is the organization aware that the nagage in an excess benefit transaction with a disqualified person during the year? "Yes," complete Schedule I, Part I   25a   X    25		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization and as an 'on behalf of' issuer for bonds outstanding at any time during the year?  24d 22sa Saction 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? if "Yes," complete Schedule I, Part I 25sa X  b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990 E27 if "Yes," complete Schedule I, Part I 25b Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, frustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I, Part II 27 X  28 Was the organization party to a business transaction with one of the following parties? (See the Schedule I, Part II 3 Yes, "complete Schedule I, Part II 3 Yes," complete Schedule I, Part II 3 Yes, "complete Sch					<u>X</u>
any tax-exempt bonds?  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?   1'Yes,' complete Schedule L, Part I   25a   X    25b   1s the organization aware that it engaged in an excess benefit ansaction with a disqualified person during the year?   1'Yes,' complete Schedule L, Part I   25a   X    25b   25c   X    25c   25c   X    25c   25c   3c   25c		· · · · · · · · · · · · · · · · · · ·	24b		<del></del>
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  255 Section 501(2)(3), 501(4)(4), and 501(4)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  25 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 Former 950 or 990E27 If "Yes," complete Schedule L, Part I  25 Did 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 Former 950 or 990E27 If "Yes," complete Schedule L, Part II    26 X  27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity fembured any of these persons? If "Yes," complete Schedule L, Part II    28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable finigh thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV    28 Va A farmily member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV    29 Did the organization receive more than \$25,000 in noneast contributions? If "Yes," complete Schedule L, Part IV    29 Did the organization receive more than \$25,000 in noneast contributions? If "Yes," complete Schedule II, Part II    29 Did the organization legicidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule II, Part II    20 Did the organization legicidate, terminate, or dissolve and cease operations? If "Yes," complete S	С				
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 25b 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 spice Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I 25b ID the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 39% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 X 28 Was the organization aperty to a business transaction with one of the following parties? (See the Schedule L, Part IV 27 X 28 Was the organization and party to a business transaction with one of the following parties? (See the Schedule L, Part IV 27 X 28 Was the organization and party to a business transaction with one of the following parties? (See the Schedule L, Part IV 27 X 28 X 28 X 28 X 28 X 28 X 29 X 29 D to the organization receive more films 255,000 in noncash contributions? If "Yes," complete Schedule L, Part IV 28 X 28 X 29 X 29 D to the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 X 29 D to the organization neceive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 X 29 X 29 D to the organization neceive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 X 29 X 20 D to the organization one of the following parties of the schedule M 29 X 29 X 20 D to the organization one of the following parties of the schedule M 29 X 29 X 20 D to the organization one of the schedule	_				<del></del>
b is the organization with a disqualified person during the year? If "Yes," complete Schedule L, Part I  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 sport from \$90 or 990-EZ? If "Yes," complete Schedule L, Part I  Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity for family member of any of these persons? If "Yes," complete Schedule L, Part III and the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof or family member of any of these persons? If "Yes," complete Schedule L, Part III and the organization aparty to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):  a A current of former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV along the form of former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV along the foundation of former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV along the foundation of fou			24d		<del> </del>
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-E27 // 1/9×8," complete Schedule L, Part I	25a				v
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? // "Yes," complete Schedule L, Part I    25 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? // "Yes," complete Schedule L, Part II    26 X  27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? // "Yes," complete Schedule L, Part IV    28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV    28 Was the organization aparty to a business transaction with one of the following parties? (See the Schedule L, Part IV    28 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // "Yes," complete Schedule L, Part IV    28 D A family member of any individual described in line 28a° // "Yes," complete Schedule II. Part IV    28 D A family member of any individual described in line 28a° // "Yes," complete Schedule M    29 D W    29 D W    29 D W    29 D W    20 Did the organization receive more than \$25,000 in noncash contributions? // "Yes," complete Schedule N    29 D W    20 D W    20 D W    21 D W    22 D W    23 D W    24 D W    25 D W    26 D W    27 D W    28 D W    28 D W    29 D W    29 D W    20			25a		
Schedule L, Part I   25b   X    10 the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 33%    27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions;  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions;  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV, 28b X  b A family member of any individual described in line 28a" If "Yes," complete Schedule L, Part IV, 28b X  29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M, 29 X  30 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M, Part I   30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part I   32 X  31 Did the organization or sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I   32 X  32 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, III or IV, and Part V,	b				
Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If I'Ves, "complete Schedule, L. Part II 26 X  27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof or family member of any or of these persons?" If I'Ves, "complete Schedule, L. Part II 27 X  28 Was the organization aparty to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28c X  29 Did the organization receive more than 825,000 in noncash contributions? If "Yes," complete Schedule M 29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? I'*Yes," complete Schedule N, Part I 31 X  31 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule N, Part I 31 X  32 Did 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 X  33 Ba Did 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 X  34 Was the organization base a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes,"			051		v
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 X X 28 Was the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? 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? (See the Schedule L, Part IV.  18 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.  28 A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b; If "Yes," complete Schedule L, Part IV.  29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I.  31 Did the organization one on thoos 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 II, III, or IV, and Part V, line 1  33 Did 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 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  35 Did the organization conduct more than 5% of its activities through an entity that is not a related organizati	00	,	250		
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26				
Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee) thereof or anny of these persons?    If "yes," complete Schedule    Part IV			06		v
creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? // *Yes,* complete Schedule L, Part III.  27	27		_20		<u> </u>
entity (including an employee thereof) or family member of any of these persons? #"Yes," complete Schedule L, Part IV.  Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable fling thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? ## "Yes," complete Schedule L, Part IV	21				
Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  28a X  5 A 55% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.  28c X  29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  30 X  31 Did the organization inceive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part I.  31 X  32 Did the organization inceive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I.  31 X  32 Did the organization inceive controlled entity of transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  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, III, or IV, and Part V, IIIne 1  34 Was 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, IIIne 2  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, IIIne 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exemp		· · · · · · · · · · · · · · · · · · ·	27		x
instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? #  "Yes," complete Schedule L, Part IV.  b A family member of any individual described in line 28a? ## "Yes," complete Schedule L, Part IV.  c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? ##  "Yes," complete Schedule L, Part IV.  28b	20		21		<u> </u>
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28c X  29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X  31 Did the organization iquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X  32 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 II 31 A X  32 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  33 Part V, line 1  34 X  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35 If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization ordice tax purposes? If "Yes," complete Schedule R, Part V, line 2  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 V in Part V  19 Statements Regarding Other IRS	20				
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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	b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  10 In Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  10 X			35b		<u> </u>
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  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O  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  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c X	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  37			36		<u> X</u>
Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement of Schedule O contains a response or note to any line in this Part V  The improvement	37				
Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  38 X  Yes  Yes  No  1a 45  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  1c X		, , ,	37		<u>X</u>
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 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c X	38			77	1
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  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c X	Dar	Note: All Form 990 filers are required to complete Schedule O	38	X	Щ_
Ta Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  Yes No  1b  0  1b  1  1c  X	rai				
1a     Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable     1a     45       b     Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable     1b     0       c     Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?     1c     X		опеск и эспецие о contains a response or note to any line in this Part V			<del>                                     </del>
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X		Establish sumbar associated in hos 0 of Ferma 1000. Enter 0 if not associated in his of the last of th		Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  1c X	_				
(gambling) winnings to prize winners?		Enter the number of Forms W 2d included of line 1d. Enter of infocuspilicable			
	С		10	x	
	332004				(2023)

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Inc. Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
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 32			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		_X_
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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			7.7
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u> </u>
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).	_		v
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
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	6-		Х
_	any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		
D	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
•	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	A
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	A
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?  N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	40		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "You " enter the amount of tay exempt interest received or every adduction the year. N/A 12b	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  N/A	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	ısa		
h	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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A	17		
	If "Yes," complete Form 6069.			

Form 990 (2023)

Inc.

31-1104456

Page 6

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on 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 No Yes 15 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 15 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 6 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? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 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? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 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? Х The organization's CEO, Executive Director, or top management official 15a Х 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a 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? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed OH Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Another's website X Own website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records Habitat for Humanity of Greater Dayton - 937-586-0860 115 W. Riverview Avenue, Dayton, OH 45405

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- 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. See the instructions for the order in which to list the persons above.

(A)  Name and title	(B) Average hours per week	(do box		(C Posineck in	ition	than o	one n an	(D)  Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) Norman Miozzi	40.00							126 122		2 472
Executive Director	40.00			Х				136,133.	0.	3,479.
(2) John Brothers	40.00	-		37				01 750	0	2 700
Finance Director	1 00			Х				91,752.	0.	2,790.
(3) Eric Bugger Trustee	1.00	Х						0.	0.	0.
(4) Penni Morris	1.00									
Trustee - Exit 01/25/24		Х						0.	0.	0.
(5) Kim Stanforth	1.00									
Secretary		Х		X				0.	0.	0.
(6) Bobby Beavers	1.00									
Trustee		Х						0.	0.	0.
(7) Vince Chase	1.00									
Trustee		Х						0.	0.	0.
(8) Matt Davidson	1.00									
Trustee - Exit 01/25/24		Х						0.	0.	0.
(9) Sharon Hess	1.00								_	_
Treasurer		Х		X				0.	0.	0.
(10) Brian Hoover	1.00								_	_
Trustee - Exit 06/30/24		Х						0.	0.	0.
(11) Pete Hoshor	1.00	1								
Trustee		Х						0.	0.	0.
(12) Dan Johnson	1.00	ļ								
Trustee	1 00	Х						0.	0.	0.
(13) Mark Klopfenstein	1.00	ļ								•
Vice President	1 00	Х		Х				0.	0.	0.
(14) Matt Schnelle	1.00								•	•
Trustee	1 00	Х						0.	0.	0.
(15) Su-Ann Newport	1.00	.,							0	•
Trustee	1 00	Х						0.	0.	0.
(16) Tom Tatham	1.00	3,7							_	^
Trustee - Exit 01/25/24	1 00	Х				_	_	0.	0.	0.
(17) Dave Schlegel President	1.00	v		v				0.	0.	0.
TIESTAGIIC	<u> </u>	X		X				1 0.	U •	Form <b>990</b> (2022)

Form **990** (2023)

31-1104456 Page 8

Form 990 (2023)

Part VII   Section A. Officers, Directors (A)	(B)			(0				(D)	(E)	(F)
Name and title	Average hours per week	box,	Position (do not check more than one box, unless person is both an officer and a director/trustee)			than o	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) Ivy Glover	1.00									
Trustee		Х						0.	0.	0.
(19) David Glover Trustee	1.00	х						0.	0.	0.
(20) Chiu Lee	1.00									
Trustee		Х						0.	0.	0.
(21) Kevin McCarthy Trustee - Start 01/25/24	1.00	х						0.	0.	0.
1b Subtotal	'							227,885.	0.	6,269.
c Total from continuation sheets to F							-	0.	0.	0.
d Total (add lines 1b and 1c)								227,885.	0.	6,269.

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

Yes No

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

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

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 X

#### Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Cardinal Roofing and Renovations	Building	
4130 Linden Ave, Dayton, OH 45432	Subcontractor	395,500.
All Star Roofing & Siding	Building	
	Subcontractor	204,486.
McCabe Property Services LLC	Building	
2356 National Road, Beavercreek, OH 45324	Subcontractor	189,927.
Castle Roofing, Inc.	Building	
5005 Nebraska Ave, Huber Heights, OH 45424	Subcontractor	171,672.
Miami Valley Premier Walk In Tubs	Building	
2601 S Dixie Dr., Dayton, OH 45429	Subcontractor	146,783.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization 5		
		- 000

Form **990** (2023)

Form 990 (2023) Inc.
Part VIII Statement of Revenue

		Check if Schedule O contains a response	e or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
SS	1 :	a Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues 1b					
ည် ရှိ		c Fundraising events 1c					
fts,		d Related organizations 1d					
ig ig		e Government grants (contributions)					
Sin		f All other contributions, gifts, grants, and					
utic Je		similar amounts not included above 1f	2,280,666.				
G E		g Noncash contributions included in lines 1a-1f	1,053,886.				
io In d		h Total. Add lines 1a-1f	2,000,000.	2,280,666.			
0 10		1 Total: Add liftes 1a-11	Business Code	_,,			
	2	a Home Sales	531390	1,304,201.	1,304,201.		
/ice	_	b ReStore Operations	531390	962,455.	962,455.		
ser.		c Mortgage Loan Discount	531390	309,938.	309,938.		
m S		d Other program income	900099	100,785.	100,785.		
gra Re				100,700.	200,700.		
Program Service Revenue		f All other program service revenue					
_		g Total. Add lines 2a-2f		2,677,379.			
-+	3	Investment income (including dividends, inte		2,011,015			
	3			33,821.			33,821.
	4	other similar amounts)		,			
	5	Royalties	•				
	3	(i) Real	(ii) Personal				
	6		()				
		b Less: rental expenses 6b					
		c Rental income or (loss) 6c					
		d Net rental income or (loss)					
		a Gross amount from sales of (i) Securities	(ii) Other				
	•	assets other than inventory <b>7a</b> 2,525	``				
		b Less: cost or other basis					
<u>o</u>	,		938,926.				
ne		c Gain or (loss) 7c 2,525	•				
ě		d Net gain or (loss)		705,445.			705,445.
her Revenue		a Gross income from fundraising events (not		, -			,
ğ		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18	a 43,805.				
		b Less: direct expenses	- ,				
		c Net income or (loss) from fundraising events	,	40,320.			40,320.
		a Gross income from gaming activities. See		,			
	-	Part IV, line 19	а				
		b Less: direct expenses					
		c Net income or (loss) from gaming activities_	~ [				
		a Gross sales of inventory, less returns					
		**	Da				
		b Less: cost of goods sold					
		c Net income or (loss) from sales of inventory	,				
$\neg$			Business Code				
sno	11 :	a Miscellaneous Income	900099	4,563.			4,563.
Miscellaneous Revenue		b		· ·			,
ella		c					
lsc B		d All other revenue					
2		e Total. Add lines 11a-11d		4,563.			
	12	Total revenue. See instructions		5,742,194.	2,677,379.	0.	784,149.

# Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	234,153.	180,298.	35,123.	18,732
6	trustees, and key employees	234,133.	100,250.	33,123.	10,732
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	929,894.	716,020.	139,483.	74,391
8	Pension plan accruals and contributions (include	727,074.	, 10,020	100,400	, = , 5,51
J	section 401(k) and 403(b) employer contributions)	20,772.	15.994	3,116.	1.662
9	Other employee benefits	77,796.	15,994. 59,903.	11,669.	1,662 6,224 9,126
10	Payroll taxes	114,073.	87,836.	17,111.	9.126
11	Fees for services (nonemployees):	221/0701	37,7331		3,120
	Management				
	Legal	27,451.		27,451.	
	Accounting	21,846.		27,451. 21,846.	
	Lobbying	,		, -	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
·	column (A), amount, list line 11g expenses on Sch 0.)	138,982.		138,982.	
12	Advertising and promotion	43,486.	20,873.	870.	21,743
13	Office expenses	33,630.	30,504.	1,970.	21,743 1,156
14	Information technology				
15	Royalties				
16	Occupancy	63,497.	55,242.	6,350.	1,905
17	Travel	46,453.	27,872.	13,936.	4,645
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	42,642.	40,510.	2,132.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	56,566.	50,909.	5,657.	
23	Insurance	84,654.	72,803.	5,079.	6,772
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	Cost of Homes Sold	1,301,593.	1,301,593.		
b	Building Services and S	741,286.	741,286.		
c	Morgage Discount	704,239.	704,239.		
d	Other expenses	175,153.	141,123.	8,933.	25,097
е	All other expenses	134,287.	127,873.	6,414.	-
25	Total functional expenses. Add lines 1 through 24e	4,992,453.	4,374,878.	446,122.	171,453
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 if following SOP 98-2 (ASC 958-720)				

Form **990** (2023)

# Form 990 (2023) Part X | Balance Sheet

Par	t X	Balance Sheet				
		Check if Schedule O contains a response or note to any li	ine in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		795,705.	1	2,165,822.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		387,327.	3	428,481.
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current or former of				
		trustee, key employee, creator or founder, substantial cor				
		controlled entity or family member of any of these persons		5		
	6	Loans and other receivables from other disqualified person	ons (as defined			
		under section 4958(f)(1)), and persons described in section	n 4958(c)(3)(B)		6	
tz	7	Notes and loans receivable, net		3,631,063.	7	2,754,125. 889,951.
Assets	8	Inventories for sale or use		889,022.	8	889,951.
۲	9	Prepaid expenses and deferred charges		55,785.	9	34,182.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D 10a	1,664,332.			
	b	Less: accumulated depreciation 10b		1,186,268.	10c	1,165,450. 201,670.
	11	Investments - publicly traded securities		177,469.	11	201,670.
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11		13		
	14	Intangible assets		400 556	14	450.000
	15	Other assets. See Part IV, line 11		483,776.	15	458,009
	16	Total assets. Add lines 1 through 15 (must equal line 33)		7,606,415.	16	8,097,690.
	17	Accounts payable and accrued expenses	686,691.	17	449,486.	
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities		161,670.	20	151,429.
	21	Escrow or custodial account liability. Complete Part IV of		101,070.	21	131,429
es	22	Loans and other payables to any current or former officer				
Liabilities		trustee, key employee, creator or founder, substantial cor				
Lia	00	controlled entity or family member of any of these person			22	
	23	Secured mortgages and notes payable to unrelated third Unsecured notes and loans payable to unrelated third par	F		23 24	
	24 25	Other liabilities (including federal income tax, payables to	······			
	25	parties, and other liabilities not included on lines 17-24). C				
		•	•	495,854.	25	464,089.
	26	_		1,344,215.	26	1,065,004.
	20	Organizations that follow FASB ASC 958, check here	X	2,011,2101	20	2,000,002
es		and complete lines 27, 28, 32, and 33.				
Suc	27	Net assets without donor restrictions		6,194,630.	27	6,965,116.
Bala	28	Net assets with donor restrictions		67,570.	28	67,570.
밀		Organizations that do not follow FASB ASC 958, check		·		
ᆵ		and complete lines 29 through 33.	_			
ō	29	Capital stock or trust principal, or current funds			29	
sets	30	Paid-in or capital surplus, or land, building, or equipment			30	
As	31	Retained earnings, endowment, accumulated income, or			31	
Net Assets or Fund Balances	32	Total net assets or fund balances		6,262,200.	32	7,032,686.
-	33	Total liabilities and net assets/fund balances		7,606,415.	33	8,097,690.

Par	T XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>42,1</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2		92,4	
3	Revenue less expenses. Subtract line 2 from line 1	3		49,7	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6,2	62,2	
5	Net unrealized gains (losses) on investments	5		20,7	<u> 45.</u>
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	7,0	32,6	86.
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
			_	Yes	No
1	Accounting method used to prepare the Form 990:		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a ₽	X
	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				
b	Were the organization's financial statements audited by an independent accountant?			b X	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
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?			c X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		📙	Ba	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			Bb	
			Fo	rm <b>990</b>	(2023)

332012 12-21-23

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

# **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

Habitat for Humanity of Greater Dayton,

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Employer identification number** 

Open to Public Inspection

31-1104456 Inc Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Inc. Schedule A (Form 990) 2023

31-110445<u>6 Page 2</u>

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support		•	-			
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	(=) = = = =	(,	(5) = 5 = 1	(,	(5) = = = =	(-)
	membership fees received. (Do not						
	include any "unusual grants.")	828,695.	2227228.	1944569.	1787454.	2280666.	9068612.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	828,695.	2227228.	1944569.	1787454.	2280666.	9068612.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						1091451.
6	Public support. Subtract line 5 from line 4.						7977161.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	828,695.	2227228.	1944569.	1787454.	2280666.	9068612.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	27,099.	20,909.	5,635.	10,311.	33,821.	97,775.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	12,349.	90,384.			4,563.	107,296.
11	<b>Total support.</b> Add lines 7 through 10						9273683.
12	Gross receipts from related activities,	etc. (see instruction	ns)			12 9	,098,347.
	First 5 years. If the Form 990 is for th			ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop	o here					
Sec	ction C. Computation of Publi		centage				
14	Public support percentage for 2023 (I	ine 6, column (f), di	vided by line 11, c	olumn (f))		14	86.02 %
15	Public support percentage from 2022	Schedule A, Part I	I, line 14			15	91.15 %
	33 1/3% support test - 2023. If the o					ore, check this box	c and
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2022. If the						
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	and stop here. The organization qualifies as a publicly supported organization						
	and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organization						
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
b	10% -facts-and-circumstances test	-	•	*	-	7a, and line 15 is	10% or
	more, and if the organization meets the	•				•	
	organization meets the facts-and-circu				-		
18	<b>Private foundation.</b> If the organization				•		
	<u> </u>		•	. ,			(Form 990) 2023

#### Inc. Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

quality under the tests listed be Section A. Public Support	iow, piedoc com	piete i dit ii.j				
calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						1
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose						+
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						+
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
ection B. Total Support		T	T	1	1	_
alendar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
Oa Gross income from interest,						
dividends, payments received on securities loans, rents, royalties,						
and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired ofter June 20, 1075						
c Add lines 10a and 10b						+
1 Net income from unrelated business						-
activities not included on line 10b,						
whether or not the business is						
regularly carried on						+
Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part VI.)						
3 Total support. (Add lines 9, 10c, 11, and 12.)						
4 First 5 years. If the Form 990 is for the	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organizati	ion,
check this box and stop here						
ection C. Computation of Public	Support Per	rcentage				
5 Public support percentage for 2023 (lir	ne 8, column (f), o	divided by line 13,	column (f))		15	
6 Public support percentage from 2022	Schedule A, Part	III, line 15			16	
ection D. Computation of Invest	ment Incom					
7 Investment income percentage for 202	23 (line 10c, colu	mn (f), divided by li	ine 13, column (f))		17	
8 Investment income percentage from 2					18	
9a 33 1/3% support tests - 2023. If the						7 is not
more than 33 1/3%, check this box and						
b 33 1/3% support tests - 2022. If the c						∟ and
line 18 is not more than 33 1/3%, chec						
O Private foundation. If the organization	i did not check a	box on line 14, 19	a, or 19b, check th	his box and see ins	structions	

332023 12-21-23

Schedule A (Form 990) 2023

# Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

  If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
	100	110
1		
2		
3a		
3b		
0-		
3c		
4a		
40		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
_		
9c		
40-		
10a		
10b		
		2023

Has the organization accepted a gift or contribution from any of the following persons?  a A person who directly or indirectly controls, either acces or together with personal described on lines 11b and 11c blow, if you governing body or authorised controlled on line 11a above?  b A family member of a porson described on line 11a above?  c A 35% controlled entity of a person described on line 11a above?  c A 35% controlled entity of a person described on line 11a to or 11b above? If yes' (a line 11a, 11b, or 11c, provide described provided in the 11a or 11b above? If yes' (a line 11a, 11b, or 11c, provide described provided in 11b or 11b above? If yes' (a line 11a, 11b, or 11c, provide described provided in 11b or 11b above? If yes' (a line 11a, 11b, or 11c, provide described provided	Pai	T IV   Supporting Organizations (continued)			
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11b alone, the governing body of a supported organization?  b A Amily member of a person described on line 11a above?  c A 35% controlled writty of a person described on line 11a above?  c A 35% controlled writty of a person described on line 11a above?  1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization of organization have the power to regularly appoint or elect at least a majority of the organization of organization have the power to regularly appoint or elect at least a majority of the organization of organization have the power to regularly appoint or elect at least a majority of the organization of organization have the power to regularly appoint or elect at least a majority of the organization of organization of the organization orga				Yes	No
11a blow, the governing body of a supported organization? b A family member of a person described on line 11a on 11b above? If "Yes" to line 11a, 11b, or 11c, provide  a 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide  a 1b Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to require yaporit or elect at least a majority of the organizations for one or more supported organizations have the power to require yaporit or elect at least a majority of the organizations of effectively operated, supervised, or controlled the organization as activities. If the organization had more than one supported supported organization of the transfer organization of the transfer organization of the transfer organization organization and the supported organization organiz	11	Has the organization accepted a gift or contribution from any of the following persons?			
b A Astive controlled entity of a person described on line 11a above? If "Yes" to line 11a, 11b, or 11c, provide deal in Pert VI.  Section B. Type I Supporting Organizations  Did the growing body, members of the governing body, officers acting in their official capacity, or membership of one or not supported organization three than the expense of the governing body and the complete organization of the provision of the proposes of the supported organization? If "Yes," explain in Part VI have providing such benefit carred out the proposes of the supported organization of the provision of the provision of the proposes of the supported organization of the provision	а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
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1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?  2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.  Section E. Type III Functionally Integrated Supporting Organizations  1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).  a The organization is the parent of each of its supported organizations. Complete line 3 below.  c The organization is the parent of each of its supported organizations. Complete line 3 below.  c The organization is posted a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).  2 Activities Test. Answer lines 2a and 2b below.  b The organization is activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organization's involvement, one or more of the organization's supported organization's position that its supported organization involvemen	Sec	tion D. All Type III Supporting Organizations			
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Part V	Гуре III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1 C	heck here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions.
	ll other Type III non-functionally integrated supporting organizations mu		·	_
Section A - A	djusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net sho	rt-term capital gain	1		
2 Recover	ries of prior-year distributions	2		
3 Other gr	ross income (see instructions)	3		
4 Add line	es 1 through 3.	4		
<b>5</b> Depreci	ation and depletion	5		
6 Portion	of operating expenses paid or incurred for production or			
collection	on of gross income or for management, conservation, or			
mainten	nance of property held for production of income (see instructions)	6		
7 Other ex	xpenses (see instructions)	7		
8 Adjuste	ed Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - M	linimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggrega	ate fair market value of all non-exempt-use assets (see			
instructi	ions for short tax year or assets held for part of year):			
<b>a</b> Average	e monthly value of securities	1a		
<b>b</b> Average	e monthly cash balances	1b		
<b>c</b> Fair mar	rket value of other non-exempt-use assets	1c		
d Total (a	dd lines 1a, 1b, and 1c)	1d		
e Discou	nt claimed for blockage or other factors			
(explain	in detail in Part VI):			
2 Acquisit	tion indebtedness applicable to non-exempt-use assets	2		
3 Subtrac	t line 2 from line 1d.	3		
4 Cash de	eemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see inst	ructions).	4		
5 Net valu	ue of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply	line 5 by 0.035.	6		
<b>7</b> Recover	ries of prior-year distributions	7		
8 Minimu	m Asset Amount (add line 7 to line 6)	8		
Section C - D	Distributable Amount			Current Year
1 Adjuste	d net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.	85 of line 1.	2		
3 Minimur	m asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter gr	reater of line 2 or line 3.	4		
5 Income	tax imposed in prior year	5		
6 Distribu	utable Amount. Subtract line 5 from line 4, unless subject to			
	ncy temporary reduction (see instructions).	6		
$\overline{}$	heck here if the current year is the organization's first as a non-function	nally integrated	d Type III supporting orga	anization (see

Schedule A (Form 990) 2023

instructions).

	t V Type III Non-Functionally Integrated 509(	(a)(3) Supporting Orga	nizations (continu	red)	1 1101130 Page /
Secti	on D - Distributions		Joonana	<i>100)</i>	Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	<u> </u>			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		3	
4	Amounts paid to acquire exempt-use assets	•		4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
_6_	Other distributions (describe in Part VI). See instructions.			6	
_ 7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
_9_	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	1	ı	10	
		(i)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2023	าร	Distributable Amount for 2023
_1_	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
_3_	Excess distributions carryover, if any, to 2023				
a	From 2018				
<u>b</u>	From 2019				
c	From 2020				
<u>d</u>	From 2021				
e	From 2022				
f_	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
<u> </u>	Carryover from 2018 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
6	than zero, explain in <b>Part VI.</b> See instructions.  Remaining underdistributions for 2023. Subtract lines 3h				
0	•				
	and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
•	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				

Schedule A (Form 990) 2023

31-1104456 Page 8

Inc.

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) Schedule A, Part II, Line 10, Explanation for Other Income: Other Income 12,349. 2019 Amount: \$ 2020 Amount: \$ 90,384. 2023 Amount: \$ 4,563.

332028 12-21-23 Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

# Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization					Em	oloyer identification number
Hab	itat for	Humanity of	Greater	Dayton,		
Inc	•	_		_	3	1-1104456
Organization type (check one	);		_			_

o. game	ation type (encont of	<i>-</i>
Filers of	:	Section:
Form 99	0 or 990-EZ	X 501(c)( 3 ) (enter number) organization
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
		527 political organization
Form 99	0-PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
Check if	your organization is	covered by the <b>General Rule</b> or a <b>Special Rule</b> .
		r), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General	Rule	
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
X	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under a 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.
	contributor, during the literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, hal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., plete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year
answer "	No" on Part IV, line	It isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2023)

Name of organization
Habitat for Humanity of Greater Dayton,

Employer identification number

31-1104456

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions  \$	Person Payroll Complete Part II for noncash contributions.
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions  \$	Person Payroll Complete Part II for noncash contributions.
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions  \$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
Habitat for Humanity of Greater Dayton,
Inc.

Employer identification number
31-1104456

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions.) Part I (a) No. (b) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions.) Part I

**Employer identification number** 

Name of organization

Habitat for Humanity of Greater Dayton, 31-1104456 Inc. Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **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.

Go to www.irs.gov/Form990 for instructions and the latest information. Habitat for Humanity of Greater Dayton,

2023
Open to Public

Open to Public Inspection

Employer identification number

31-1104456 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year \_\_\_\_\_ 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year. Total number of conservation easements 2a Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included on line 2a 2c Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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. 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 FASB 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 FASB 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 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 FASB ASC 958 relating to these items:

332051 09-28-23

Schedule D (Form 990) 2023

a Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

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

Par	t III Organizations Maintaining C	ollections of Art,	, Historical Tre	asures, o	r Other	Simi	lar Asset	s (continu	ued)
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that	make si	gnificar	nt use of its		
	collection items (check all that apply).								
а	Public exhibition	d	Loan or excl	hange progra	am				
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	how they further th	e organizatio	n's exen	npt pur	oose in Part	XIII.	
5	During the year, did the organization solicit or	r receive donations of	art, historical treas	sures, or othe	er similar	assets			
	to be sold to raise funds rather than to be ma							Yes	☐ No
Par	t IV Escrow and Custodial Arrang	gements Complete	e if the organization	answered "	Yes" on F	Form 99	00, Part IV,	ine 9, or	
	reported an amount on Form 990, Par	t X, line 21.							
1a	Is the organization an agent, trustee, custodia	an, or other intermedi	ary for contribution	s or other as	sets not	include	d		
	on Form 990, Part X?						[	Yes	X No
b	If "Yes," explain the arrangement in Part XIII a					_			
								Amount	
С	Beginning balance					. 10	;		
d	Additions during the year					. 10	1		
е	Distributions during the year					. 16	•		
f	Ending balance					. <u>1</u> 1			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	21, for escrow or cu	stodial acco	unt liabili	ity?	<u>\</u>	Yes	No
_	If "Yes," explain the arrangement in Part XIII.								X
Pai	t V Endowment Funds Complete if								
		(a) Current year	(b) Prior year	(c) Two year		<b>(d)</b> Thre	e years back		years back
1a	Beginning of year balance	67,570.	67,570.	67	7,570.		67,570.		67,570.
b	Contributions								
С	Net investment earnings, gains, and losses						17,787.		1,484.
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses						17,787.		1,484.
g	End of year balance	67,570.	67,570.	67	7,570.		67,570.		67,570.
2	Provide the estimated percentage of the curr	ent year end balance	(line 1g, column (a)	) held as:					
а	Board designated or quasi-endowment		_%						
b	Permanent endowment100	%							
С	Term endowment	%							
	The percentages on lines 2a, 2b, and 2c should be contaged in the percentages on lines 2a, 2b, and 2c should be contaged in the percentages on lines 2a, 2b, and 2c should be contaged in the percentages on lines 2a, 2b, and 2c should be contaged in the percentages on lines 2a, 2b, and 2c should be contaged in the percentages on lines 2a, 2b, and 2c should be contaged in the percentages on lines 2a, 2b, and 2c should be contaged in the percentages on lines 2a, 2b, and 2c should be contaged in the percentage and a should be contaged and a should be contaged and a should be contage	•							
За	Are there endowment funds not in the posses	ssion of the organizat	ion that are held an	d administer	ed for th	е			
	organization by:								Yes No
									X
									X
b	If "Yes" on line 3a(ii), are the related organization							. 3b	
4	Describe in Part XIII the intended uses of the		ment funds.						
Pai	t VI Land, Buildings, and Equipm		Deat IV Bas 44 a O	F 000	D-+V				
	Complete if the organization answered								
	Description of property	(a) Cost or oth				ccumul	l l	(d) Book	value
		basis (investme		` '	del	preciati	on	110	150
	Land			8,150.		0.0	21.4		,150.
	Buildings			9,706.			214.		<u>,492.</u>
C	Leasehold improvements			4,594.	_		615.		<u>,979.</u>
d	Equipment			2,386.	-		479.		,907.
	Other			9,496.			574.		,922.
ıota	. Add lines 1a through 1e. (Column (d) must ed	gual Form 990 Part X	Line 10c. column	(B))				<b>工,</b> 工 O O	,450.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 Inc.  Part VII Investments - Other Securities		3	31-1104456 Page <b>3</b>
Complete if the organization answered "Yes" of			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D) (E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets	F 000 D-+ IV I'	ddd Oce Ferry 000 Bert V Free de	
Complete if the organization answered "Yes" o	Description	11d. See Form 990, Part X, line 15.	(b) Book value
	•		458,009.
	acing reases		430,009.
(2)			
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col.	(B))		458,009.
Part X Other Liabilities			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line	25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) Right of use liabilities -	leases		464,089.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			464 000
Total. (Column (b) must equal Form 990. Part X. line 25. col.	(R))		464,089.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

Schedule D (Form 990) 2023

inc.	]	[nc	٦.
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Schedule D (Form 990) 2023 Inc.				1104456	Page 4
Part XI Reconciliation of Revenue per Audited Financial Stateme		Revenue per Re	turn		
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				5,782,	211
<ul><li>Total revenue, gains, and other support per audited financial statements</li><li>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</li></ul>			1	3,702,	211.
	2a	20,745.			
<ul><li>a Net unrealized gains (losses) on investments</li><li>b Donated services and use of facilities</li></ul>		15,887.			
		13,007.			
Recoveries of prior year grants     Other (Describe in Part XIII.)	4.	3,485.			
			2e	4.0	117.
e Add lines 2a through 2d  3 Subtract line 2e from line 1			3	5,742,	194.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				3,,12,	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b Other (Describe in Part XIII.)					
c Add lines 4a and 4b			4c		0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	5,742,	
Part XII Reconciliation of Expenses per Audited Financial Statement	ents With	Expenses per F			
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
Total expenses and losses per audited financial statements			1	5,011,	825.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:					
a Donated services and use of facilities	2a	15,887.			
<b>b</b> Prior year adjustments					
c Other losses					
d Other (Describe in Part XIII.)	1 1	3,485.			
e Add lines 2a through 2d			2e		372.
3 Subtract line 2e from line 1			3	4,992,	453.
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		0.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	4,992,	<u>453.</u>
Part XIII Supplemental Information					
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part			; Part >	K, line 2; Part X	1,
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	itional inform	ation.			
Part IV, line 2b:					
rait iv, line 2D:					
The entity services the mortgages on homes it	sells	. Include	d ii	n escrow	,
			<del></del>		
cash are the amounts received for insurance a	and pro	perty taxe	s oi	n such	
		<u> </u>			
homes.					
Part V, line 4:					
m. h f 1 i f f					
To build houses for low income families.					
Part X, Line 2:					
rate ii, ziiie zi					
HFH is exempt from income taxes under Section	1 501 o	f the Inte	rna:	l Revenu	ıe
Code and a similar provision of Ohio law. How	vever,	HFH is sub	ject	t to	
				_	
federal income tax on any unrelated business	taxabl	e income.	HFI	H's IRS	
332054 09-28-23			Sched	dule D (Form 9	90) 2023

#### SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number Name of the organization Habitat for Humanity of Greater Dayton, 31-1104456 Inc. 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. а Mail solicitations е Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events С g d In-person solicitations 2 a 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 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No 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.

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

Schedule G (Form 990) 2023

Inc.

31-1104456 Page 2

Ра		of fundraising events. Complete if the	-		· ·	
$\neg$		2. Tarraraising System Contributions and gre	(a) Event #1	(b) Event #2	(c) Other events	
			Home for the	, ,	None	(d) Total events
			Holidays			(add col. (a) through
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
e Re			(CVCIII Lype)	(CVCITE type)	(total flumber)	
Revenue	4	Gross receipts	43,805.			43,805.
Be	'	Gross receipts	43,003.			43,003.
	2	Less: Contributions				
	2	Less. Contributions				
	2	Gross income (line 1 minus line 2)	43,805.			43,805.
$\dashv$		Gross income (interminas intez)	13,003.			13,0030
	4	Cash prizes				
	•	Odd1 p1/200				
	5	Noncash prizes				
ω	3	Nondain prizes				
Direct Expenses	6	Rent/facility costs				
xpe	U	Tient facility costs				
Ĥ	7	Food and beverages				
irec	′	Food and beverages				
		Entortainment				
	9	Entertainment Other direct expanses	3,485.			3,485.
	_	Other direct expenses	,			3,485.
	10	Direct expense summary. Add lines 4 through	( )			40,320.
Pa	11 rt l	Net income summary. Subtract line 10 from li <b>II Gaming.</b> Complete if the organization		000 Part IV line 10 or		40,320.
. u		\$15,000 on Form 990-EZ, line 6a.	answered res on romi	330, 1 att 10, line 13, 01	reported more triair	
		φτο,000 0111 01111 000 E2, line 0a.		(b) Pull tabs/instant		(d) Total gaming (add
e			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue				singo, progressive singe		
Be						
$\dashv$	1_	Gross revenue				
	_	Oach aries				
es	2	Cash prizes				
Direct Expenses	_					
X	3	Noncash prizes				
뒹	_	D 1/6 111				
Ş	4	Rent/facility costs				
٦		<b>.</b>				
$\dashv$	5	Other direct expenses				
			Yes %	Yes %		
	6	Volunteer labor	L No	No	No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
		ter the state(s) in which the organization condu	_			
а	ls t	he organization licensed to conduct gaming a	ctivities in each of these s	states?		Yes No
b	If "	No," explain:				
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax	year?	Yes No
b	lf "	Yes," explain:				
	_					
	_					

# Habitat for Humanity of Greater Dayton,

Sch	edule G (Form 990) 2023 Inc.	1 - 11	.04	<u>456</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?			Yes	☐ No
	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?	ſ		Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:				
	The organization's facility	1	13a		%
	An outside facility		13b		<del></del>
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		100	<u> </u>	
14	cinter the fiame and address of the person who prepares the organization's gaming/special events books and records.				
	Name				
	Address				
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 amou	int			
	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:				
	Is the organization required under state law to make charitable distributions from the gaming proceeds to				
a		ſ		Yes	☐ No
	retain the state gaming license?	l		163	NO
D	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t	ne			
Da	organization's own exempt activities during the tax year \$ rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and				
Ра		nd Part I	II, lın	es 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				
				_	

# 

Schedule G (Form 990)

#### **SCHEDULE M** (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information. Habitat for Humanity of Greater Dayton,

Employer identification number 31-1104456

	Inc.					31-1104	456	
Pai	Part I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		<b>(d)</b> hod of determin n contribution ar	•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	X		960,809.	Selling	g Price		
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other	X	1	9,020.				
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ( Building Suppli )	X	0	84,057.				
26	Other ()							
27	Other ()							
28	Other ( )							
29	Number of Forms 8283 received by the organi	zation durino	g the tax year for co	ontributions				
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement <b>29</b>			0	
							Yes	No
30a	During the year, did the organization receive b	-		· · · · · · · · · · · · · · · · · · ·				
	must hold for at least 3 years from the date of	the initial co	ntribution, and wh	ich isn't required to be used	for			
	exempt purposes for the entire holding period	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard contribut	ions?	31	X	
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in o	column (c) fo	r a type of property	for which column (a) is chec	ked,			
	describe in Part II.							

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

Schedule M (Form 990) 2023

# Habitat for Humanity of Greater Dayton,

Schedule M	1 (Form 990) 2023 Inc.	31-1104456	Page 2
Part II	<b>Supplemental Information.</b> Provide the information required by Part I, lines 30b, 32b, is reporting in Part I, column (b), the number of contributions, the number of items received, or	and 33, and whether the organizati	ion
	this part for any additional information.		

Schedule M (Form 990) 2023

332142 09-11-23

#### SCHEDULE O (Form 990)

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 Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

QU23
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Habitat for Humanity of Greater Dayton, Inc.

Employer identification number 31-1104456

Form 990, Part I, Line 1, Description of Organization Mission:

communities, and hope to realize our vision of a world where everyone

has a decent place to live. Habitat for Humanity of Greater Dayton

adheres to a strict non-proselytizing policy and will not base an offer

of assistance on the expressed or implied condition that people adhere

to or convert to a particular faith or listen and respond to messaging

designed to induce conversion to a particular faith.

Form 990, Part III, Line 1, Description of Organization Mission:

policy and will not base an offer of assistance on the expressed or

implied condition that people adhere to or convert to a particular

faith or listen and respond to messaging designed to induce conversion

to a particular faith.

Form 990, Part III, Line 4d, Other Program Services:

Volunteer services and other program services: Volunteers are the heart

of Habitat for Humanity of Greater Dayton. The organization engaged

5,066 dedicated people from teenagers to senior citizens to volunteer

with us this year. Dayton Habitat's mission brings together individual

and group volunteers from corporate, faith, educational and community

groups to ensure that everyone may live in safe, decent and affordable

housing. We utilize an on-line, personalized volunteer registration and

placement of service system to assure that every volunteer has the

opportunity to select a specific work site, learn new construction

skills, interact with our partner families, and meet their personal

and/or professional community service goals with appropriate

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

Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2** 

Name of the organization Habitat for Humanity of Greater Dayton, **Employer identification number** 31-1104456 Inc. documentation and recognition. We partner with AmeriCorps, several educational institutions with workforce development curriculum, service learning and internships and with the court system in providing mandated community service opportunities. In addition to actually building our homes with volunteer labor, all of our programs and operations are heavily staffed with volunteers. Site selection, construction, family selection, classroom instructors, partner family advocates, public relations and community education, finance, nominating, board of trustees and strategic planning account for 150-200 highly skilled professionals who volunteer their time and talents on behalf of our partner families. We solicit, cultivate, train, and recognize our volunteers throughout the year with multi-faceted communication tools that include social media, website, printed newsletters, annual report and personal visits to faith-based organizations, corporations, social and service clubs. Expenses \$ 87,498. including grants of \$ 0. Revenue \$ 100,785.

Form 990, Part VI, Section B, line 11b:

A copy of Form 990 is provided to the organization's governing body prior
to filing the return with the Internal Revenue service. Form 990 is
reviewed by each board member before filing.

Form 990, Part VI, Section B, Line 12c:

Periodic reviews are conducted to ensure the organization operates in a

manner consistent with its charitable purpose and does not engage in

activities that could jeopardize its tax-exempt status.

Form 990, Part VI, Section B, Line 15:

Schedule O (Form 990) 2023	Page <b>2</b>
Name of the organization Habitat for Humanity of Greater Dayton, Inc.	Employer identification number 31-1104456
The board of directors reviews the performance of the exec	utive director
annually.	
Form 990, Part VI, Section C, Line 19:	
The organization has its governing documents, financial st	atements and
conflict of interest policy available for public inspection	n upon the
request of this information.	
Form 990, Part XII, Line 2c:	
The process followed by the audit committee did not change	during the
year.	

# **DHA001**

## **SSR Document History**

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By: Jessica Geers(jgeers@barnesdennig.com)

Status: USERSIGNED

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