EXTENDED TO MAY 17, 2021

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.

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

For the 2019 calendar year, or tax year beginning JUL 1, 2019 and ending JUN 30, 2020

B Name of organization
HABITAT FOR HUMANITY OF WISCONSIN RIVER AREA, INC.
Doing business as

1211 8TH STREET, P. O. BOX 38
BARABOO, WI 53913

Number and street (or P.O. box if mail is not delivered to street address)

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

D Employer identification number

39-2023346

E Telephone number

(608) 448-2888

G Gross receipts $ 1,177,896.

H(a) Is this a group return

Yes [X] No

for subordinates? .......... [X] Yes No

H(b) Are all subordinates included? Yes [X] No

If "No," attach a list. (see instructions)

J Website: WWW.HFHWISCONSINRIVER.ORG

K Form of organization: X Corporation

L Year of formation: 2001 M State of legal domicile: WI

Part I Summary

1 Briefly describe the organization's mission or most significant activities: BUILD/REMODEL HOMES SOLD AT
FAVORABLE TERMS TO QUALIFIED LOW-INCOME INDIVIDUALS, ALSO, TO

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

3 Number of voting members of the governing body (Part VI, line 1a) 3

4 Number of independent voting members of the governing body (Part VI, line 1b) 13

5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5

6 Total number of volunteers (estimate if necessary) 15

7a Total unrelated business revenue from Part VIII, column (C), line 12 0

7b Net unrelated business taxable income from Form 990-T, line 39 0

8 Contributions and grants (Part VIII, line 1h) 119,564 121,155

9 Program service revenue (Part VIII, line 2g) 1,084,525 861,292

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -5,917 -5,754

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 18,944 14,152

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,217,116 990,845

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 0

14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 548,325 537,207

16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0

16b Total fundraising expenses (Part IX, column (D), line 25) 8,828

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 636,281 625,012

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,184,606 1,162,219

19 Revenue less expenses. Subtract line 18 from line 12 32,510 -171,374

Beginning of Current Year 2,351,679 2,273,517

End of Year 449,848 543,060

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.

Signature of officer

MARCIA BROWN, PRESIDENT

Type or print name and title

Signature Here

Date

Paid

Preparer's name

PETER VANDER WERFF

Preparer's signature

O'CONNOR, WELLS & VANDER WERFF, LLC

Preparer's EIN

39-1742997

Use Only

Firm's EIN

PTIN

03/06/21

Check [X] Yes No

Filed ELECTRONICALLY

000555651

Phone no. 920-324-971

Form 990 (2019)

May the IRS discuss this return with the preparer shown above? (see instructions)

LHA For Paperwork Reduction Act Notice, see the separate instructions.

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION
Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

BUILD/REMODEL HOMES SOLD AT FAVORABLE TERMS TO QUALIFIED LOW-INCOME INDIVIDUALS. ALSO, TO OPERATE TWO RETAIL RESTORE OUTLETS TO SELL DONATED BUILDING MATERIALS.

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

☐ Yes ☑ No

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

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

☐ Yes ☑ 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, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses $380,386, including grants of $ ) (Revenue $215,064.)

HABITAT FOR HUMANITY OF WISCONSIN RIVER AREA, INC. CONSTRUCTS HOMES USING VOLUNTEER LABOR AND SELLS THEM AT FAVORABLE TERMS TO ELIGIBLE LOW-INCOME FAMILIES.

4b (Code: ) (Expenses $652,574, including grants of $ ) (Revenue $656,307.)

HABITAT FOR HUMANITY RESTORES SELL DONATE HOME IMPROVEMENT MATERIALS TO THE PUBLIC AT DISCONTINUED PRICES. ALL THE PROCEEDS FROM RESTORES BENEFIT THE MISSION OF HABITAT FOR HUMANITY OF WISCONSIN RIVER AREA, INC.

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

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

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

4e Total program service expenses $1,032,960.

Form 990 (2019)