

Return of Organization Exempt From Income Tax

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

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2015 calendar year, or tax year beginning 07-01 , 2015, and ending 06-30 , 2016																																		
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization HIGHLAND RIM HABITAT FOR HUMANITY</td> <td>D Employer identification no. 62-1395092</td> </tr> <tr> <td colspan="2">Doing business as</td> <td></td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> <td>E Telephone number (931) 393-2383</td> </tr> <tr> <td>P O BOX 1295</td> <td></td> <td>G Gross receipts \$ 137,673</td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code TULLAHOMA, TN 37388</td> <td></td> </tr> <tr> <td colspan="2">F Name and address of principal officer: TERRIE QUICK SAME AS C ABOVE</td> <td>H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td colspan="2"></td> <td>H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)</td> </tr> <tr> <td colspan="2"></td> <td>H(c) Group exemption number 8545</td> </tr> <tr> <td colspan="2">I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td></td> </tr> <tr> <td colspan="2">J Website: WWW.HRHFH.ORG</td> <td></td> </tr> <tr> <td colspan="2">K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td>L Year of formation: 1991 M State of legal domicile: TN</td> </tr> </table>	C Name of organization HIGHLAND RIM HABITAT FOR HUMANITY		D Employer identification no. 62-1395092	Doing business as			Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number (931) 393-2383	P O BOX 1295		G Gross receipts \$ 137,673	City or town, state or province, country, and ZIP or foreign postal code TULLAHOMA, TN 37388			F Name and address of principal officer: TERRIE QUICK SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)			H(c) Group exemption number 8545	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			J Website: WWW.HRHFH.ORG			K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1991 M State of legal domicile: TN
C Name of organization HIGHLAND RIM HABITAT FOR HUMANITY		D Employer identification no. 62-1395092																																
Doing business as																																		
Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number (931) 393-2383																																
P O BOX 1295		G Gross receipts \$ 137,673																																
City or town, state or province, country, and ZIP or foreign postal code TULLAHOMA, TN 37388																																		
F Name and address of principal officer: TERRIE QUICK SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																
		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)																																
		H(c) Group exemption number 8545																																
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527																																		
J Website: WWW.HRHFH.ORG																																		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1991 M State of legal domicile: TN																																

Part I Summary

1	Briefly describe the organization's mission or most significant activities: BUILDING HOMES AND PROVIDING NO INTEREST FINANCING FOR LOW-INCOME FAMILIES			
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
3	Number of voting members of the governing body (Part VI, line 1a)	3		11
4	Number of independent voting members of the governing body (Part VI, line 1b)	4		11
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5		1
6	Total number of volunteers (estimate if necessary)	6		175
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a		0
b	Net unrelated business taxable income from Form 990-T, line 34	7b		0
8	Contributions and grants (Part VIII, line 1h)	54,888	Prior Year	8,760
9	Program service revenue (Part VIII, line 2g)	77,954	Current Year	52,721
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	298		172
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	103,159		76,020
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	236,299		137,673
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			6,750
14	Benefits paid to or for members (Part IX, column (A), line 4)			0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15,247		18,950
16a	Professional fundraising fees (Part IX, column (A), line 11e)			0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,602			
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	183,698		140,828
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	198,945		166,528
19	Revenue less expenses. Subtract line 18 from line 12	37,354		(28,855)
20	Total assets (Part X, line 16)	515,681	Beginning of Current Year	569,613
21	Total liabilities (Part X, line 26)	2,890	End of Year	79,177
22	Net assets or fund balances. Subtract line 21 from line 20	512,791		490,436

Part II Signature Block

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

Sign Here	<p>TERRIE QUICK Signature of officer</p> <p>TERRIE QUICK, PRESIDENT OF BOD Type or print name and title</p>	<p>11-03-2016 Date</p>
Paid Preparer Use Only	<p>Print/Type preparer's name: Bryan Blair</p> <p>Preparer's signature: Bryan Blair</p> <p>Date: 11-03-2016</p> <p>Firm's name: H A Beasley and Company PLLC</p> <p>Firm's address: 111 MTCS Drive Murfreesboro TN 37129</p>	<p>Check <input type="checkbox"/> if self-employed</p> <p>PTIN: P00631975</p> <p>Phone no.: 615-895-5675</p>

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

For Paperwork Reduction Act Notice, see the separate instructions.