

Form **990-T**

# Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

## 2015

For calendar year 2015 or other tax year beginning **07/01/15**, and ending **06/30/16**

Information about Form 990-T and its instructions is available at [www.irs.gov/form990t](http://www.irs.gov/form990t)

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury  
Internal Revenue Service

**A**  Check box if address changed

**B** Exempt under section

501(c) ( **C** ) ( **3** )

408(e)  220(e)

408A  530(a)

529(a)

Name of organization (  Check box if name changed and see instructions )

**Southern Crescent Habitat for Humanity**

Number, street, and room or suite no. If a P O box, see instructions

**9570 Tara Boulevard**

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

**Jonesboro GA 30236**

**D** Employer identification number  
(Employees' trust, see instructions)

**58-1761611**

**C** Book value of all assets at end of year

**6,126,968**

**F** Group exemption number (See instructions) ▶ **8545**

**G** Check organization type ▶  501(c) corporation  501(c) trust  401(a) trust  Other trust

**H** Describe the organization's primary unrelated business activity

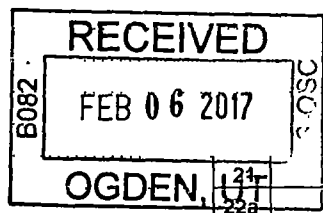
**I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes," enter the name and identifying number of the parent corporation  Yes  No

**J** The books are in care of ▶ **Kem Kimbrough, Sr.** Telephone number ▶ **770-477-2367**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
	<b>c Balance</b>	<b>1c</b>		
2	Cost of goods sold (Schedule A, line 7)	<b>2</b>		
3	Gross profit Subtract line 2 from line 1c	<b>3</b>		
4a	Capital gain net income (attach Schedule D)	<b>4a</b>		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4b</b>		
c	Capital loss deduction for trusts	<b>4c</b>		
5	Income (loss) from partnerships and S corporations (attach statement)	<b>5</b>		
6	Rent income (Schedule C)	<b>6</b>		
7	Unrelated debt-financed income (Schedule E)	<b>7</b>		
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	<b>8</b>		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>		
10	Exploited exempt activity income (Schedule I)	<b>10</b>		
11	Advertising income (Schedule J)	<b>11</b>		
12	Other income (See instructions, attach schedule)	<b>12</b>		
13	<b>Total.</b> Combine lines 3 through 12	<b>13</b>	<b>0</b>	<b>0</b>

### Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income)

14	Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>	
15	Salaries and wages	<b>15</b>	
16	Repairs and maintenance	<b>16</b>	
17	Bad debts	<b>17</b>	
18	Interest (attach schedule)	<b>18</b>	
19	Taxes and licenses	<b>19</b>	
20	Charitable contributions (See instructions for limitation rules)	<b>20</b>	
21	Depreciation (attach Form 4562)	<b>21</b>	
22	Less depreciation claimed on Schedule A and elsewhere on return	<b>22b</b>	<b>0</b>
23	Depletion	<b>23</b>	
24	Contributions to deferred compensation plans	<b>24</b>	
25	Employee benefit programs	<b>25</b>	
26	Excess exempt expenses (Schedule I)	<b>26</b>	
27	Excess readership costs (Schedule J)	<b>27</b>	
28	Other deductions (attach schedule)	<b>28</b>	
29	<b>Total deductions.</b> Add lines 14 through 28	<b>29</b>	
30	Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13	<b>30</b>	
31	Net operating loss deduction (limited to the amount on line 30)	<b>31</b>	
32	Unrelated business taxable income before specific deduction Subtract line 31 from line 30	<b>32</b>	
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	<b>33</b>	
34	<b>Unrelated business taxable income.</b> Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	<b>34</b>	<b>0</b>



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Part III Tax Computation

Table with 3 columns: Description, Amount, and Line Number. Rows include Organizations Taxable as Corporations (35), Trusts Taxable at Trust Rates (36), Proxy tax (37), Alternative minimum tax (38), and Total (39).

Part IV Tax and Payments

Table with 3 columns: Description, Amount, and Line Number. Rows include Foreign tax credit (40a-40e), Total credits (40e), Subtract line 40e from line 39 (41), Other taxes (42), Total tax (43), Payments (44a-44g), Total payments (45), Estimated tax penalty (46), Tax due (47), Overpayment (48), and Refunded (49).

Part V Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question, Yes, No. Questions include interest in foreign countries (1), distribution from foreign trusts (2), and tax-exempt interest received (3).

Schedule A - Cost of Goods Sold. Enter method of inventory valuation

Table with 3 columns: Description, Amount, and Line Number. Rows include Inventory at beginning of year (1), Purchases (2), Cost of labor (3), Additional sec 263A costs (4a-4b), Inventory at end of year (6), Cost of goods sold (7), and Do the rules of section 263A apply (8).

Sign Here: 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 taxpayer) is based on all information of which preparer has any knowledge.

Preparer Information: Pnnr/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's address, Firm's EIN, Phone no.

May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [ ] No