Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Α	For the	2011 calen	dar year, or tax year begin	ining , 20	011, and endin	g		,			
В	Check if ap	oplicable:	С				D Employ	er Identifi/	cation Numb	er	
	Addre	ss change	OPERATION HELP A	HERO			27-	14382	56		
	Name	change	PO BOX 80996				E Telepho	ne numbe	r		
	\vdash	return	RANCHO SANTA MAR	GARITA, CA 92688							
	Termi										
							G	¢	5	97,377.	
		ded return	F Name and address of principa	d officer)		H(a) le this	G Gross r a group retur			Yes X No	
	Mppilo	ation pending	i Martie and address or principa	in Officer.			affiliates inc		====	Yes No	
	·		W 501()(0)	3.4.7.1.3	I	If 'No,'	attach a list.	(see instr	uctions)	iesito	
<u></u>		mpt status	X 501(c)(3) 501(c) () < (insert no.) 4947(a)(1) or 527						
<u>J</u>	Websi	~~~	w.operationhelpal		T.		exemption nu				
K			X Corporation Trust	Association Other ►	L Year of Format	ion: ZUU	9 M s	State of leg	gal domicile:	CA	
Pa		Summar									
				ion or most significant activities:							
Ç				of <u>our American mili</u> t							
Activities & Governance	l m	nits_an	d_families_during	<u>g_times_of_crisis,_de</u>	ployment_	and ne	eed			. – – – –	
/er											
g				n discontinued its operations or o				net asse	ets.	12	
જ				rning body (Part VI, line 1a) s of the governing body (Part VI,				4		12	
ties	ı			n calendar year 2011 (Part V, line				5		0	
ξ				necessary)				6		300	
AC				Part VIII, column (C), line 12				7a		0.	
				from Form 990-T, line 34				7b		0.	
					, and the same of		rior Year		Curren	nt Year	
	8 Co	ntributions	and grants (Part VIII, line	1h)			261,5	12.		88,227.	
ne	i		- ·	· 2g)					(example explored to the example explored to the examp		
Revenue		-	•	A), lines 3, 4, and 7d)			***************************************				
æ	11 Ot	her revenue	e (Part VIII, column (A), Iir	nes 5, 6d, 8c, 9c, 10c, and 11e).			***************************************			6,209.	
	12 To	tal revenue	e - add lines 8 through 11	(must equal Part VIII, column (A), line 12)		261,5	12.	5	94,436.	
	13 Gr	ants and si	milar amounts paid (Part I	X, column (A), lines 1-3)							
	14 Be	nefits paid	to or for members (Part I)	K, column (A), line 4)							
	15 Sa	laries, othe	er compensation, employee	e benefits (Part IX, column (A), li	nes 5-10)	***************************************					
Expenses	1		· -	column (A), line 11e)		Annexes contraction and the second					
en:											
Ä	1		sing expenses (Part IX, col		***		260 2	0.4	FOF 6F0		
	\$			nes 11a-11d, 11f-24e)			260,3			<u>85,659.</u>	
	į		•	equal Part IX, column (A), line 25	•		260,3		5	<u>85,659.</u>	
		venue less	expenses. Subtract line 13	8 from line 12			1,1			8,777.	
s or			and the second s			Beginnir	ng of Curren			f Year	
Net Assets o Fund Balance		•			* * * * * * * * * * * * * * *		2,8			<u>11,585.</u>	
ot A			s (Part X, line 26)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ,			0.		0.	
special property and				ne 21 from line 20			2,8	08.		11,585.	
Pa	rt II	<u>Signatur</u>	e Block								
Und	er penalties	of perjury, I de	eclare that I have examined this return (other than officer) is based on	urn, including accompanying schedules and all information of which preparer has any kr	statements, and to	the best of	my knowledge	e and belie	ef, it is true, c	orrect, and	
		Ta	arer (errer than errer) is sessed on	an information of whom propagator has any ki	701716 age:						
		P Cina a few	Z ZZ		***************************************		å	,			
Sig	_j n	Signatur	re of officer			Da					
He	re	>			***************************************	Treas	surer				
***************************************		-	print name and title.				T T T	T T T T T T T T T T T T T T T T T T T	F/A I		
		Print/Type pr	reparer's name	Preparer's signature	Date		Check	lif P	ΓIN		
Pai				Self-Prepared			self-employe	ed 🏻			
Pre	parer	Firm's name	>								
Us	e Only	Firm's addre	ss 🏲				Firm's EIN	>			
							Phone no.		413		
Мау	the IRS	discuss thi	s return with the preparer	shown above? (see instructions).					Yes	No	

Pai	Statement of Program Service Accomplishments	177
	Check if Schedule O contains a response to any question in this Part III	X
1	Briefly describe the organization's mission:	
	Operation Help a Hero is dedicated to the well-being and care of our American	
	military members, supporting military units and families during times of crisis,	
	deployment and need.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior	-
		No
	If 'Yes,' describe these new services on Schedule O.	
_		M.
3		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 expense Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocation	es.
	others, the total expenses, and revenue, if any, for each program service reported.	3 10
	, and the same transfer of the	
	(Code:) (Expenses \$ 371,528. including grants of \$) (Revenue \$	
4 8		<u> </u>
	Operation Rack Pack - Cleaned barracks and provided basic needs such as towels, soa	P '_
	toothpaste, bottled water, meal gift card for single young Marines returning from	
	overseas deployment. Four projects served 2300 individuals.	
	20 20 40 40 40 40 40 40 40 40 40 40 40 40 40	
4t	(Code:) (Expenses \$101,217. including grants of \$) (Revenue \$)
	Operation Christmas Spirit - Provided family Christmas gifts to families selected b	У
	their unit commanders because of need. 55 families served.	
	AND MAN AND MA	

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	with most wide wide to the course and t	
	AND VACE WAYD DATE AND DATE AN	
40	(Code:) (Expenses \$ 74,490. including grants of \$) (Revenue \$)
- 1	Operation Baby Shower - Provided basic baby needs such as diapers, blankets, bottle	
	and clothing to expectant mothers whose spouses were deployed overseas. Two	
	projects, 50 families served.	
	Otto Can Cahadala O	CAMPATRICE DISCONS
4 d	Other program services. (Describe in Schedule O.) See Schedule O	
	(Expenses \$ 29,885. including grants of \$) (Revenue \$)	
4 e	Total program service expenses ► 577,120.	***************************************

Form 990 (2011) OPERATION HELP A HERO 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	Х	
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		Х
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		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.		100	
i	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ı	b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		X
•	c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X
	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 the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		X
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.	12a		Х
å	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, XII, and XIII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
alked	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15	ALALA CALLA	Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		X
	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
	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		Χ
	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		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	- Indiana	X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2011) OPERATION HELP A HERO

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J.	23		Х
24	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		X
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	+	
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d	-	
25	a Section 501(c)(3) and 501(c)(4) 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		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	instructions for applicable filing thresholds, conditions, and exceptions):			
	a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28a	<u> </u>	X
	b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28b		Х
•	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ł	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		Х
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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38		Х
BAA		Form	gan /	2011)

Form **990** (2011)

Form 990 (2011) OPERATION HELP A HERO Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V.	· · · · ·	<u> </u>	Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. 1 a	0	86		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	12.5		E
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c		
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	0			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	\Box	2ь		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		1916	E 42	100
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	.	3a		Х
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule Q</i>	. [3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	. [4a		Х
b If 'Yes,' enter the name of the foreign country: ▶				
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			388	
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	·	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	. L	6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7 Organizations that may receive deductible contributions under section 170(c).		36	986	133
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		18		EDRO.
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		Χ
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	. [7f		Χ
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9 Sponsoring organizations maintaining donor advised funds.	38	1000	G185	1550
a Did the organization make any taxable distributions under section 4966?		9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10 Section 501(c)(7) organizations. Enter:	190			
a Initiation fees and capital contributions included on Part VIII, line 12			F 1	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			1	
11 Section 501(c)(12) organizations. Enter:	1	53 6		
a Gross income from members or shareholders		100		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).	101			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12	2a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			1	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	186	100	253	
a Is the organization licensed to issue qualified health plans in more than one state?	13	3a		
Note. See the instructions for additional information the organization must report on Schedule O.		3		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans				
c Enter the amount of reserves on hand	1836	100		100
14a Did the organization receive any payments for indoor tanning services during the tax year?		4a	-	<u>X</u>
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q	14	4b		

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 in Schedule O. See instructions.

The 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 of the governing body? 3 Did the organization become evere during the year of a significant diversion of the governing body? 4 A Did the organization become evere during the year of a significant diversion of the governing body? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders? 7 Did the corganization have members or stockholders? 8 Did the organization have members or stockholders? 9 Did the organization have members of stockholders? 10 Did the organization have members of stockholders? 11 Did the governing body? 12 Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 12 Did the organization ontemporaneously document the meetings held or written actions undertaken during the year by the following: 13 Did the governing body? 14 Did the organization ontemporaneously document the meetings held or written actions undertaken during the year by the following: 15 Disch committee with authority to act on borate of the governing body? 16 Each committee with authority to act on borate of the governing body? 17 Disch governing body? 18 Disch governing body? 19 Disch governing body? 10 Disch governing body? 10 Disch governing body? 11 Disch governing body? 12	Se	ection A. Governing Body and Management			
if there are material differences in voting rights among members of the governing body. If the governing body delegated broad authority to an executive committee or similar committee. explain in Schedule O. Enter the number of voting members included in line 1s, above, who are independent				Yes	No
b Enter the number of voting members included in line 1a, above, who are independent. Did any officer, director, tustes or key employee have a family relationship or a business relationship with any other officer, director, tustes, or key employee? 3	•	If there are material differences in voting rights among members			
2 Did the organization delegate control over management duties sustomarily performed by or under the direct supervision of offices, director, fursitee or five yearployee?. 3 Did the organization delegate control over management duties sustomarily performed by or under the direct supervision of offices, directors or trustees, or feey employees to a management company or other person?. 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders? 7 Did the organization have members or stockholders? 8 Did the organization have members or stockholders? 8 Did the organization have members or stockholders? 9 Did the organization have members or stockholders? 9 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more responsible, or other persons other than the governing body? 8 Did the organization confermporaneously document the meetings held or written actions undertaken during the year by the following. 8 Did the organization confermporaneously document the meetings held or written actions undertaken during the year by the following. 9 Is there any officer, director or furstee, or key employee listed in Part VII, Section A, who cannot be reached at the organization in senior address? If the Signization the arms sind addresses in Schedule O. 9 Is the organization have local chapters, branches, or affiliates? 10 Did the organization have local chapters, branches, or affiliates? 10 Did by the organization have local chapters, branches, or affiliates? 10 Did by the organization have organized process and procedure governing the devices of such chapters, affiliates, and branches to ensure their organization have organized to have a written process. 10 Did the organization have a written policy or procedure requiring the form? 11 Did the organization have a written whistlehlower policy?					
officer, director, trustee or key employee? 3	•				
of officers, directors or trustees, or key employees to a management company or other person?. 3		officer, director, trustee or key employee?	2		X
since the prior Form 990 was field?. 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 7 a Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 Are any governance decisions of the organization reserved to (or subject to approval by) members, 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization to ontemporaneously document the meetings held or written actions undertaken during the year by the following: 9 Is there any officer, director or furstee, or key employee listed in Part VIII, Section A, who cannot be reached at the organization or written or the same and addresses in Schedule O. 5 Section B. Policies (This Section B requests information about policies or required by the Internal Revenue Code.) 7 Yes No. 10 a Did the organization have local chapters, branches, or affiliates? 8 If Yes, include O the process, if any, used by the organization to review this Form 990. See Schedule O 12 Did the organization have aware conflict of interest policy? If No, yo to line 13. 13 Did the organization have aware the whistleblower policy? 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written whistleblower policy? 15 Did the organization have a written whistleblower policy? 16 Did the organization have a written whistleblower policy? 17 List the process for determining compensation of the following persons include a review and approval by independent persons, comparability data and contempora	3	of officers, directors or trustees, or key employees to a management company or other person?	3		Х
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII.

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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.

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

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

(A) Name and title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	(describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Cindy Farnum										
President	40	X		X				0.	0.	0.
(2) Kristen Lanham		**								
Chairman	2	Х		Χ				0.	0.	0.
_(3)_Wendy_Ruiz		*7		17				_	0	0
Vice President	2	Х		Χ				0.	0.	0.
_(4) Laura Hopper	2	37		37				0		0
Secretary	2	Χ		Χ				0.	0.	0.
_(5)_Michelle_Walters		37		3.7					0.	0.
Treasurer	2	X		Х				0.	υ.	<u> </u>
(6)_Sharon_Wackeen	0	Х						0.	0.	0.
Director Pahasak	U							V.	U.	V.
	0	Х						0.	0.	0.
Director Campball	U	Λ.						V.	V.	V.
_(8)_Cindy_Campbell	0	Х						0.	0.	0.
Director Driscall	U	Λ						<u> </u>	V.	V.
(9) Karen Driscoll	0	Х						0.	0.	0.
Director Garage	U	Δ.						U.	V.	<u> </u>
(10) Gina Heppy Director	0	Х						0.	0.	0.
(11) Michele Chenault	0							V.	V .]	V .
Director	0	Х						0.	0.	0.
(12) Bryan Winn	0							V .	V .	
Director	0	Х	***************************************					0.	0.	0.
		21						V.		
(13)	to a control of the c								Adapted	
(14)										

Part VII Section A. Officers, Directors, Trust	ees, l	Key	Em	ıplo	ye	es,	and	d Highest Con	pensated Em	ployees (cont)
	(C)									
(A) Name and title	(B) Average hours	age box, unless person is both a urs officer and a director/truste				is both	h an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (describ e hours for related organi- zations in	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensate employee	Former	the organization (W-2/1099-MISC)	related organization (W-2/1099-MISC)	s compensation from the organization and related organizations
(15)	Sch O)					fed.				
(16)										
<u>(17)</u>									***************************************	
(18)									***************************************	
(19)										
(20)										
(21)										
(22)	Management									
(24)	***************************************									
(25)										
1 b Sub-total	Α						A	0. 0. 0.	0 0	. 0.
2 Total number of individuals (including but not limited from the organization ▶ 0	d to the	se li	sted	l abo	ove)	who	rec	ceived more than	\$100,000 of repo	rtable compensation
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in 4 For any individual listed on line 1a, is the sum of repthe organization and related organizations greater th 	<i>idividua</i> oortable	al e coi	mpei	 nsat	ion	and	othe	er compensation f		Yes No
such individual	mpens	 satio	n fra	 om a	 anv i	unrel	 late	d organization or	individual	4 X
for services rendered to the organization? If 'Yes,' consection B. Independent Contractors	omplet	e Sc	hedi	ule .	J for	SUC	h pe	erson		
Complete this table for your five highest compensate compensation from the organization. Report compensation.	ed inde	pend for t	dent the c	con caler	itrac ndar	tors yea	that	t received more the	an \$100,000 of the organization	n's tax year.
Name and business address	3	MANAGAR CARCAGO	***************************************	***************************************	*******************************			(B) Description o	f services	(C) Compensation
		***************************************		**********	***************************************					
				***************************************		****	#			
2 Total number of independent contractors (including the \$100,000 in compensation from the organization ▶		limi	ted t	o th	ose	liste	d al	bove) who receive	d more than	

Ta Federated campaigns	512, 513, or 514
d Related organizations	
f All other contributions, gifts, grants, and	
similar amounts not included above 1f 588,227. g Noncash contributions included in Ins 1a-1f: \$ 535,914.	
Business Code C	
Ž 2a	
b	
C	
d	
¥ e	
f All other program service revenue	
g Total. Add lines 2a-2f▶	
3 Investment income (including dividends, interest and other similar amounts)	
5 Royalties.	
(i) Real (ii) Personal	
6a Gross rents	
b Less: rental expenses.	
c Rental income or (loss)	
d Net rental income or (loss)	Property of the Control of the Contr
assets other than inventory.	
b Less: cost or other basis and sales expenses	
d Net gain or (loss)	
of contributions reported on line 1c). See Part IV, line 18	
b Less: direct expenses	
c Net income or (loss) from fundraising events	6,209.
9a Gross income from garning activities. See Part IV, line 19	0,209.
b Less: direct expensesb	
c Net income or (loss) from gaming activities ▶	
10a Gross sales of inventory, less returns and allowances	
b Less: cost of goods sold b	
c Net income or (loss) from sales of inventory ▶	
Miscellaneous Revenue Business Code	
11a	
b	
c	
d All other revenue	
e Total. Add lines 11a-11d.	
12 Total revenue. See instructions. ► 594, 436. 0. 0.	6,209.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a response to any question in this Part IX								
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21								
2	Grants and other assistance to individuals in the United States. See Part IV, line 22			医					
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16								
4 5			0.	0.	0.				
6	0		0.	0.	0.				
7	Other salaries and wages								
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)								
9									
10									
11									
	a Management								
	a management								
	b Legal								
	c Accounting								
	d Lobbying								
	e Professional fundraising services. See Part IV, line 17		Licenson State Company	Salves en Language de la					
	f Investment management fees								
•	g Other								
12	Advertising and promotion								
13	Office expenses								
14									
15	Royalties								
16	Occupancy								
17									
18	Payments of travel or entertainment								
	expenses for any federal, state, or local public officials.								
	Conferences, conventions, and meetings				**				
	Interest				· · · · · · · · · · · · · · · · · · ·				
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	133.		133.					
23		2,067.	W/#=====	2,067.					
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.).								
a	OHH Projects	577,120.	577,120.						
	Storage Unit Rental	3,732.	0.,/±10.	3,732.					
	Supplies	1,046.		1,046.					
	Website Hosting and Maint	839.		839.					
	All other expenses	722.		722.					
	Total functional expenses. Add lines 1 through 24e.	585,659.	577,120.		^				
	· ·	303,033.	311,120.	8,539.	0.				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundaising solicitation.								
	Check here ► if following SOP 98-2 (ASC 958-720).								

Page **11**

					(A) Beginning of year		(B) End of year
T	1	Cash – non-interest-bearing			2,222.	1	11,132.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, director					
l	_	and highest compensated employees. Complete Part	II of S	chedule L		5	
	6	Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contrisponsoring organizations of section 501(c)(9) voluntar organizations (see instructions).	y emp	loyees' beneficiary		6	
Ą	7	Notes and loans receivable, net				7	
A S E T S	8	Inventories for sale or use		1		8	
Ī	9	Prepaid expenses and deferred charges		ř		9	
			1				
		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	662.			
	b	Less: accumulated depreciation	10b	209.	586.	10 c	453.
l	11	Investments — publicly traded securities				11	
-	12	Investments – other securities. See Part IV, line 11				12	
l	13	Investments - program-related. See Part IV, line 11.				13	
l	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line	34)		2,808.	16	11,585.
	17	Accounts payable and accrued expenses				17	
	18	Grants payable		ř		18	
	19	Deferred revenue		t t		19	
L.	20	Tax-exempt bond liabilities				20	
A B I	21	Escrow or custodial account liability. Complete Part I'				21	
L	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per of Schedule L	stees, sons.	key employees, Complete Part II		22	
. 1	23	Secured mortgages and notes payable to unrelated th	ird pa	ties		23	
Š	24	Unsecured notes and loans payable to unrelated third		· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	s to re olete F	lated third parties, Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25			0.	26	0.
N E		Organizations that follow SFAS 117, check here ▶	X ar	d complete lines			
F		27 through 29 and lines 33 and 34.					
A S	27	Unrestricted net assets			2,808.	27	11,585.
ANNIET-N	28	Temporarily restricted net assets				28	
3	29	Permanently restricted net assets		29			
O R		Organizations that do not follow SFAS 117, check he					
F		lines 30 through 34.					
FUND	30	Capital stock or trust principal, or current funds	apital stock or trust principal, or current funds				
1	31	Paid-in or capital surplus, or land, building, or equipm	ent fu	nd		31	
BALANGES	32	Retained earnings, endowment, accumulated income,				32	
N C	33	Total net assets or fund balances	,		2,808.	33	11,585.
		Total liabilities and net assets/fund balances		ī	2,808.	34	11,585.

BAA Form 990 (2011)

Part XI Reconciliation of Net Assets			
Check if Schedule O contains a response to any question in this Part XI.			. \Box
1 Total revenue (must equal Part VIII, column (A), line 12)	5	94,4	<u> 436.</u>
2 Total expenses (must equal Part IX, column (A), line 25)	5	85,6	<u> 559.</u>
3 Revenue less expenses. Subtract line 2 from line 1	^m^	8,7	777.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	····	2,8	308.
5 Other changes in net assets or fund balances (explain in Schedule O)			0.
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))		11,5	585.
Part XII Financial Statements and Reporting			
Check if Schedule O contains a response to any question in this Part XII.			
		Yes	No
1 Accounting method used to prepare the Form 990: X Cash Accrual Other	_	NE.	F
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a		Х
b Were the organization's financial statements audited by an independent accountant?	. 2b		Х
c 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?	. 2c		
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: Separate basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	. 3a		Х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			
BAA	Form	990 ((2011)

SCHEDULE A (Form 990 or 990-EZ)

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. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

OPERATION HELP A HERO 27-1438256 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 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 4 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 5 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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.) 7 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts X 9 from 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). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type II Type III - Functionally integrated C Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box... q Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization?..... 11 g (i) A family member of a person described in (i) above?..... 11 g (ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above?..... 11 g (iii) Provide the following information about the supported organization(s) (iii) Type of organization (described on lines 1-9 above or IRC section (i) Name of supported organization (ii) EIN (iv) Is the organization in column (i) listed in (v) Did you notify the organization in column (i) of (vi) Is the organization in column (i) (vii) Amount of support your governing document? organized in the U.S.? (see instructions)) your support? Yes No Yes No Yes (A) (B) (C) (D) (E) Total

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

(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	tion A. Public Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	Tax revenues levied for the organization'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						
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)						
6	Public support. Subtract line 5 from line 4						_
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 IV.)			20.0			
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	rities, etc (see ins	structions)				
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	or fifth tax year as	a section 501(c)(3) ► ∏
Sec	tion C. Computation of Pu	blic Support F	Percentage				
14	Public support percentage for 20	011 (line 6, colum	n (f) divided by lir	ne 11, column (f))	14	<u>%</u> %
	Public support percentage from						
	33-1/3% support test $-$ 2011. If and stop here. The organization	qualifies as a pu	blicly supported o	rganization		/1.1/\	
b	33-1/3% support test — 2010. If and stop here. The organization	the organization of qualifies as a pul	did not check a bo blicly supported o	ex on line 13 or 1 rganization	6a, and line 15 is	33-1/3% or more, o	check this box
1 7 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-:	and-circumstance:	s' test, check this	s box and stop he i	r e. Explain in Part i	IV how
Ŀ	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts- d-circumstances'	and-circumstance: test. The organiza	s' test, check this ation qualifies as	s box and stop he r a publicly support	r e. Explain in Part i ed organization	Now the
18		zation did not che	eck a box on line	13, 16a, 16b, 17a		is box and see inst hedule A (Form 99	
RΔΔ					Sc	nedule A (norm 99	ひ いこ フラひ・にん) とひまし

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
_	ndar year (or fiscal yr beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions and membership fees						
	received. (Do not include						
^	any 'unusual grants.')				261,512.	588,227.	849,739.
2	Gross receipts from admissions, merchandise sold or						
	services performed, or facilities						
	furnished in any activity that is						
	related to the organization's tax-exempt purpose						0.
3	• • •						V.
_	that are not an unrelated trade						
_	or business under section 513.				·····		0.
4	Tax revenues levied for the organization's benefit and						
	either paid to or expended on						
,	its behalf						0.
5	The value of services or facilities furnished by a						
	governmental unit to the		j				
	organization without charge			·			0.
6	Total. Add lines 1 through 5	0.	0.	0.	261,512.	588,227.	849,739.
7 :	Amounts included on lines 1, 2, and 3 received from						
	disqualified persons	0.	0.	0.	0.	0.	0.
1	Amounts included on lines 2						
	and 3 received from other than						
	disqualified persons that exceed the greater of \$5,000 or		ĺ				
	1% of the amount on line 13						
	for the year	0.	0.	0.	0.	0.	0.
	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support (Subtract line						0.40 700
500	7c from line 6.).` tion B. Total Support		5 8 8 8 8 8 8 8 E				849,739.
				T	(th. 004.6	() 0011 J	
	dar year (or fiscal yr beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	(a) 2007 0.	(b) 2008	(c) 2009 0.	261,512.	588,227.	(1) Total 849,739.
9	Amounts from line 6		***************************************				
9	Amounts from line 6		***************************************				
9	Amounts from line 6		***************************************				849,739.
9 10 a	Amounts from line 6		***************************************				
9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511		***************************************				849,739.
9 10 a	Amounts from line 6		***************************************				849,739.
9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0.	0.	0.	261,512.	588,227.	0.
9 10 a k	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b		***************************************				849,739.
9 10 a k	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	0.	0.	0.	261,512.	588,227.	0.
9 10 a k	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is	0.	0.	0.	261,512.	588,227.	0. 0.
9 10 a b	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.	0.	0.	0.	261,512.	588,227.	0.
9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of	0.	0.	0.	261,512.	588,227.	0. 0.
9 10 a b	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in 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	0.	0.	0.	261,512.	588,227.	0. 0. 0.
9 10 a 11	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in 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 IV.)	0.	0.	0.	261,512.	0.	0. 0. 0.
9 10 a 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in 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 IV.). Total support. (Add Ins 9, 10c, 11, and 12.)	0.	0.	0.	261,512.	588,227. 0.	0. 0. 0. 0.
9 10 a 11	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in 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 IV.). Total support. (Add Ins 9, 10c, 11, and 12.)	0. 0.	0. 0. tion's first second	O. O.	261,512.	588,227. 588,227.	0. 0. 0. 0. 0. 849,739.
9 10 a 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in 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 IV.). Total support. (Add Ins 9, 10c, 11, and 12.)	0. 0. is for the organiza stop here	0. 0. tion's first, second	O. O.	261,512.	588,227. 588,227.	0. 0. 0. 0. 0. 849,739.
9 10 a 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in 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 IV.). Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Put	0. 0. is for the organiza stop here.	0. 0. tion's first, second	O. O.	261,512. 0. 261,512. fifth tax year as	588,227. 0. 588,227. a section 501(c)(3	0. 0. 0. 0. 0. 849,739.
9 10 a 11 12 13 14 Sec 15	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in 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 IV.) Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Put	0. 0. is for the organiza stop here. Dlic Support Pe	0. 0. tion's first, second	0. 0. d, third, fourth, or	261,512. 0. 261,512. fifth tax year as	588,227. 0. 588,227. a section 501(c)(3	0. 0. 0. 0. 0. 849,739.
9 10 a 11 12 13 14 Sec 15 16	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in 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 IV.). Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Public support percentage from 20 Public support percentage from 2	0. is for the organiza stop here plic Support Pe 11 (line 8, column	0. tion's first, second ercentage (f) divided by line Part III, line 15	0. 0. d, third, fourth, or	261,512. 0. 261,512. fifth tax year as	588,227. 0. 588,227. a section 501(c)(3	0. 0. 0. 0. 0. 849,739.
9 10 a 11 12 13 14 Sec 15 16 Sec	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in 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 IV.) Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Public support percentage for 20 Public support percentage from 2 tion D. Computation of Invetors	0. is for the organiza stop here. Dlic Support Per stop line 8, column 2010 Schedule A, sestment Incom	0. tion's first, second ercentage (f) divided by line Part III, line 15	0. 0. d, third, fourth, or	261,512. 0. 261,512. fifth tax year as	588,227. 0. 588,227. a section 501(c)(3	0. 0. 0. 0. 0. 849,739. 1. ► X
9 10 a 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in 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 IV.). Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage for 20. Public support percentage from 2 tion D. Computation of Inveloves the support in the support percentage for Investment income percentage for 20.	0. o. s for the organiza stop here	0. 0. tion's first, second creentage (f) divided by line Part III, line 15 Percentage column (f) divided	0. 0. 1, third, fourth, or 13, column (f)).	261,512. 0. 261,512. fifth tax year as	588,227. 0. 588,227. a section 501(c)(3	0. 0. 0. 0. 0. 849,739. 1
9 10 a 11 12 13 14 Sec 15 16 Sec 17 18	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in 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 IV.) Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for Investment Income Inv	0. is for the organiza stop here Dic Support Pere 11 (line 8, column 2010 Schedule A, organiza stop here) 2011 (line 10c, organiza stop here) or 2011 (line 10c, organiza stop here) organization stop here)	0. tion's first, second accordance (f) divided by line Percentage column (f) divided by A, Part III, line 1	0. 0. 1, third, fourth, or 13, column (f)).	261,512. 0. 261,512. fifth tax year as	588,227. 0. 588,227. a section 501(c)(3	0. 0. 0. 0. 0. 849,739. X
9 10 a 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in 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 IV.). Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage for 20: Public support percentage from 2 tion D. Computation of Investment income percentage from 33-1/3% support tests — 2011. If is not more than 33-1/3%, check	0. is for the organiza stop here	0. tion's first, second crcentage (f) divided by line Part III, line 15 e Percentage column (f) divided e A, Part III, line 1 lid not check the bene. The organize	0. 0. 1, third, fourth, or 13, column (f)). by line 13, column 7	261,512. 0. 261,512. fifth tax year as an of the second	588, 227. 0. 588, 227. a section 501(c)(3) 15 16 17 18 than 33-1/3%, an rted organization.	0. 0. 0. 0. 0. 849,739. X] X] 3 8 4
9 10 a 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in 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 IV.). Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage for 20: Public support percentage from 2 tion D. Computation of Investment income percentage from 33-1/3% support tests — 2011, If	0. is for the organiza stop here	0. tion's first, second crcentage (f) divided by line Part III, line 15 e Percentage column (f) divided e A, Part III, line 1 lid not check the bene. The organize	0. 0. 1, third, fourth, or 13, column (f)). by line 13, column 7	261,512. 0. 261,512. fifth tax year as an of the second	588, 227. 0. 588, 227. a section 501(c)(3) 15 16 17 18 than 33-1/3%, an rted organization.	0. 0. 0. 0. 0. 849,739. X] X] 3 8 4

Schedule A (Form 990 or 990-EZ) 2011 OPERATION HELP A HERO	27-1438256	Page 4
Part IV Supplemental Information. Complete this part to provide the explanations repart II, line 17a or 17b; and Part III, line 12. Also complete this part for any (See instructions).	equired by Part II, additional informa	line 10; ation.
	COME SEASON SEAS	
	MANN SAME MANN MANN SAME WARD WARD WARD COME COME	CONTROL SECURIO ASSESSIO ASSESSIO SECURIO MARTINO PARILLA BANCA
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No. 1545-0047

2011

Name of the organization		Employer identification number				
OPERATION HELP A HERO		27-1438256				
Organization type (check one):						
Filers of:	Section:					
Form 990 or 990-EZ	X = 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as	a private foundation				
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a p	rivate foundation				
	501(c)(3) taxable private foundation					
Check if your organization is covered by the Go Note. Only a section 501(c)(7), (8), or (10) organization	eneral Rule or a Special Rule. anization can check boxes for both the General Rule and a	a Special Rule. See instructions.				
		•				
General Rule						
X For an organization filing Form 990, 990-E2 contributor. (Complete Parts I and II.)	, or 990-PF that received, during the year, \$5,000 or more	e (in money or property) from any one				
Special Rules						
509(a)(1) and 1/0(b)(1)(A)(vi), and received	orm 990 or 990-EZ that met the 33-1/3% support test of the from any one contributor, during the year, a contribution VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I	of the greater of (1) \$5,000 or				
For a section 501(c)(7), (8), or (10) organiz total contributions of more than \$1,000 for the prevention of cruelty to children or anim	ation filing Form 990 or 990-EZ that received from any one use <i>exclusively</i> for religious, charitable, scientific, literary, nals. Complete Parts I, II, and III.	e contributor, during the year, or educational purposes, or				
If this box is checked, enter here the total courses. Do not complete any of the parts is	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc, purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc, purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively					
religious, charitable, etc, contributions of \$5	5,000 or more during the year	> \$				
Caution: An organization that is not covered by 990-PF) but it must answer 'No' on Part IV, line Form 990-PF, to certify that it does not meet the	the General Rule and/or the Special Rules does not file Se 2, of its Form 990; or check the box on line H of its Form e filing requirements of Schedule B (Form 990, 990-EZ, or	ichedule B (Form 990, 990-EZ, or n 990-EZ or on Part I, line 2, of its r 990-PF).				
BAA For Paperwork Reduction Act Notice, se 990EZ, or 990-PF.	e the Instructions for Form 990, Schedule	e B (Form 990, 990-EZ, or 990-PF) (2011)				

1 of **Part 1**

Name of organization
OPERATION HELP A HERO

Employer identification number

27-1438256

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	space is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Clerc Trust - Fidelity Charitable PO Box 77001 Cincinnati, OH 45277-0053	\$ <u>5,000</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Sunwest Bank 17542 E. 17th Street Tustin, CA 92780	\$ <u>5,000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page

1 to

1 of Part II

Name of organization
OPERATION HELP A HERO

Employer identification number

27-1438256

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	(d) Date received
N/A			
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			Validadi Adalah
		\$	

Name of organization
OPERATION HELP A HERO

1 to

Employer identification number 27-1438256 Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete cols (a) through (e) and the following line

	For organizations completing Part III, ente contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	r total of <i>exclusively</i> religious, cl c. (Enter this information once. S ll space is needed.	naritable, etc See instructio	, ns.)▶\$
(a) o. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	N/A			
		(e)		
	Transferee's name, addre	Transfer of gift	Rela	ationship of transferor to transferee
(a)	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Part I				3,
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee
(a) o. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer of gift		
	Transferee's name, addres	ss, and ZIP + 4	Rela	tionship of transferor to transferee
(a) . from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e)		
	Transferee's name, addres	Transfer of gift	Rela	tionship of transferor to transferee
and the second				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization **Supplemental Financial Statements**

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions. OMB No. 1545-0047

2011

Open to Public Inspection

OP	ERATION HELP A HERO			27-1438256
Pa	rt I Organizations Maintaining Donoi	Advised Funds or Oth	er Similar Funds	or Accounts. Complete if
	the organization answered 'Yes' to	ว Form 990, Part IV, Iin	e 6.	•
		(a) Donor advised	funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	•			
4				
5	Did the organization inform all donors and dor funds are the organization's property, subject	or advisors in writing that the	e assets held in donor e legal control?	advised Yes No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for t purpose conferring impermissible private bene	he benefit of the donor or do	nor advisor, or for any	, other
Pa	rt II Conservation Easements. Comple	ete if the organization a	nswered 'Yes' to f	Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by			
	Preservation of land for public use (e.g., re	ecreation or education)	Preservation of an	historically important land area
	Protection of natural habitat	,		certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization last day of the tax year.	on held a qualified conservation	on contribution in the	form of a conservation easement on the
				Held at the End of the Tax Year
	a Total number of conservation easements			2a
1	b Total acreage restricted by conservation easen	nents		2b
•	Number of conservation easements on a certification	ed historic structure included	l in (a)	2c
(d Number of conservation easements included in structure listed in the National Register	(c) acquired after 8/17/06, a	nd not on a historic	2d
3	Number of conservation easements modified, t tax year ►			
4	Number of states where property subject to cor	nservation easement is locate	ed ►	
5	Does the organization have a written policy regand enforcement of the conservation easement			g of violations, Yes No
6	Staff and volunteer hours devoted to monitoring			
7	Amount of expenses incurred in monitoring, ins	specting, and enforcing conse	ervation easements du	iring the year
. 8	Does each conservation easement reported on 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the re	equirements of section	Yes No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote to conservation easements.	conservation easements in its root the organization's financial	revenue and expense st statements that descri	atement, and balance sheet, and bes the organization's accounting for
Par	t III Organizations Maintaining Collection Complete if the organization answ	tions of Art, Historical rered 'Yes' to Form 990	Treasures, or Oth , Part IV, line 8.	er Similar Assets.
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finance	held for nublic exhibition, ed-	ucation or research in	statement and balance sheet works of a furtherance of public service, provide,
b	If the organization elected, as permitted under historical treasures, or other similar assets held following amounts relating to these items:			
	(i) Revenues included in Form 990, Part VIII, I	ine 1		
	(ii) Assets included in Form 990, Part X			
	If the organization received or held works of art amounts required to be reported under SFAS 1	, historical treasures, or othe 16 (ASC 958) relating to thes	r similar assets for fin	ancial gain, provide the following
а	Revenues included in Form 990, Part VIII, line	·		* \$
b	Assets included in Form 990, Part X			× \$

Part III Organizations Mainta	ining Collection	ons of Art, Hist	<u>orical Treasures, c</u>	or Other Similar A	issets (c	<u>continu</u>	леd)
3 Using the organization's acquisit items (check all that apply):	ion, accession, ar	nd other records, ch	neck any of the followir	ng that are a significar	nt use of if	ts colle	ction
a Public exhibition		d ☐ Loan	or exchange programs				
b Scholarly research		—					
	rations	e [Other					
c Preservation for future gener							
4 Provide a description of the orga Part XIV.	inization's collecti	ons and explain no	w they further the orga	ınızatıon's exempt pur	pose in		
5 During the year, did the organiza assets to be sold to raise funds it	rather than to be i	maintained as part	of the organization's co	ollection?			No
Part IV Escrow and Custodia line 9, or reported an	I Arrangemen amount on Fo	ts. Complete if rm 990, Part X,	the organization at line 21.	nswered 'Yes' to F	orm 990	0, Par	t IV,
1 a Is the organization an agent, trus	stee, custodian, o	r other intermediary	y for contributions or of	ther assets not			
included on Form 990, Part X?					. Yes	. [No
b If 'Yes,' explain the arrangement	in Part XIV and o	complete the follow	ing table:	<u> </u>			
					Amoun	ıt	
c Beginning balance							
d Additions during the year							
e Distributions during the year							
f Ending balance							
2a Did the organization include an a		90, Part X, line 213	?		. Yes	· L	No
b If 'Yes,' explain the arrangement							
Part V Endowment Funds. Co		organization ans	swered 'Yes' to Fo	<u>rm 990, Part IV, I</u>	<u>ine 10.</u>		
	(a) Current year	(b) Prior yea	r (c) Two years bad	ck (d) Three years ba	ck (e)	Four year	s back
1 a Beginning of year balance					60/60	1000	
b Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships						3/18 0	September 1
e Other expenditures for facilities and programs							
f Administrative expenses					Maga		TO THE REAL
g End of year balance					1000	NOON	
2 Provide the estimated percentage	of the current ve	ear end balance (lin	ne 1g. column (a)) held	as:			
a Board designated or quasi-endow	-	9	, , , , , , , , , , , , , , , , , , ,				
b Permanent endowment ►	%						
c Temporarily restricted endowmen		%					
The percentages in lines 2a, 2b, a							
	•						
3a Are there endowment funds not in organization by:	1 the possession	of the organization	that are held and adm	inistered for the	Г	Yes	No
(i) unrelated organizations					3a(i)	163	140
(ii). related organizations					- · · · · · · · · · · · · · · · · · · ·		
b If 'Yes' to 3a(ii), are the related o							
4 Describe in Part XIV the intended					3b		
Part VI Land, Buildings, and E							
Description of property		cost or other basis	(b) Cost or other	(c) Accumulated	(4) [Zooli vo	
Description of property	(a) C	(investment)	basis (other)	depreciation	(0)	Book va	lue
1a Land							
b Buildings					1		
c Leasehold improvements					1		
d Equipment)				1		
e Other	· · · · · · · · · · · · · · · · · · ·		662.	209.			453.
Total. Add lines 1a through 1e. (Columi		Form 990, Part X o					453.
ВАА		, , . , .	, , , , , , , , , , , , , , , , , , , ,		edule D (F	orm 99	

	vestments - Other Securities. See	<u>ronn 990, Part A, </u>	line 12. N/A
(a) D	escription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial de			•
(2) Closely-held	l equity interests		
(3) Other			
(G) (H)			
(l)			
	must equal Form 990 Part X, column (B) line 12.)		
	estments – Program Related. See	Form 990, Part X.	line 13. N/A
	Description of investment type	(b) Book value	(c) Method of valuation:
			Cost or end-of-year market value
(1)			
(2)	······································		
(3)			
(4)			
(5) (6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) n	nust equal Form 990, Part X, column (B) line 13.) 🕨		
Part IX Oth	ner Assets. See Form 990, Part X, I	ine 15. N/A	
	(a) Des	scription	(b) Book value
	······································		
(2)			
(3)			
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(3) (4) (5) (6) (7) (8) (9) (10) Total. (Column	(b) must equal Form 990, Part X, column (B er Liabilities. See Form 990, Part)		
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(3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X Oth	er Liabilities. See Form 990, Part >	(, line 25.	
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X Oth (1) Federal inc. (2)	er Liabilities. See Form 990, Part >	(, line 25.	
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2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Sche	edule D (Form 990) 2011 OPERATION HELP A HERO	2	17-1438256	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financia	al Statements	N/A	
1	Total revenue (Form 990, Part VIII, column (A), line 12).			
2	Total expenses (Form 990, Part IX, column (A), line 25)			
3	Excess or (deficit) for the year. Subtract line 2 from line 1			
4	Net unrealized gains (losses) on investments.			
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments		,	
8	Other (Describe in Part XIV.)			
9	Total adjustments (net). Add lines 4 through 8	· · · · · · · · · · · · · · · · · · ·		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a	and 9		
Par	t XII Reconciliation of Revenue per Audited Financial Statements	With Revenue per R	Return N/A	
1	Total revenue, gains, and other support per audited financial statements		. 1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	100	
С	Recoveries of prior year grants	2c	1966	
d	Other (Describe in Part XIV.)	2d		
е	Add lines 2a through 2d.		. 2e	
	Subtract line 2e from line 1		. 3	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIV.).	4b		
	Add lines 4a and 4b		. 4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
	XIII Reconciliation of Expenses per Audited Financial Statemen			
	Total expenses and losses per audited financial statements			
	Amounts included on line 1 but not on Form 990, Part IX, line 25:		建	
	Donated services and use of facilities	2a		
	Prior year adjustments.	2b		
	_	2c		
		2d	-	
	Add lines 2a through 2d .		. 2e	
	Subtract line 2e from line 1		3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1	- 3	
	Investment expenses not included on Form 990, Part VIII, line 7b.	42		
	Other (Describe in Part XIV.).	4a 4b	- 1223	
	Add lines 4a and 4b		. 4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			
	XIV Supplemental Information		<u>.1 9 1 </u>	
²art \	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part /, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, line dditional information.	s 2d and 4b. Also complet	te this part to pro	víde
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Schedule D (Form 990) 2011	OPERATION HELP A HERO	27-1438256	Page 5
Part XIV Supplemental	OPERATION HELP A HERO Information (continued)		
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2011

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number OPERATION HELP A HERO 27-1438256 Part I Types of Property

		(a)	(b)	(c)	(d)
		Check if applicable	Number of contributions or items contributed	Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of determining noncash contribution amounts
1	Art — Works of art			rait viii, iiile ig	
2	Art — Historical treasures	***************************************			
3	Art – Fractional interests				
4	Books and publications				
5	Clothing and household goods.	X		530 358	Retail Value
6	Cars and other vehicles	71		330,336.	Wergii Agide
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.				
			W. M		
13	Qualified conservation contribution — Historic structures				
14	Qualified conservation contribution — Other				
15	Real estate – Residential				
16	Real estate – Commercial				
17	Real estate – Other		****		
18	Collectibles				
19	Food inventory			***************************************	
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts	***************************************			
25	Other ▶ ()				
26	Other ▶ ()				
27	Other ▶ ()				
28	Other ▶ ()				
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Dones	n during the	e tax year for contribution	ons for which the	29
		. , , , , , , , , , , , , , , , , , , ,			Yes No
30 a	During the year, did the organization receive by co	ntribution a	ny nronerty renorted in	Part I lines 1.28 that i	
	hold for at least three years from the date of the ir purposes for the entire holding period?	itial contrib	ution, and which is not	required to be used for	exempt 30a X
b	If 'Yes,' describe the arrangement in Part II.				
31	Does the organization have a gift acceptance police	y that requi	res the review of any no	on-standard contributio	ns? 31 X
32a	Does the organization hire or use third parties or renoncash contributions?				32a X
b	If 'Yes,' describe in Part II.				
	If the organization did not report an amount in colu	ımn (c) for a	a type of property for w	hich column (a) is ched	cked.
	describe in Part II.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	3. 1 Francisco	(0)	

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

Schedule M (Form 990) 2011

Schedule	M (Form 990) 2011	OPERATION	HELP A	HERO				27-1438256	Page 2
Part II	Supplemental I and 33, and when number of items	nformation. Co ether the orgar	mplete ti nization is	his part to pi s reporting in	rovide tl n Part I,	ne informa column (b	ition required b), the numb	l by Part I, lines er of contribution	30h 32h
	number of items	s received, or a	a combina	ation of both	n. Also c	omplete ti	nis part for a	ny additional inf	ormation.
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2011

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization	Employer identification number
OPERATION HELP A HERO	27-1438256
Form 990, Part III, Line 4d - Other Program Services Description	
Operation Enduring Support - Provided emergency support to m	ilitary personnel for
specific needs in times of crises such as death/funerals, il	lness, fire vicitms.
Operation Bedtime Story - Recorded military parents reading a	a childrens book to his
children; mailed book, recording and personalized message to	the family upon the
spouse_leaving_for_overseas_deployment. Two projects, 172_fa	amilies served.
Operation Help a Hero Miscellaneous Projects - Participated	n Patriot's Day with
the_City_of_Rancho_Santa_Margarita,_Grocery_Store_Drives,_and	d other miscellaneous
projects to support Operation Help a Hero's mission.	
Form 990, Part VI, Line 11b - Form 990 Review Process	
No review was or will be conducted.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
No documents available to the public.	
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