May 11, 2023

Operation Homefront P.O. Box 650052 Sterling, VA 20165

Dear Brig Gen John I. Pray Jr. at Operation Homefront,

Hello, My name is Cannon Hritz, and I am a 21 year old, third-year college student at the University of Colorado-Colorado Springs. I am writing to express my interest in securing funding for your organization: Operation Homefront.

The reason I picked your agency for this grant proposal is because of my grandfather. He was a part of the Air Force during World War II, and he was always someone I looked up to before he passed. This prodded me and my friends to create a non-profit called Serving Servicemen which helps local veterans with day to day activities including but not limited to, landscaping, painting, and event help. As I am making a impact in my hometown of Saint Louis, Missouri, I wanted to make an impact in the country as well.

As you are well aware, Operation Homefront has been at the forefront of helping change veterans lives for the past 20 years. This work has been recognized by multiple big-name corporations like Home Depot and Walmart and has made a relevant impact in the community. However, I want to help expand Operation Homefront's reach and enhance the impact, and to do that, Operation Homefront needs additional resources towards key programs including the Critical Assistance program and housing programs. This is where your funder that I have chosen, Veterans United Foundation (VUF), comes into play. VUF is a key part of Missouri's veteran help program and has surpassed 100 million in donations towards the veteran community. These programs can be considered a win-win for both you and the funder, because of the fact that you both support housing projects and financial aid for veterans.

Thank you for everything you do, and I hope you can agree that this funder is the right fit for the organization.

Sincerely, Cannon Hritz <u>chritz@uccs.edu</u> Dear Veterans United Foundation,

On behalf of Operation Homefront, I am writing to submit our proposal for funding consideration. We are grateful for the opportunity to apply for support from Veterans United Foundation as we share a common goal of serving military families and veterans.

Operation Homefront is a national nonprofit organization that provides emergency financial assistance, transitional and permanent housing, caregiver support, and other critical services to military families and wounded warriors. Our programs are designed to address the unique challenges that military families face, including frequent moves, deployments, and the physical and emotional toll of service inside the military.

We are seeking funding from Veterans United Foundation to support our Critical Financial Assistance program as well as our housing programs. The Critical Financial Assistance program provides emergency financial assistance to military families in need. The program assists with expenses such as rent, utilities, vehicle repair, and other essential costs that can be difficult to manage on a military salary. Last year, our assistance program provided over \$5 million in financial assistance to more than 3,600 military families.

Operation Homefront believes that our programs align with the mission of Veterans United Foundation and would greatly benefit from your support. We look forward to the opportunity to discuss our proposal further and answer any questions that you may have. Thank you for your consideration.

Sincerely, Operation Homefront.

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#### Legal Name of Organization:

Operation Homefront
DBA (if applicable):

Mailing Address (and Physical Address if it is different and not confidential):

	entral Parkway S Suite 100 tonio, TX 78232	)			
Phone:	(210) 659-7756	Fax: (2	210) 566-7544	EIN:	32-0033325
Website	https://operationhomefr	ont.org/			
Organiz	ation Email Address: in	fo@operati	onhomefront.org		
Name of	<b>CEO or Executive Direct</b>	or: John	n Pray		
Phone:	(210) 659-7756	Email:	jpray@operationhom	efront.ne	t
Applicat	ion Contact & Title (if no	t the CEO of	or Executive Director):		

Phone:	Email:	

### **Organization Information**

2002

Year Founded:

**Mission Statement:** 

Build strong, stable, and secure military families so they can thrive—not simply struggle to get by in the communities that they've worked so hard to protect. A key aspect of our mission is to ensure that military families have access to the support and resources they need to stay strong, stable, and secure in the face of adversity. As a military family support organization, we strive to provide respect and understanding to our military families while ensuring that all families in need of assistance receive it.

Geographic Area Served (specific to this proposal):

Operation Homefront serves the entire country of the United States, with its main/major contributions being in Texas, Missouri, and Florida.

**Tax Exemption Status:** 

	501(c)(3) Using a fiscal agent/fiscal sponsor
	Name of fiscal agent/sponsor:
	Other than 501(c)(3), describe:
Numb	er of Employees: Full-time: 200-250 Part-time: 500+

### **Grant Request Information**

Type	of Grant Requested (select one): General Operating Support	Amount of Request:	\$100,000 (over 1 year)
	Program or Project Support Name of Program or Project:		
	Capital Request (Check with the gran	tmaker as to whether they prefer the	e CGA-Capital)
	Other		

#### Describe what the grant will be used for:

housing and critical financial aid programs.

**Financial Information** Budget numbers should match the numbers presented in Attachments 1(a) & (b).

Organizat	tion's Current Budg	et for Fiscal Year 1 –	Ending: 12/.	31/2021	
Income:	46M	Expenses:	44.4M		
AND, if o	ther than a general o	operating request,			
Program	or Project Budget:	\$100,000	Dates: from:	7/1/2023	<b>to</b> : 7/1/2024
Income:		Expenses:			

By signing below, I certify that the information contained in this application is true and correct to the best of my knowledge.

<b>CEO/Executive</b>	Director
----------------------	----------

#### Narrative

#### 1. Organization Background

Operation Homefront is a national nonprofit organization that provides financial assistance, transitional housing, and other essential support to military families and wounded warriors. The organization was founded in 2002 by military spouses who wanted to support the families of deployed service members during the post-9/11 era. Over the years, Operation Homefront has expanded its mission to serve the broader military community, including veterans and their families. Today, the organization operates in all 50 states and has provided over \$30 million in assistance to more than 20,000 military families.

One of the key programs of Operation Homefront is its Emergency Assistance Program, which provides financial assistance to military families in crisis. This program can help with a range of expenses, from rent and utilities to car repairs and emergency travel. In addition, Operation Homefront operates transitional housing programs for military families who are experiencing homelessness or at risk of becoming homeless. These programs provide temporary housing and support services to help families get back on their feet. In general, Operation Homefront is committed to serving those who have served our country and ensuring that military families have the support they need to thrive.

#### 2. Goals

The primary goal of Operation Homefront is to provide critical assistance and support to military families and wounded warriors. The organization recognizes the unique challenges faced by military families, including frequent deployments, relocations, and financial strain. Operation Homefront aims to alleviate some of these burdens by providing financial assistance, transitional housing, and other support services. The organization also seeks to raise awareness of the

challenges faced by military families and to advocate for policies that support the military community.

Another important goal of Operation Homefront is to build strong, resilient military families. The organization offers a range of programs and resources designed to help military families flourish, including financial education, career counseling, and mentorship programs. By providing these services, Operation Homefront aims to empower military families to achieve their goals and to build a bright future for themselves and their communities. Overall, the organization is committed to strengthening the military community and ensuring that military families receive the support they need to succeed.

#### **3.** Current Programs

Operation Homefront offers a range of programs and services to support military families and wounded warriors. One of the organization's primary programs is its Emergency Assistance Program, which provides financial assistance to military families in crisis. This program can help with a variety of expenses, including rent, utilities, car repairs, emergency travel, and more. Operation Homefront also operates transitional housing programs for military families who are experiencing homelessness or at risk of becoming homeless. These programs provide temporary housing and support services to help families get back on their feet.

In addition to its emergency and housing programs, Operation Homefront offers a variety of other services to support military families. The organization's Hearts of Valor program provides support to caregivers of wounded warriors, including emotional support, resources, and peer-topeer networking. Operation Homefront also offers financial education and counseling services to help military families achieve financial stability. Finally, the organization operates a variety of morale-boosting programs, such as holiday toy distributions and back-to-school supply drives, to

help military families feel appreciated and supported. Overall, Operation Homefront is dedicated to providing a wide range of programs and services to help military families overcome challenges and build strong, resilient lives.

#### 5. Evaluation

Operation Homefront has a rigorous approach to program evaluation that is designed to measure the impact of its programs and services on the military community. The organization uses a combination of quantitative and qualitative methods to collect data on program outcomes and to gather feedback from program participants and other stakeholders.

One of the ways that Operation Homefront measures impact is by setting specific, measurable goals for each of its programs. The organization tracks progress toward these goals over time, and it uses this data to evaluate the effectiveness of its programs and to identify areas for improvement. Additionally, Operation Homefront collects qualitative data on program impact through surveys, focus groups, and other feedback mechanisms. This data is used to gain a better understanding of how the organization's programs are affecting the lives of military families and wounded warriors.

Some key evaluation results from Operation Homefront's programs include:

- The organization's Critical Financial Assistance program provided over \$5 million in financial assistance to more than 3,600 military families in 2020.
- Operation Homefront's Homes on the Homefront program has helped more than 700 military families achieve the dream of homeownership since its inception in 2012.
- The Hearts of Valor program, which provides support to caregivers of wounded warriors, has served more than 5,000 individuals since its launch in 2010.

Overall, Operation Homefront's approach to evaluation is designed to ensure that its programs and services are making a meaningful impact on the lives of military families and wounded warriors. The organization is committed to using data and feedback to continuously improve its programs and to ensure that it is meeting the evolving needs of the military community.

#### 6. Collaboration

Operation Homefront has a long history of collaborating with other organizations to support military families and wounded warriors. One notable partnership is with the National Military Family Association, which helps to fund Operation Homefront's Critical Financial Assistance Program. This program provides emergency financial assistance to military families facing unexpected expenses. Operation Homefront has also worked closely with the Gary Sinise Foundation, which provides support to military families and first responders. The two organizations have collaborated on a variety of initiatives, including providing custom-built smart homes to severely wounded veterans.

In addition to these partnerships, Operation Homefront has also engaged in a variety of efforts to support the military community. One remarkable example is the organization's annual Back-to-School Brigade program, which provides backpacks and school supplies to military children. Operation Homefront partners with a variety of organizations, including Dollar Tree and other corporate sponsors, to collect and distribute these supplies to military families across the country. Another important effort is the Homes on the Homefront program, which provides mortgage-free homes to veterans and their families. Through this program, Operation Homefront has partnered with numerous organizations, including JPMorgan Chase, to donate homes to

deserving veterans. Overall, Operation Homefront's partnerships and collaborations have been instrumental in supporting military families and wounded warriors across the country.

#### 7. Inclusiveness

Operation Homefront strives for inclusiveness within their workplace. Operation Homefront's website states that it is committed to "promoting a culture of inclusion, diversity, and equity where everyone is valued and respected." Operation Homefront recognizes that the military community is diverse and that military families come from all backgrounds and walks of life. The organization is committed to providing equal opportunities and support to all military families, regardless of race, ethnicity, gender identity, sexual orientation, or any other characteristic.

In addition to its commitment to inclusiveness, Operation Homefront also strives to provide culturally competent services to the military community. The organization's staff and volunteers receive training on cultural competency and diversity issues, which helps them to better understand and serve the diverse needs of military families. Overall, Operation Homefront is committed to ensuring that all military families feel welcome and supported, and to promoting a culture of inclusiveness and respect.

#### 8. Board/Governance

The board of directors plays a critical role in advancing the mission of Operation Homefront. The board provides oversight and guidance to the organization's leadership team, sets strategic priorities, and ensures that the organization is fulfilling its mission and meeting the needs of the military community. The board is also responsible for ensuring that the organization is financially sound and that its resources are being used effectively.

Key issues related to board effectiveness that Operation Homefront is addressing this year include improving communication and collaboration between the board and the organization's leadership team, enhancing board member engagement and involvement, and ensuring that the board is fully representative of the military community that the organization serves.

Operation Homefront has a policy of rotating board terms to ensure that there is turnover and fresh perspectives on the board. Board members serve three-year terms, and they can be reelected for up to three consecutive terms before being required to take a one-year break before being considered for re-election.

Finally, Operation Homefront reports that 100% of its board members make financial contributions to the organization. This demonstrates the board's commitment to the organization's mission and helps to set an example for other donors and Supporters.

#### 9. Volunteers

Operation Homefront relies heavily on the support of volunteers and unpaid personnel to carry out its mission. According to the organization's website, it typically involves thousands of volunteers in its programs and services each year. The number of volunteers and hours worked varies from year to year, depending on the needs of the organization and the availability of volunteers.

Operation Homefront's volunteers and unpaid personnel come from a variety of backgrounds and include military veterans, military spouses, and civilians who are passionate about supporting the military community. These individuals serve in a variety of roles, including event coordinators, fundraising volunteers, program assistants, and administrative support staff.

The organization tracks volunteer hours and reports that volunteers contributed over 290,000 hours in support of Operation Homefront's mission in 2020 alone. These hours were valued at over \$7 million dollars in in-kind contributions. The organization also recognizes its volunteers through various awards programs and honors them for their contributions to the military community. Overall, Operation Homefront relies on the dedication and commitment of its volunteers and unpaid personnel to support military families and wounded warriors across the country.

#### **10. Planning**

Operation Homefront faces several challenges and opportunities in the next three to five years. One of the biggest challenges is the ongoing impact of the COVID-19 pandemic, which has affected the economy and created additional hardships for many military families. The organization will need to continue to adapt and innovate to meet the changing needs of the military community in this challenging environment.

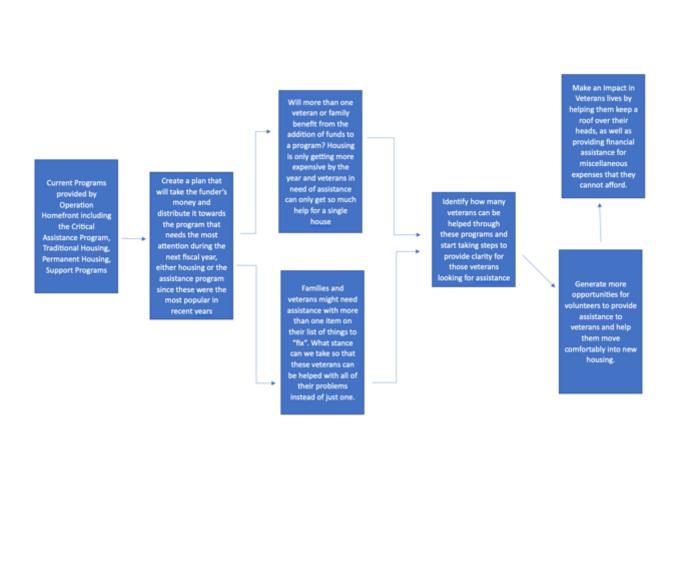
Another challenge facing Operation Homefront is the ongoing need for funding and resources to support its programs and services. As a nonprofit organization, Operation Homefront relies heavily on donations from individuals, corporations, and foundations to carry out its mission. The organization will need to continue to develop innovative fundraising strategies to maintain its level of support for military families and wounded warriors.

At the same time, Operation Homefront also has many opportunities to expand its reach and impact in the coming years. The organization has a strong reputation and a track record of success in supporting the military community, and it is well-positioned to take advantage of new opportunities to serve military families and wounded warriors. For example, Operation

Homefront could explore new partnerships with corporations or government agencies to expand its reach and impact.

To address these challenges and opportunities, Operation Homefront engages in strategic planning to guide its efforts and ensure that it is meeting the evolving needs of the military community. The organization's strategic planning process involves input from a variety of stakeholders, including staff, volunteers, donors, and military families. The focus of the organization's current planning efforts is on enhancing its programs and services to better meet the needs of military families and wounded warriors, while also exploring new opportunities to expand its impact.

### Visual Illustration



## Form 990

A For the 2 Check II applicable: Address change Ch	2021 calendar year, or tax year beginning         and endition           C Name of organization         OPERATION HOMEFRONT, INC.           Doing business as         OPERATION HOMEFRONT           Number and street (or P.0. box if mail is not delivered to street address)         Room           1355         CENTRAL         PKWY           City or town, state or province, country, and ZiP or foreign postal code         100	D Employer ide 32-003 Vsuite E Telephone nu 210-54	3325 mber	
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E 2 0	And and a second s	the last sector of the sector	t assets	s.,
3 N	lumber of voting members of the governing body (Part VI, line 1a)		3	
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DN	et unrelated business taxable income from Form 990-1, Part I, line 11	DiarNer	76	1710-000-000-000-000-000
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2 10 Ir			· · ·	3,43
£ 11 C				-103,17
Sec		39,257,52	2.	40,861,03
13 0	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			24,346,44
14 B	enefits paid to or for members (Part IX, column (A), line 4)			
g 15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	and the second se		8,804,44
2 16a P		the second se	0.	2,029,80
d bT		E 001 00	2	1 006 04
				4,096,24 39,276,93
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	evenue less expenses, quotract line to rom line 12	and the second se		End of Year
State 20 T	atal assets (Part X, line 16)			30,804,94
21 T		and the second design of the second distance	and the second division of	2,131,97
	let assets or fund balances. Subtract line 21 from line 20			28,672,97

rd	rt 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:
	OPERATION HOMEFRONT BUILDS STRONG, STABLE, AND SECURE MILITARY
	FAMILIES SO THEY CAN THRIVE - NOT SIMPLY STRUGGLE TO GET BY - IN THE
	COMMUNITIES THEY HAVE WORKED SO HARD TO PROTECT.
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 X 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?
	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	22 001 000 01 010 010 000 000 000 000 00
	OPERATION HOMEFRONT ASSISTS MILITARY FAMILIES COPING WITH A VARIETY OF
	FINANCIAL CHALLENGES. THE MOST COMMON TYPES OF NEED ARE FOR SHORT-TERM
	RELIEF CONSISTING OF RENT/MORTGAGE ASSISTANCE, HOME/CAR REPAIRS, FOOD,
	UTILITIES, AND TRANSITIONAL HOUSING; LONG TERM RESILIENCY CONSISTING OF
	PERMANENT MORTGAGE-FREE HOMES AND CAREGIVER SUPPORT; AND RECURRING
	FAMILY SUPPORT CONSISTING OF HOLIDAY MEALS, HOLIDAY TOYS, BACK-TO-SCHOOL ITEMS, BABY SHOWER AND HOMEFRONT CELEBRATIONS THAT ARE
	DESIGNED TO SUSTAIN, UPLIFT, AND TRANSFORM.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$
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4c	(Code:) (Expenses & including grants of &) (Revenue &)
4d	Other program services (Describe on Schedule O.)
4d	(Expenses 5 including grants of 5 ) (Revenue 5 )
4d	

Form 990 (2021) OPERATION HOMEFRONT, INC. 32-0033325 Page 3

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
	If "Yes," complete Schedule A	<b>a</b> .	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See Instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		X
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? // "Yes," complete Schedule D, Part /	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
8	the environment, historic land areas, or historic structures? // "Yes," complete Schedule D, Part II		1	
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	X	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	x	
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? // "Yes," complete Schedule D, Part VII	116		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			x
d	assets reported in Part X, line 16? // "Yes," complete Schedule D, Part VW 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	11c		~
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	-	X
	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	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b	-	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization manual an once, employees, or agens 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	198		-
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? // "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? // *Yes,* complete Schedule G, Part I. See instructions	17	x	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	3557		
19	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	X	3320
	complete Schedule G, Part III	19	1.5	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	-	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	-	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			x
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	990	

14290505 131839 058-033730

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? // *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? // "Yes," complete		2558	
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	-	X
	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			
12	any tax-exempt bonds?	24c	-	-
	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	-		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	-	X
D	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	-		x
26	Schedule L, Part I	256		-
20	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		-
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L. Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? #			_
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? # "Yes, " complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? //			
- 70	"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	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? # "Yes," complete Schedule N, Part I	31		X
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		X
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? // "Yes," complete Schedule R, Part I	33	_	X
34	Was the organization related to any tax-exempt or taxable entity? # "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	-	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
23	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	-	_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
513	If "Yes," complete Schedule R, Part V, line 2	36	-	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	-	X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 197		v	
Par	Note: All Form 990 filers are required to complete Schedule 0  t V Statements Regarding Other IRS Filings and Tax Compliance	38	X	-
	Check if Schedule O contains a response or note to any line in this Part V			-
	shown i surveue o contains a response or note to any line in this hart y		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 60		103	
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
~	(gambling) winnings to prize winners?	1c	x	
3.33	12-09-21		990	000

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				age
				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	Section 1997			
	filed for the calendar year ending with or within the year covered by this return	2a 146			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	Second Statement of Concession, Statement of	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instruction				
2-			3a	_	X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	~	3b	-	
	At any time during the calendar year, did the organization have an interest in, or a signature or other a		30		-
			4a		x
	financial account in a foreign country (such as a bank account, securities account, or other financial a	socounty?	43		-
D	If "Yes," enter the name of the foreign country	COAD			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A				X
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	-	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b	-	-
	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 th	e organization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a	-	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributi				
	were not tax deductible?		6b		-
7	Organizations that may receive deductible contributions under section 170(c).			Sec.	1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices provided to the payor?	7a	X	
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 82827		7c	X	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d 2			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit o	ontract?	7e		X
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act?	71		X
a	If the organization received a contribution of gualified intellectual property, did the organization file Fo		79		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h	X	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				1
1	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.	10110110110110101010000000000000000000			
	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		96		
10	Section 501(c)(7) organizations. Enter:		30		
	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	106			
		100			
11	Section 501(c)(12) organizations. Enter:	Less 1			
	Gross income from members or shareholders	11a			
D	Gross income from other sources. (Do not net amounts due or paid to other sources against	1000			
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a	_	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.		_		-
а	Is the organization licensed to issue qualified health plans in more than one state?		13a	-	
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	6.23			
	organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c	1		1
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	ie O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune		1		
	excess parachute payment(s) during the year?		15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t income?	16		X
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in	anv			
05	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.		1000		

-	Check if Schedule O contains a response or note to any line in this Part VI				X
Sec	tion A. Governing Body and Management				
		1a   19		Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 19			
	If there are material differences in voting rights among members of the governing body, or if the governing				
3	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.	10			
ь		1b 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship v				
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the o				
	of officers, directors, trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asset		5		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app				
	more members of the governing body?		7a	-	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stor	kholders, or			
	persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year I	by the following:			
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach	ed at the	1100		
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reve	nue Code.)			8
				Yes	N
10a	Did the organization have local chapters, branches, or affiliates?		10a	0.000	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chap				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		106		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body to		11a		X
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				1
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	x	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to		12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? // "Yes				
	on Schedule O how this was done		12c	x	
13			13	X	
14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?		14	X	-
15	Did the process for determining compensation of the following persons include a review and approval b	w independent	14		
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	y mooperident			
			48.0	х	
	The organization's CEO, Executive Director, or top management official		15a		-
D	Other officers or key employees of the organization		156	^	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	and a state of the			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	nt with a			
	taxable entity during the year?		16a	-	X
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organiz	ation's			
-	exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure			· · · ·	
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	990-T (section 501(c)(3)s	only)	availat	ble
	for public inspection. Indicate how you made these available. Check all that apply.				
	X Own website Another's website X Upon request Other (explain o	n Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conf		finan	cial	
	statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization's book	s and records			_
	ANDRE HAWKINS - 210-243-6146	worder antarasie in 199 pe			
	1355 CENTRAL PKWY, SAN ANTONIO, TX 78232				
	1000 CHAINED FRAIN, DIM PHILOMIC, IN TODOR				

Form 990 (2021)	OPERATION	HOMEFRONT,	INC.	32-0033325	Page 7
	m 990 (2021) OPERATION HOMEFRONT, INC. 32-0033325 Page rt VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII				
			in this Part VII		
Castles A Officers D	Seastore Trustees Key E	material and Minter	at Company and Franks	22.000	

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year, • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

 List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

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

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	box	not cl	ss per	nore son i	than o is both	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or detable	Institutional tradies	Officer	May employee	Highest compensated on pitytee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) JOHN I. PRAY, JR. PRESIDENT/CEO	40.00	x		x				495,720.	0.	10,907.
(2) MARGUERITE KIRST	40.00	-								
CHIEF REVENUE OFFICER		1		x			_	266,797.	0.	9,038.
(3) ROBERT THOMAS	40.00					$\square$				
CHIEF OPERATING OFFICER		1		x			_	242,008.	0.	7,617.
(4) ANDRE HAWKINS	40.00									
CHIEF FINANCIAL OFFICER		1		x			_	171,144.	0.	29,792.
(5) JILL ESKIN-SMITH	40.00									
VP OF CORPORATE & FOUNDATION PARTNER	-	1			x			168,620.	0.	6,485.
(6) TROY KASBARIAN	40.00							Lectron Contracts		
VP OF IT, LOGISTICS & PACILITIES		1				x		154,503.	0.	13,233.
(7) KAREN SMITHHART	40.00							and		and the second second
SR VP, HUMAN RESOURCES		1				X		145,054.	0.	12,629.
(8) WALTER STERBERG	40.00				- 0			Contract Section 1		1.000000000
VP OF MARKETING, OUTGOING		1				x		139,377.	0.	4,655.
(9) JACOB ADAMS	40.00							sayas dana'	50	1.000
SR MGR, SOFTWARE DEVELOPMENT		1				X		131,478.	0.	5,664.
(10) GRACELYNNE BROLL	40.00			1.1			- 1	Same and	60 <sup>6</sup>	and the second s
VP OF TRANSITIONAL & PERMANENT HOUSI						X		127,432.	0.	8,874.
(11) ANGELO LOMBARDI	0.00								2	
CHAIRMAN		х		х				0.	0.	0.
(12) ULI CORREA	0.00								i i	
VICE CHAIR		Х		Х			_	0.	0.	0.
<pre>(13) DIANNA JAFFIN</pre>	0.00									
SECRETARY		X		х			_	0.	0.	0.
(14) JK HUEY	0.00						1			
TREASURER	-	X		х			_	0.	0.	0.
(15) GREG HAM	0.00						1			
DIRECTOR		X			_		_	0.	0.	0.
(16) ROD ESSIG	0.00									
DIRECTOR	1	X			_		_	0.	0.	0.
(17) LAURA FREDRICKS	0.00									
DIRECTOR		X					_	0.	0.	0.
132007 12-09-21				7						Form 990 (2021

Part VII Section A. Officers, Directors, Trus	N HOMEFF	ploy	ees	and	Hid	ahes	10	ompensated Employee	s (continued)	333:		> <sub>age</sub> 8
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average			Pos	ition			Reportable	Reportable		Estimat	ed
	hours per					than o s both		compensation	compensatio	n	amount	
	week					e/trust		from	from related		other	
	(list any	ě						the	organizations		compens	ation
	hours for	r director				2		organization	(W-2/1099-MIS	C/	from th	he
	related	trusties or	tustee			10		(W-2/1099-MISC/	1099-NEC)		organiza	tion
	organizations		5		d'et	ŝ.		1099-NEC)			and rela	ted
	line)	dividual	ins 1 lutional	Officer	en pitryee	Mighest compensated employee	ormer				organizat	ions
(18) BOB MCGOWAN		N	<u>3</u>	8	Kei	분응	for			$\rightarrow$		
DIRECTOR	0.00	x						0.		0.		Ο.
(19) ANTHONY WILLIAMS	0.00	^	$\vdash$	$\vdash$		H	_			· ·		
DIRECTOR		x						0.		0.		Ο.
(20) ROB GIANNETTA	0.00	1	$\vdash$	$\vdash$		$\vdash$	_	v.		<u>.</u>		
DIRECTOR	0.00	x						0.		0.		Ο.
(21) FRANK PARAS	0.00	^	-			$\vdash$	-	· · ·		••		0.
DIRECTOR	0.00	x						0.		0.		0.
(22) MARTY HAUSER	0.00	^	-			$\vdash$	_	v.		••		0.
	0.00							0.		0.		0
DIRECTOR	0.00	X	-			$\vdash$	_	0.		0.		0.
(23) STEVE MAHON	0.00	x						0.				0
24) LINDA MEDLER	0.00	•	-	$\vdash$		$\vdash$	_	0.		0.		0.
	0.00											0
DIRECTOR	0.00	X	-				_	0.		0.		0.
(25) STEVE ADKINSON	0.00	1										~
DIRECTOR	0.00	x	-	-		$\vdash$		0.		0.		0
(26) DEREK BLAKE	0.00											•
DIRECTOR		X						0.		0.	100.0	0.
1b Subtotal								2,042,133.			108,8	-
c Total from continuation sheets to Part V	II, Section A							0.		0.		0.
d Total (add lines 1b and 1c)							•	2,042,133.			108,8	94.
2 Total number of individuals (including but r	not limited to th	ose	liste	d ab	ove	) wh	o re	ceived more than \$100,	000 of reportable			
compensation from the organization												14
										_	Yes	No
3 Did the organization list any former officer	, director, trust	ee, k	œy e	mpl	oyee	e, or	hig	hest compensated empl	oyee on	- 14		
line 1a? If "Yes," complete Schedule J for s	uch individual										3	X
4 For any individual listed on line 1a, is the second s												
and related organizations greater than \$15	0,000? If "Yes,	* co	mpl	ete S	Sche	dule	J١	or such individual			4 X	
5 Did any person listed on line 1a receive or												
rendered to the organization? If "Yes," con	nplete Schedul	e J f	or su	ich (	pers	on .		-			5	X
Section B. Independent Contractors												
1 Complete this table for your five highest co	mpensated ind	iepe	nde	nt co	ontra	actor	s th	hat received more than \$	100,000 of comp	ensatio	n from	
the organization. Report compensation for	the calendar ye	ear e	ndir	ng wi	ith c	r wit	hin	the organization's tax ye	bar.			
(A)							Т	(B)			(C)	
Name and business	address							Description of s	ervices	Cor	npensatio	m
MARKETEAM, LLC, 1200 ABE	RNATHY R	D	NE	S	ΤE			DIRECT				
1600, ATLATNA, GA 30328								RESPONSE/PRIN	TING	2.	029,8	03.
DATA AXLE							ſ			- /		
PO BOX 959819, ST LOUIS,	MO 6319	5						DIRECT MAIL S	SERVICES		163,3	93
CDW		-	_	_	_		f					
PO BOX 75723 , CHICAGO, 1	TL 60675						-	TECHNOLOGY SI	RVICES		137,5	29
AEGIS PROCESSING SOLUTION							f	i beimobooi bi	SILVICED		107,0	67.
240 SE MADISON ST, TOPEKA		60	7					DIRECT RESPON	ICF I		124,6	53
	1, 10 00	00	<u> </u>					INSURANCE FIN			104,0	55.
	v 75373							SERVICES	ANCING		108 6	50
	LA (33/3						_				108,6	39.
PO BOX 730223 , DALLAS, 1			100			and provide the						
IPFS CORPORATION PO BOX 730223, DALLAS, 5 2 Total number of independent contractors (	including but n	ot lir	niteo	t of			ed	above) who received mo	ore than			
PO BOX 730223 , DALLAS, 7 2 Total number of independent contractors ( \$100,000 of compensation from the organi	ncluding but n				5	5		-	ore than		000	
2 Total number of independent contractors (	ncluding but n				5	5		-	ore than	Fo	orm <b>990</b>	(2021

14290505 131839 058-033730 2021.03040 OPERATION HOMEFRONT, INC. 058-0331

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Form 990 OPERATIO							est (	Compensated Employe	32-003	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	-			Reportable	Reportable	Estimated
	hours	6		allt			M	compensation	compensation	amount of
	per	100				- I	<i>""</i>	from	from related	other
	week							the	organizations	compensation
	(list any	2				-		organization	(W-2/1099-MISC)	from the
	hours for	1 E				1		(W-2/1099-MISC)	(112100011100)	organization
	related	-				8		(11 2) 1000 (1100)		and related
	organizations	Individual trustee or director	Institutional trustee		Æ	Highest compensated e mployee				organizations
	below	3	- Por		Key employee	8				gameanorio
	line)	18	4	Officer	2	1	Former			
		=	=	0	*	Ŧ	22			
(27) LAURIE GALLO	0.00									
DIRECTOR		Х						0.	0.	0.
(28) WOODY WOODYARD	0.00									
DIRECTOR		x						0.	0.	0.
						$\vdash$	$\vdash$			
	<u> </u>	-								
		-								
		1								
		-		$\vdash$			-			
	L									
		1								
		-					$\vdash$			
	<u> </u>	-								
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	L									
		1								
				$\vdash$						
	<b>—</b>	1								
		-				-				
		1								
						L				
Total to Part VII, Section A, line 1c										
19201										
132201 04-01-21										
				9	)					
90505 131839 058-033730			20			120	140	OPERATION H	IOMEERONT T	NC 058-
						a - 3 U	- <b>1</b>		DUPIEFRUNT. 1	

		Check if Schedule O contains a re	-sponse	or note to any me	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclude from tax under sections 512 - 51
운원	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь		1b					
-Be			10	336,778.				
틩닅		the second	1d					
2Ë			1e					
옥님	1	All other contributions, gifts, grants, and		40 614 374				
₫ð			1f 1g \$	40,614,374.				
<u>S</u> E		Total. Add lines 1a-1f	ig lø	▶	40,951,152.			
1		Total 700 into 10 ft		Business Code				
。	2 a	PROGRAM FEES		531390	9,630.	9,630.		
8	ь							
Program Service Revenue	c							
53	d							
8 <sup>44</sup>	e							
۱ ۲		All other program service revenue		L	* ***			
+		Total. Add lines 2a-21		<b>&gt;</b>	9,630.			
	3	Investment income (including dividen			3,272.			3,272
	4	other similar amounts) Income from investment of tax-exemp						5,27
	5	Royalties	e borra p					
		0	Real	(ii) Personal				
	6 a	Gross rents						
	ь	Less: rental expenses 6b						
	c	Rental income or (loss) 6c						
	d	Net rental income or (loss)		▶				
	7 a		curities	(ii) Other				
			24,860.	<u> </u>				
	ь	Less: cost or other basis	4,702.					
<u>ě</u>			158.	+				
Other Revenue		Net gain or (loss)			158.			158
5		Gross income from fundraising events (no						
휭		including \$ 336,778.						
		contributions reported on line 1c). Se						
		Part IV, line 18	8a	46,106.				
	ь	Less: direct expenses	8b	222,740.				
		Net income or (loss) from fundraising			-176,634.			-176,634
	9 a	Gross income from gaming activities.						
		Part IV, line 19						
		Less: direct expenses Net income or (loss) from gaming acti		•				
		Gross sales of inventory, less returns						
	no d	and allowances	104	. 1				
	b	Less: cost of goods sold	100					
		Net income or (loss) from sales of inve						
" T				Business Code				
Miscellaneous Revenue	11 a	MISC REIMBURSEMENTS		900001	73,461.			73,461
scellaneo Revenue	ь							
Bey	c			<b>⊢</b> →				
ž 🗍	_	All other revenue		<u> </u>	23.471			
		Total. Add lines 11a-11d			73,461.	0.630	0.	-99,743
	12 12-09	Total revenue. See instructions		P	40,861,039.	9,630.	0.	Form <b>990</b> (202

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			prete column py.	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service éxpenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	24,346,447.	24,346,447.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1,408,128.	606,129.	359,896.	442,103
	trustees, and key employees	1,400,120.	000,129.	339,890.	442,103
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(2)(P)				
7	persons described in section 4958(c)(3)(B) Other salaries and wages	5,911,612.	4,530,681.	646,962.	733,969
8	Pension plan accruals and contributions (include		1,000,0011		
	section 401(k) and 403(b) employer contributions)	198,764.	151,527.	21,787.	25,450
9	Other employee benefits	654,849.	472,641.	74,246.	107,962
10	Payroll taxes	631,089.	444,822.	85,158.	101,109
11					,
а	Management				
ь		41,502.		41,502.	
c	Accounting	66,500.		66,500.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	2,029,803.			2,029,803
f	Investment management fees	150.		150.	
9	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	1,365,277.	1,109,572.	255,705.	
	Advertising and promotion	548,978.	536,769.	12,209.	15 040
13	Office expenses	299,095.	237,996.	45,151.	15,948
	Information technology				
15	Royalties	788,163.	589,187.	197,795.	1,181
16 17	Occupancy	43,286.	22,534.	5,849.	14,903
18	Travel Payments of travel or entertainment expenses	45,200.	22,3311	3,0451	14,000
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	15,880.	12,113.	3,263.	504
20	Interest	8,749.		8,749.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	535,006.	506,856.	23,393.	4,757
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
2	BAD DEBT EXP	95,287.	95,287.		
-	BANK & CC FEES	78,334.	43,031.	15,851.	19,452
c	INVENTORY OBSOLETION	51,298.		51,298.	
d	MEMBERSHIP DUES	33,343.	22,580.	2,546.	8,217
e	All other expenses	125,392.	73,686.	18,397.	33,309
25	Total functional expenses. Add lines 1 through 24e	39,276,932.	33,801,858.	1,936,407.	3,538,667
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	0 404 407	1 000 400		1 410 000
	Check here      X If following SOP 98-2 (ASC 958-720) 0 12-09-21	2,434,497.	1,022,489.	0.	1,412,008 Form 990 (202

		Check if Schedule O contains a response or not	e to any l	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			4,989,244.	1	4,510,464
	2	Savings and temporary cash investments			159,007.		439,459
		Pledges and grants receivable, net			3,334,142.	3	7,563,181
	4	Accounts receivable, net			5,551,212.	4	816,742
	5	Loans and other receivables from any current or	former o	fficer director			010//11
	<u> </u>	trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of the				5	
	6	Loans and other receivables from other disguali	0.5.0000				
	<u> </u>	under section 4958(f)(1)), and persons described	100 C 100 C 100			6	
	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9	Prepaid expenses and deferred charges			313,718.	9	289,343
	10a	Land, buildings, and equipment: cost or other	1 1				
		basis. Complete Part VI of Schedule D	10a	8,332,828.			
	ь	Less: accumulated depreciation	106	2,205,510.	4,422,096.	10c	6,127,318
	11	Investments - publicly traded securities			2,005,317.	11	2,005,520
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			13,605,046.	15	9,052,917
_	16	Total assets. Add lines 1 through 15 (must equ			28,828,570.		30,804,944
	17	Accounts payable and accrued expenses			1,272,729.		1,529,701
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			467 007	20	441 430
	21	Escrow or custodial account liability. Complete I		CONTRACTOR OF A	467,907.	21	441,439
0	22	Loans and other payables to any current or form		Construction of the second			
No.		trustee, key employee, creator or founder, subst					
Liabilities	22	controlled entity or family member of any of the	1.2.2.2.2.2.2.2			22 23	
	23	Secured mortgages and notes payable to unrela Unsecured notes and loans payable to unrelated		5 A. G.		24	160,832
	25	Other liabilities (including federal income tax, pa		C. C. Hundrid Hundrid			100,000
	20	parties, and other liabilities not included on lines		ARCO - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1			
		of Schedule D	an early of	compress Fait A		25	
	26	Total liabilities, Add lines 17 through 25			1,740,636.		2,131,972
	-	Organizations that follow FASB ASC 958, che	ck here	► X			
50		and complete lines 27, 28, 32, and 33.		As man			
ŭ	27	Net assets without donor restrictions			21,534,410.		19,957,548
Ba	28	Net assets with donor restrictions			5,553,524.	28	8,715,424
or Fund Balances		Organizations that do not follow FASB ASC 9	58, checi	k here 🕨 🗌			
Ĩ.		and complete lines 29 through 33.					
ets o	29	Capital stock or trust principal, or current funds				29	
	30	Paid-in or capital surplus, or land, building, or ec	uipment	fund		30	
Net Ass	31	Retained earnings, endowment, accumulated in	come, or	other funds	07 007 004	31	20 672 072
	32	Total net assets or fund balances			27,087,934.	32	28,672,972
z	33	Total liabilities and net assets/fund balances			28,828,570.	33	30,804,944 Form 990 (202

132011 12-09-21

14290505 131839 058-033730

	990 (2021) OPERATION HOMEFRONT, INC.	32-0	033325	Pag	ge 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	40,861	,0	39.
2	Total expenses (must equal Part IX, column (A), line 25)	2	39,276	, 9	32.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,584	,1	07.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	27,087	, 9	34.
5	Net unrealized gains (losses) on investments	5		9	31.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		20 670		
-	column (B)	10	28,672	, 9	14.
Pa	t XII Financial Statements and Reporting				
_	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
12	Accounting method used to prepare the Form 990: Cash X Accrual Other			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	0	-		
-	Where the organization changed its method of accounting from a prior year or checked "other," explain on schedule Were the organization's financial statements compiled or reviewed by an independent accountant?		28	_	x
28	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		28	_	-
	separate basis, consolidated basis, or both:	ona			
	Separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis				
			2b	x	_
D	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate		20	-	-
	If Yes, check a box below to indicate whether the infancial statements for the year were audited on a separate consolidated basis, or both:	Dasis,			
	X Separate basis Consolidated basis Both consolidated and separate basis				
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	de velit		_	_
	review, or compilation of its financial statements and selection of an independent accountant?	111111111111	2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche			1111	
38	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sinc				
20.00	Act and OMB Circular A-133?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit			
0	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		36		
			Earn	000	0004

Form 990 (2021)

132012 12-09-21

14290505 131839 058-033730

(Form 990) epartment of the Treasury ternal Revenue Service	Complete if the orga	anization is a section 50 947(a)(1) nonexempt cha Attach to Form 990 or I ov/Form990 for instruction	2021 Open to Public Inspection			
lame of the organization	OPERATION HOM	FERONT INC			1.	r identification numbe 32-0033325
Part I Reason for	Public Charity Status.		complete ti	his part.) S		12 0033323
	vate foundation because it is:					
1 A church, conve	ntion of churches, or associat	ion of churches described	in sectio	n 170(b)(1	I)(A)(i).	
2 A school describ	ed in section 170(b)(1)(A)(ii).	(Attach Schedule E (Form	n 990).)			
A hospital or a c	ooperative hospital service or	ganization described in s	ection 170	(b)(1)(A)(ii	i).	
4 A medical resear	rch organization operated in c	onjunction with a hospital	described	in sectio	n 170(b)(1)(A)(iiii). Ente	r the hospital's name,
city, and state:						1010010
	operated for the benefit of a c	college or university owned	t or operat	ed by a go	vernmental unit descrit	ed in
	1)(A)(iv). (Complete Part II.)	and the second				
THE .	or local government or govern that normally receives a subst					oublic described in
	I)(A)(vi). (Complete Part II.)	taribai part or its support i	ion a gov	ennienan	unit of norm the general	public described in
	ist described in section 170(t	W1XAXvi), (Complete Par	t II.3			
	esearch organization describe			ed in conju	inction with a land-gran	t college
	non-land-grant college of agr			10000000000		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
university:	- 19 - 19 - 19 - 19 - 19 - 19 - 19 - 19			1.111.12		222
0 An organization	that normally receives (1) more	e than 33 1/3% of its supp	ort from c	ontribution	ns, membership fees, ar	id gross receipts from
activities related	to its exempt functions, subje	ect to certain exceptions;	and (2) no	more than	33 1/3% of its support	from gross investment
	elated business taxable incom	e (less section 511 tax) fro	m busines	sses acqui	red by the organization	after June 30, 1975.
	(a)(2). (Complete Part III.)				22102020	
	organized and operated exclu					
	organized and operated exclu pported organizations describ		A			
	h 12d that describes the type			0.0.0.0.0	A DECEMBER OF	Check the box on
	porting organization operated,					alvina
	organization(s) the power to r		1			
	You must complete Part IV, 5					
b Type II. A sup	porting organization supervise	ed or controlled in connect	tion with it	s supporte	d organization(s), by ha	ving
control or man	agement of the supporting or	ganization vested in the s	ame perso	ns that con	ntrol or manage the sup	ported
	. You must complete Part IV					
	ionally integrated. A support				A REAL PROPERTY AND A REAL PROPERTY OF	ed with,
	organization(s) (see instruction					100
	unctionally integrated. A sup					
	ctionally integrated. The organ see instructions). You must co					weness
	x if the organization received a					
	legrated, or Type III non-functi				The r The r The m	
	upported organizations					
g Provide the following	information about the support	ted organization(s).		2010112-000		
(i) Name of supporte	d (ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) is the org in your govern	ing document?	(v) Amount of monetary	(vi) Amount of other
organization		above (see instructions))	Yes	No	support (see instructions)	support (see instruction
			-	-		
		1	-			-
	~					

	Art II Support Schedule for (Complete only if you checke	d the box on line 5	5, 7, or 8 of Part I of	Sections 170 or if the organization		170(b)(1)(A)(v	
Re	fails to qualify under the test	s listed below, plea	ise complete Part	ш.)			
	ction A. Public Support						
	endar year (or fiscal year beginning in) Gifts, grants, contributions, and	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	membership fees received. (Do not						
	include any "unusual grants.")	39815536.	45825491.	48573242.	39166556.	40951152.	21433197
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to						
	the organization without charge	39815536	45825491	48573242	39166556.	40951152	21433197
	Total. Add lines 1 through 3 The portion of total contributions	55015550.	13023431.	10373242.	55100550.	10551152.	21455157
	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)						80370589
6	Public support. Subtract line 5 from line 4.						133961388
Se	ction B. Total Support			<u>.</u>	<u></u>		3
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	39815536.	45825491.	48573242.	39166556.	40951152.	21433197
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources	23,842.	37,159.	42,763.	26,976.	3,272.	134,012
9	Net income from unrelated business	20,0421	57,2001	12,105.	20,570.	5,2,2	201,011
	activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)	41,795.	48,473.	80,006.	6,529.	73 461	250,264
11	Total support. Add lines 7 through 10	41,195.	40,475.	00,000.	0,525.	/5,401.	21471625
	Gross receipts from related activities	etc. (see instruction	ons)			12	2,506,380
	First 5 years, if the Form 990 is for th			fourth, or fifth tax	year as a section 5	and the second s	,,
.222	organization, check this box and sto	p here			-		
Se	ction C. Computation of Publ	ic Support Per	rcentage				
14	Public support percentage for 2021 (	line 6, column (f), c	livided by line 11,	column (f))		14	62.39
	Public support percentage from 2020					15	62.04
164	a 33 1/3% support test - 2021. If the				14 is 33 1/3% or n	hore, check this bo	
	stop here. The organization qualifies b 33 1/3% support test - 2020. If the and stop here. The organization qua	organization did no	ot check a box on	line 13 or 16a, and			his box
17:	a 10% -facts-and-circumstances tes and if the organization meets the fact	t - 2021. If the org	ganization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	
	meets the facts-and-circumstances to b 10% -facts-and-circumstances test more, and if the organization meets t	t - 2020. If the org	ganization did not	check a box on lin	e 13, 16a, 16b, or		10% or
	organization meets the facts and circ						► C
18	Private foundation. If the organization						is 🛌 🕨
						Schedule A	(Form 990) 2021
1320	22 01-04-22						
			15	Concernence of the second			

<b>F</b> 6	edule A (Form 990) 2021 OF art III Support Schedule for O		HOMEFRONT , Described in S		(2)	32-003	3325 Page 3
-	(Complete only if you checked t	-				Part II, If the organiz	ation fails to
	gualify under the tests listed be				,,		
Sec	ction A. Public Support				-		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge					1	
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disgualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.) ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	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 on line 10b,						
	whether or not the business is regularly carried on						
40						1	
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	or loss from the sale of capital assets (Explain in Part VI.)						
	or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)	organization's fi	rst. second. third. fr	ourth, or fifth tax y	vear as a section	501(c)(3) organizatio	20.
13 14	or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here	-		ourth, or fifth tax y	year as a section :	501(c)(3) organizatio	on, 
13 14 Sec	or loss from the sale of capital assets (Explain in Part VI.) Total support. (#dd ines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public	Support Per	centage		year as a section :		
13 14 Sec 15	or loss from the sale of capital assets (Explain in Part VI.) Tetal support. (#dd lies 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage for 2021 (lier	e 8, column (f), d	centage livided by line 13, c		year as a section (	15	
13 14 Sec 15 16	or loss from the sale of capital assets (Explain in Part VI.) Tetal support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage from 2020 1	e 8, column (f), d Schedule A, Part	ivided by line 13, c		year as a section !		
13 14 Sec 15 16	or loss from the sale of capital assets (Explain in Part VI.) Tetal support. (#dd lies 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage for 2021 (lier	e 8, column (f), d Schedule A, Part	ivided by line 13, c		year as a section !	15	
13 14 15 16 Sec	or loss from the sale of capital assets (Explain in Part VI.) Tetal support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage from 2020 1	Support Per e 8, column (f), d Schedule A, Part ment Income	ivided by line 13, c lill, line 15 Percentage	olumn (f))	year as a section !	15	
13 14 <u>Sec</u> 15 <u>16</u> <u>Sec</u> 17	or loss from the sale of capital assets (Explain in Part VI.) Tetal support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage from 2020 for Ction D. Computation of Invest	Support Per e 8, column (f), d Schedule A, Part ment Income 21 (line 10c, column	ivided by line 13, c III, line 15 Percentage nn (f), divided by lin Bat III ine 17	olumn (f))		15	
13 14 15 16 560 17 18	or loss from the sale of capital assets (Explain in Part VI.) Tetal support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage for 2021 (lin Public support percentage from 2020 5 ction D. Computation of Invest Investment income percentage for 2020	Schedule A, Part ment Income 21 (line 10c, colur 020 Schedule A,	ivided by line 13, c III, line 15 Percentage nn (f), divided by lin Part III, line 17	olumn (f))		15 16 17 18	
13 14 15 16 560 17 18	or loss from the sale of capital assets (Explain in Part VI.) Tetal support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage for 2021 (lin Public support percentage from 2020 s ction D. Computation of Invest Investment income percentage for 2020 Investment income percentage from 2	Support Per     B, column (f), d     Schedule A, Part     ment Income     (line 10c, colur     020 Schedule A,     organization did n	ivided by line 13, c lill, line 15 Percentage mn (f), divided by lin Part III, line 17 sot check the box o	olumn (f)	15 is more than 1	15           16           17           18           33 1/3%, and line 1	96 96 96 96 96 96
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1 An do clia 2 Dik un 3a Dik Jim b Dik sal org c Dik sal org c Dik yu 4a Wa	(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.) <b>n A. All Supporting Organizations</b> e all of the organization's supported organizations listed by name in the organization's governing cuments? If "No," describe in Part VI how the supported organizations are designated. If designated by as or purpose, describe the designation. If historic and continuing relationship, explain. d the organization have any supported organization that does not have an IRS determination of status der section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported ganization was described in section 509(a)(1) or (2). d the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer es 3b and 3c below. d the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and tisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the ganization made the determination. d the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) rposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. as any supported organization not organized in the United States ("foreign supported organization"? If	Yes 1 2 3a 3b 3c	No
1 An do clia 2 Dik un 3a Dik Jim b Dik sal org c Dik sal org c Dik yu 4a Wa	Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.) <b>n A. All Supporting Organizations</b> e all of the organization's supported organizations listed by name in the organization's governing currents? <i>If "No," describe in</i> <b>Part VI</b> <i>how the supported organizations are designated. If designated by</i> iss or purpose, describe the designation. If historic and continuing relationship, explain. d the organization have any supported organization that does not have an IRS determination of status der section 509(a)(1) or (2)? <i>If "Yes," explain in</i> <b>Part VI</b> <i>how the organization determined that the supported</i> ganization was described in section 509(a)(1) or (2). d the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer</i> es 3b and 3c below. d the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and tisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in</i> <b>Part VI</b> when and how the ganization made the determination. d the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) rposes? <i>If "Yes," explain in</i> <b>Part VI</b> what controls the organization put in place to ensure such use.	1 2 3a 3b	Nk
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un org 3a Dix lin b Dix sal org c Dix pu 4a Wi 'Y	der section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported ganization was described in section 509(a)(1) or (2). If the organization have a supported organization described in section 501(c)(4), (5), or (8)? If "Yes," answer es 3b and 3c below. If the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and tisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the ganization made the determination. If the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) rposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3a 3b	
3a Dia Jini b Dia sal org c Dia pu 4a Wa	ganization was described in section 509(a)(1) or (2). If the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer es 3b and 3c below. If the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and tisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the ganization made the determination. If the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) rposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3a 3b	
3a Dia line b Dia sal org c Dia pu 4a Wa	If the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer es 3b and 3c below. If the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and tisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the ganization made the determination. If the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) rposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3a 3b	
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b Dia sal org c Dia pu 4a Wa	d the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and tisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the ganization made the determination. d the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) rposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	36	t
sa org c Dik pu 4a Wa	tisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the ganization made the determination. If the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) rposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
c Dia pu 4a Wa	ganization made the determination. d the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) rposes? // "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
c Dia pu 4a Wa	d the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) rposes? // "Yes," explain in Part VI what controls the organization put in place to ensure such use.		-
ри 4а Wa "Yi	rposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	30	
4a Wa	나는 것 같은 사람이 다 집에 가지 않는 것 같은 것 같아. 이 것 같은 것 같이 있는 것 같아. 이 것 같아. 이 것 것 같아. 이 있는 것 같아. 이 있는 것 같아. 이 집 같아. 이 있는 것 같아. 이 집 집 같아. 이 집 집 같아. 이 집 집 집 같아. 이 집 집 집 집 같아. 이 집 집 집 집 집 집 집 집 집 집 집 집 집 집 집 집 집 집		
*7	is any supported organization not organized in the united States ("toreign supported organization")? //		+
	the second diversity of the second by the first second diversity of the second dive		1
	es," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a	1
	d the organization have ultimate control and discretion in deciding whether to make grants to the foreign		
	pported organization? If "Yes," describe in Part VI how the organization had such control and discretion	4b	1
	spite being controlled or supervised by or in connection with its supported organizations. If the organization support any foreign supported organization that does not have an IRS determination	40	+
	der sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used		
	ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	4.	t -
10000	rposes. d the organization add, substitute, or remove any supported organizations during the tax year? // "yes."	4c	+
	swer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN		
	mbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;		
	the authority under the organization's organizing document authorizing such action; and (iv) how the action	5a	1
	is accomplished (such as by amendment to the organizing document). pe I or Type II only. Was any added or substituted supported organization part of a class already	Jul	1
0.07	signated in the organization's organizing document?	50	E
	bstitutions only. Was the substitution the result of an event beyond the organization's control?	50	t
	d the organization provide support (whether in the form of grants or the provision of services or facilities) to	~	
	yone other than (i) its supported organizations, (ii) individuals that are part of the charitable class		
	nefited by one or more of its supported organizations, or (ii) other supporting organizations that also		
	pport or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in		
	rt VI.	6	Г
	t the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor		
	defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with		
	pard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	
	d the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?		
	Yes," complete Part I of Schedule L (Form 990).	8	
	as the organization controlled directly or indirectly at any time during the tax year by one or more		
	equalified persons, as defined in section 4946 (other than foundation managers and organizations described		
	section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	Г
	d one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which		
	e supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	
	d a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit		
	m, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	
	as the organization subject to the excess business holdings rules of section 4943 because of section		
	43(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated		
	pporting organizations)? If "Yes," answer line 10b below.	10a	
	d the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to		
	termine whether the organization had excess business holdings.)	10b	
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-	t IV Supporting Organizations (continued)		-	
			Yes	No
1	Has the organization accepted a gift or contribution from any of the following persons?		1111	[ ```
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a	-	-
1.00	A family member of a person described on line 11a above?	11b	-	-
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
00	detail in Part VI. tion B. Type I Supporting Organizations	11c	-	_
	don b. Type Toupporting organizations			
	Pld Her second as here, 'second as a the second as here,' offered where is the set offered as well.' to second as here a second		Yes	No
3	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers			
	directors, or trustees at all times during the tax year? If "No." describe in Part VI how the supported organization(s)	<u>`</u>		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supporter	1		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the		-	
9	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	-	_
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	L	_
ec	tion C. Type II Supporting Organizations		-	-
		_	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
-	the supported organization(s).	1	_	
ec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	-	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
ec	tion E. Type III Functionally Integrated Supporting Organizations	1100.181	000 - VI	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ons).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (s	e instructio	nsi.	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	_	
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,		1	
~	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	2b		
3	these activities but for the organization's involvement.	20	1	
÷.,	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a	_	-
		-	1.000	1.00
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this repard.	зь	100	

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 ( explain in	Part VI). See instructions.
_	All other Type III non-functionally integrated supporting organizations must	complete	Sections A through E.	,
Sec	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or	1 1		
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
_	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	y integrate	ed Type III supporting orga	anization (see
	instructions)			

Schedule A (Form 990) 2021

132026 01-04-22

14290505 131839 058-033730

Sche Pa	dule A (Form 990) 2021 OPERATION HOM	EFRONT , (a)(3) Supp	INC.	nizations (continu	3	2-0033325 Page 7
	ion D - Distributions	-//-/		Contine	Jeu)	Current Year
1	Amounts paid to supported organizations to accomplish exe	mot ouroceae			1	Current rear
2	Amounts paid to supported organizations to accomplish exer Amounts paid to perform activity that directly furthers exemp				<u> </u>	
~	organizations, in excess of income from activity	v baibases oi	supported		2	
3	Administrative expenses paid to accomplish exempt purpose	s of supports	d organization		3	
4	Amounts paid to acquire exempt-use assets	is or supporte	o organization	2	4	
5	Qualified set-aside amounts (prior IRS approval required - pri	ouide details i	- Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.	Ovide details i	/ Part Vij		6	
-	Total annual distributions, Add lines 1 through 6.				7	
8	Distributions to attentive supported organizations to which the	ne oroanizatio	n is responsive		+ <b>'</b>	
	(provide details in Part VI). See instructions.	ne organizatio	in to reaportaine		8	
9	Distributable amount for 2021 from Section C, line 6				9	
	Line 8 amount divided by line 9 amount				10	
10	Life 6 amount divided by life 8 amount		0	(ii)	10	(iii)
Sect	ion E - Distribution Allocations (see instructions)		(i) istributions	Underdistribution Pre-2021	ns	Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2021 (reason-					
_	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2021					
a	From 2016					
b	From 2017					
C	From 2018					
d	From 2019					
	From 2020					
	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2021 distributable amount					
i	Carryover from 2016 not applied (see instructions)					
1	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2021 from Section D,					
	line 7: \$					
a	Applied to underdistributions of prior years					
b	Applied to 2021 distributable amount					
c	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2021, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2021. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
_	Part VI. See instructions.					
7	Excess distributions carryover to 2022. Add lines 3j					
_	and 4c.					
8	Breakdown of line 7:					
	Excess from 2017					
	Excess from 2018					
	Excess from 2019					
-	Excess from 2020					
e	Excess from 2021					

Schedule A (Form 990) 2021

132027 01-04-22

14290505 131839 058-033730

PART II LINE 10	
ART II DINE IV	
MISCELLANEOUS INCOME	
2017 AMOUNT: \$ 40,815.	
2018 AMOUNT: \$ 47,628.	
2019 AMOUNT: \$ 79,536.	
2020 AMOUNT: \$ 6,269.	
2021 AMOUNT: \$ 73,461	
LATE FEES	
2017 AMOUNT: \$ 980.	
2018 AMOUNT: \$ 845.	
2020 AMOUNT: \$ 260.	
2021 AMOUNT: \$ 230	
32028 01-04-22	Schedule A (Form 990) 20

(Eorm 000)	Schedule of Contributors	OMB No. 1545-0047
(Form 990) Department of the Treasury	<ul> <li>Attach to Form 990 or Form 990-PF.</li> <li>Go to www.irs.gov/Form990 for the latest information.</li> </ul>	2021
Internal Revenue Service Name of the organizatio	n	Employer identification number
	OPERATION HOMEFRONT, INC.	32-0033325
Organization type (chee		00.0000000
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 private foundation	
	501(c)(3) taxable private foundation	
property) from	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling any one contributor. Complete Parts I and II. See instructions for determining a contributor's	
property) from Special Rules X For an organiza sections 509(a)		s total contributions. est of the regulations under d that received from any one
property) from Special Rules X For an organiza sections 509(a) contributor, du	any one contributor. Complete Parts I and II. See instructions for determining a contributor's ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to (1) and 170(b)(1)(A)(v), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and	s total contributions. est of the regulations under d that received from any one
Property) from Special Rules X For an organizz sections 509(a) contributor, du or (ii) Form 990 For an organizz contributor, du literary, or educ	any one contributor. Complete Parts I and II. See instructions for determining a contributor's ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support t (1) and 170(b)(1)(A)(v), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and ring the year, total contributions of the greater of <b>(1)</b> \$5,000; or <b>(2)</b> 2% of the amount on (i) F	s total contributions. est of the regulations under d that received from any one Form 990, Part VIII, line 1h; any one entific,
property) from Special Rules  Sections 509(a) contributor, du or (ii) Form 990  For an organiza contributor, du literary, or educ "N/A" in colum For an organiza year, contributi is checked, ent purpose. Don't	any one contributor. Complete Parts I and II. See instructions for determining a contributor's ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support the (1) and 170(b)(1)(A)(v), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and ring the year, total contributions of the greater of <b>(1)</b> \$5,000; or <b>(2)</b> 2% of the amount on (i) F (EZ, line 1. Complete Parts I and II. ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a ring the year, total contributions of more than \$1,000 exclusively for religious, charitable, sci cational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (et al. 2010) (a) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	s total contributions. est of the regulations under d that received from any one form 990, Part VIII, line 1h; any one entific, intering any one contributor, during the one than \$1,000. If this box s, charitable, etc received <i>nonexclusively</i>
property) from Special Rules Sections 509(a) contributor, du or (ii) Form 990 For an organizz contributor, du literary, or educ "N/A" in colum For an organizz year, contribut is checked, ent purpose. Don't religious, charit Caution: An organizatio answer "No" on Part IV,	any one contributor. Complete Parts I and II. See instructions for determining a contributor's ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support 1 (1) and 170(b)(1)(A)(v), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and ring the year, total contributions of the greater of <b>(1)</b> \$5,000; or <b>(2)</b> 2% of the amount on (i) F (EZ, line 1. Complete Parts I and II. ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a ring the year, total contributions of more than \$1,000 exclusively for religious, charitable, sci cational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (en (b) instead of the contributor name and address), II, and III. ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a ons <u>exclusively</u> for religious, charitable, etc., purposes, but no such contributions totaled ma ther here the total contributions that were received during the year for an <u>exclusively</u> religious complete any of the parts unless the <b>General Rule</b> applies to this organization because it in the parts and the parts unless the <b>General Rule</b> applies to this organization because it in the set in the parts unless the <b>General Rule</b> applies to this organization because it in the parts and the parts unless the <b>General Rule</b> applies to this organization because it in the set in the parts unless the <b>General Rule</b> applies to this organization because it in the parts and the parts unless the <b>General Rule</b> applies to this organization because it in the parts and the parts unless the <b>General Rule</b> applies to this organization because it in the parts and the parts unless the <b>General Rule</b> applies to this organization because it in the parts and the parts unless the <b>General Rule</b> applies to this organization because it in the parts and the parts unless the <b>General Rule</b> applies to this organization because it in the total contributio	s total contributions. est of the regulations under d that received from any one form 990, Part VIII, line 1h; any one entific, intering any one contributor, during the ore than \$1,000. If this box s, charitable, etc., received noneclusively 

	-		
PERAT	TION HOMEFRONT, INC.	3	2-0033325
Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>3,000,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$\$\$\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>1,750,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ <u>2,000,000</u> .	Person X Payroll Noncash X (Complete Part II for noncash contributions,
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>10,530,915</u> .	Person X Payroll Noncash X (Complete Part II for noncash contributions,
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$923,000.	Person X Payroll Noncash X (Complete Part II for noncash contributions.

lame of or	rganization		Employer identification	number
PERAT	TION HOMEFRONT, INC.		32-0033325	
Part II	Noncash Property (see instructions). Use duplicate copies of Part II	if additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.		ved
4	GIFT CARDS		00 12/21/2	21
		\$400,0	00. 12/31/2	21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.		ved
5	SCHOOL SUPPLIES AND TOYS	-		
		\$\$10,021,6	82. 12/31/2	21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions		ved
6	HOMES	_		
		\$423,0	00. 12/31/3	21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions		ved
_		s		
-				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.		ved
(a)		\$	_	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions)		ved
_		_		
23453 11-11	21	\$\$	Schedule B (Form S	990) (2021

lame of organ	hization		Employer identification number
PERATI	ON HOMEFRONT, INC.		32-0033325
Part III E	xclusively religious, charitable, etc., contributio		section 501(c)(7), (8), or (10) that total more than \$1,000 for the year
#	rom any one contributor. Complete columns (a) ompleting Part II, enter the total of exclusively religious, cl	through (e) and the following line e haritable, etc., contributions of \$1.000 e	ntry. For organizations r less for the year. (Enter this info. ence.)  \$
U	Ise duplicate copies of Part III if additional s	pace is needed.	
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	(o) Fulpose of give	(c) one of Birt	(d) Description of non-girl is need
-			
-			
		(e) Transfer of g	ift
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
-			
-			
-			
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
-			
		(a) Transfer of a	
		(e) Transfer of g	int .
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
_			
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
		(e) Transfer of g	int.
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
			· · · · · · · · · · · · · · · · · · ·
_			
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
$\vdash$			
		(e) Transfer of g	ift
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
	nansieree s name, auw 655, an		meanwraing o'r a anaref or to ganarer ee
-			
-			
-			
23454 11-11-21			Schedule B (Form 990) (202

SCHEDULE D (Form 990) Complete if the organization answered " Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11					"Yes" on Form 990, , 11e, 11f, 12a, or 12b.		2	021
Departr	nent of th Revenue	e Treasury Service	Go to www.irs.gov/Form990	ttach to Form 990				en to Public pection
		e organization	- do to unumargoth ormose			_	ployer identific	
			OPERATION HOMEFRONT	, INC.			32-00	
Par	tI	Organization	ns Maintaining Donor Advised	Funds or Othe	er Similar Funds or /	Accou	nts. Complet	e if the
_		organization ans	wered "Yes" on Form 990, Part IV, line					
			-	(a) Donor ac	tvised funds	(b) Fu	nds and other a	ccounts
1			year					
2		55 COL 65 COL 80	tributions to (during year)					
3			nts from (during year)					
		gate value at end						
5			orm all donors and donor advisors in w					- <b>-</b> 1-
			roperty, subject to the organization's ex					HS IN
6		the second second second second second	orm all grantees, donors, and donor ad	and the second second second second	the second s			
			and not for the benefit of the donor or (	donor advisor, or ic	or any other purpose contr	erning		
Par		missible private b	n Easements. Complete if the orga	baratino ansurad	"Yes" on Form 000 Dart	D/ line 7	Ye	No No
						iv, ine /	-	
1	and the second		tion easements held by the organization nd for public use (for example, recreation		Preservation of a hi	etodealk	important land	1 2022
		Protection of nati	성상은 승규는 친구가 잘 물었다. 여러 가지 않는 것 같은 것 같아요. 가지 않는 것 같아요.	on or education)	Preservation of a ce	1. C.		
		Preservation of o			Preservation of a ce	arunea n	istoric structure	
2	0.000		ugh 2d if the organization held a qualifie	d concension cor	stribution in the form of a	conserv	ation essement	on the last
*		the tax year.	gri zu il tre organization nelu a quanie	o conservation con	inducion in the joint of a	Conserva		d of the Tax Yea
	125713	Contraction Contractor	vation easements			2a		
c			easements on a certified historic struc					
			easements included in (c) acquired aft			-		
			gister			2d		
3			n easements modified, transferred, relea				during the tax	
	year )							
4	1.		property subject to conservation ease	ment is located				
5			ave a written policy regarding the perio					
			ment of the conservation easements it h	childe 2	500000 00000 000 <b>5</b> 00		Ye	s 🗆 N
6	Staff a	and volunteer hou	rs devoted to monitoring, inspecting, h					the year
	•							
7	Amou	nt of expenses in	curred in monitoring, inspecting, handling	ng of violations, an	d enforcing conservation	easemer	ts during the year	ear
	Þ\$							
8	Does	each conservation	n easement reported on line 2(d) above	satisfy the requirer	ments of section 170(h)(4)	(B)(i)		
	and se	action 170(h)(4)(B	60?					HS N
9	In Par	t XIII, describe ho	w the organization reports conservation	easements in its r	evenue and expense state	ement ar	nd	
	baland	ce sheet, and incl	ude, if applicable, the text of the footno	te to the organizati	ion's financial statements	that des	cribes the	
			ng for conservation easements.					
Par	tIII		ns Maintaining Collections of A		Treasures, or Other	Simila	ar Assets.	
		Construction of the local division of the lo	organization answered "Yes" on Form 9					
1a			ed, as permitted under FASB ASC 958,					
			es, or other similar assets held for publi			rance of	public	
			XIII the text of the footnote to its finance					
b		Contraction of the second	ed, as permitted under FASB ASC 958,	집에는 바람이 있는 것이 많이				
			or other similar assets held for public e	schibition, educatio	n, or research in furtherar	ice of pu	ublic service,	
		and the second	mounts relating to these items:			1		
			on Form 990, Part VIII, line 1					
			Form 990, Part X					
z			ved or held works of art, historical treas		A CONTRACTOR OF A CONTRACTOR A	a, provid	10	
_			equired to be reported under FASB AS					
			orm 990, Part VIII, line 1					
			n 990, Part X tion Act Notice, see the Instructions I	or Form 000		-	Cohadula D (	Corm 0001 201
		a service of a service of	uon Act Notice, see the instructions t	or Porm 990.			achedule D (I	Form 990) 202
	10-28-2			27				

3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	e following that n	nake significar	nt use of its		
	collection items (check all that apply):							
a	Public exhibition	d		kchange program	1			
b	Scholarly research	e	Other	0-20 - 28				
c	Preservation for future generations							
4	Provide a description of the organization's of						XIII.	
5	During the year, did the organization solicit of				similar assets	_	-	_
Par	to be sold to raise funds rather than to be m rt IV Escrow and Custodial Arran reported an amount on Form 990, Pa	gements. Comple			es* on Form §	990, Part IV,	Ine 9, or	N
1a	Is the organization an agent, trustee, custod		iary for contributio	ins or other asset	ts not include	d		
	on Form 990, Part X?						Yes	XN
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:			1	Amount	
0.2	Regioning balance					2	Amount	
	Beginning balance				and the second se			
	Additions during the year							
	Distributions during the year					Cryster.		
2-	Ending balance Did the organization include an amount on F						Yes	
	If "Yes," explain the arrangement in Part XIII.					<b>LA</b>	Yes	X
-	rt V Endowment Funds. Complete							A
	Endominent Fundor Complete	(a) Current year	(b) Prior year	(c) Two years	and the second se	ee ware hark	Les Four vi	ears har
	Designing of user balance	(a) content year	(D) Price year	(c) ind job 5	course (a) mile	on Jones parm	(c). our j	10.5.100
	Beginning of year balance				_		-	
D	Contributions			-	-			
	Net investment earnings, gains, and losses						-	
	Grants or scholarships	-		-	-		-	
e	Other expenditures for facilities and programs							
+	Administrative expenses			3				
	End of year balance							
2	Provide the estimated percentage of the cur	ent year end balance	e (line 1g. column	(a)) held as:			205	
a	Board designated or quasi-endowment		96					
b	Permanent endowment	96	Pare A					
c	Term endowment	%						
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.						
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held	and administered	for the organ	nization	1.000	
	by:						Y	es N
	(i) Unrelated organizations				ina consection consection con		3a(i)	
	(iii) Related organizations						3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on Schedule R	?			3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Pa	rt VI Land, Buildings, and Equipm							
	Complete if the organization answere	d "Yes" on Form 990	), Part IV, line 11a.	See Form 990, F	Part X, line 10	÷		
	Description of property	(a) Cost or o basis (investr	nent) basi	st or other is (other)	(c) Accumul depreciati		(d) Book v	00055
1a	Land		8	19,387.	il service	1		,387
b	Buildings		4,6	56,186.	191,	723.	4,464	,463
c	Leasehold improvements							
d	Equipment			10,403.		394.		,009
	Other			46,852.	1,185,	393.		,459
	<ol> <li>Add lines 1a through 1e. (Column (d) must e</li> </ol>	qual Form 990. Part	X. column (B). line	10c.)			6,127	,318
Tota						Schedule	D (Form S	990) 20
Tota								
Tota								
Tota								
Tota								
Tota								
Tota								

		OMEFRONT, INC.	• 3.	2-0033325 P;
Part VII	Investments - Other Securities.			
(-) Deceri	Complete if the organization answered "Yes"			
	iption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	id-of-year market value
	ial derivatives			
	y held equity interests			
Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
tal, (Col. Part VII	(b) must equal Form 990, Part X, col. (B) line 12.) ► Investments - Program Related.			
	Complete if the organization answered "Yes"			
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	no-ot-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
		on Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
tal, (Col. Part IX	Other Assets. Complete if the organization answered "Yes" (a)	Description	11d. See Form 990, Part X, line 15.	(b) Book value
(1) C	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO	Description DRY	11d. See Form 990, Part X, line 15.	7,973,21
(1) C( (2) C(	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTOR	Description DRY	11d. See Form 990, Part X, line 15.	7,973,2
(1) C( (2) C(	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO	Description DRY	11d. See Form 990, Part X, line 15.	7,973,2
(1) C( (2) C(	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTOR	Description DRY	11d. See Form 990, Part X, line 15.	7,973,21
(1) C( (2) C( (3) O(	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTOR	Description DRY	11d. See Form 990, Part X, line 15.	7,973,2
(1) C( (1) C( (2) C( (3) O' (4)	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTOR	Description DRY	11d. See Form 990, Part X, line 15.	7,973,2
(1) C( (2) C( (3) O( (4) (5)	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTOR	Description DRY	11d. See Form 990, Part X, line 15.	7,973,2
(1) C( (1) C( (2) C( (3) O' (4) (5) (6)	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTOR	Description DRY	11d. See Form 990, Part X, line 15.	7,973,2
(1) C( (2) C( (3) O' (4) (5) (6) (7)	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTOR	Description DRY	11d. See Form 990, Part X, line 15.	7,973,27 1,077,93 1,70
(1) C( (2) C( (2) C( (3) O' (4) (5) (6) (7) (8) (9) (20) (20) (20) (20) (20) (20) (20) (20	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTO THER CURRENT ASSETS  umm (b) must equal Form 990, Part X, col. (B) line	Description DRY RY	11d. See Form 990, Part X, line 15.	7,973,2 1,077,93 1,70
(1) C( (2) C( (2) C( (3) O' (4) (5) (6) (7) (8) (9) (20) (20) (20) (20) (20) (20) (20) (20	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTO THER CURRENT ASSETS	Description DRY RY		7,973,27 1,077,93 1,70
(1) C( (2) C( (2) C( (3) O' (4) (5) (6) (7) (8) (9) (20) (20) (20) (20) (20) (20) (20) (20	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTO THER CURRENT ASSETS  umm (b) must equal Form 990, Part X, col. (B) line	Description DRY RY	Þ	7,973,2 1,077,9 1,70 9,052,9
(1) C( (2) C( (2) C( (3) O' (4) (5) (6) (7) (8) (9) (20) (20) (20) (20) (20) (20) (20) (20	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTO THER CURRENT ASSETS  umm (b) must equal Form 990, Part X, col. (B) line Other Liabilities.	Description DRY RY	Þ	7,973,2 1,077,9 1,70 9,052,9
(1) C( (2) C( (2) C( (3) O' (4) (5) (6) (7) (8) (9) tal. (Col	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTO THER CURRENT ASSETS  umm (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes"	Description DRY RY	Þ	7,973,2 1,077,9 1,70 9,052,9 5.
(1) C( (2) C( (2) C( (3) O' (4) (5) (6) (7) (8) (9) tal. (Col	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTO THER CURRENT ASSETS  umm (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description DRY RY	Þ	7,973,2 1,077,9 1,70 9,052,9 5.
(1) C( (2) C( (2) C( (3) O' (4) (5) (6) (7) (8) (9) tal. (Col vart X (1) Fe	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTO THER CURRENT ASSETS  umm (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description DRY RY	Þ	7,973,2 1,077,9 1,70 9,052,9 5.
(1) C( (2) C( (2) C( (3) O' (4) (5) (6) (7) (8) (9) tal. (Col vart X (1) Fe (2)	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTO THER CURRENT ASSETS  umm (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description DRY RY	Þ	7,973,2 1,077,9 1,70 9,052,9 5.
(1) C( (2) C( (3) O' (4) (5) (6) (7) (8) (9) (9) (1) Fe (2) (3)	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTO THER CURRENT ASSETS  umm (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description DRY RY	Þ	7,973,2 1,077,9 1,70 9,052,9 5.
(1) C( (2) C( (3) O' (4) (5) (6) (7) (8) (9) (7) (8) (9) (1) Fe (2) (3) (4)	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTO THER CURRENT ASSETS  umm (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description DRY RY	Þ	7,973,2 1,077,9 1,70 9,052,9 5.
(1) C( (2) C( (3) O' (4) (5) (6) (7) (8) (9) (8) (9) (6) (7) (8) (9) (1) Fe (2) (3) (3) (4) (5) (5) (5) (6)	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTO THER CURRENT ASSETS  umm (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description DRY RY	Þ	7,973,2 1,077,9 1,70 9,052,9 5.
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(1) C( (2) C( (3) O' (4) (5) (6) (7) (8) (7) (8) (7) (8) (1) Fe (2) (3) (4) (5) (6) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered "Yes" (a) ONTRIBUTED HOUSES INVENTO ONTRIBUTED GOODS INVENTO THER CURRENT ASSETS  umm (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description DRY RY	Þ	7,973,2 1,077,9 1,70 9,052,9 5.
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132053 10-28-21

1	Complete if the organization answered "Yes" on Form 990, Part IV, lin	ne 12a.			
	Total revenue, gains, and other support per audited financial statements			1	46,001,674.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	931.		
b	Donated services and use of facilities	2b	4,420,350.	1.	
c	Recoveries of prior year grants	20			
d	Other (Describe in Part XIII.)	2d	814,791.		0.000000000
	Add lines 2a through 2d			20	5,236,072
3	Subtract line 2e from line 1			3	40,765,602.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1	150		
	Investment expenses not included on Form 990, Part VIII, line 7b		150.		
	Other (Describe in Part XIII.)	4b	95,287.		05 427
	Add lines 4a and 4b			4c	95,437
Dat	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 rt XII Reconciliation of Expenses per Audited Financial Sta	atomonte Wi	th Expanses per F	5	
Fa	Complete if the organization answered "Yes" on Form 990, Part IV, lin		ui Expenses per r	verui	
				1	44,416,636
	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:			1	44,410,030
	Donated services and use of facilities	20	4,420,350.		
	Prior year adjustments		4,400,000.	1	
	Other losses				
	Other (Describe in Part XIII.)		814,791.	1	
-	Add lines 2a through 2d			2e	5,235,141
	Subtract line 2e from line 1			3	39,181,495.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			1000	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	150.		
b	Other (Describe in Part XIII.)	46	95,287.		
c	Add lines 4a and 4b			4c	95,437
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8.)		5	39,276,932
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and			; Part	X, line 2; Part XI,
	Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a			; Part	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a			; Part	X, line 2; Part XI,
PAF	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a RT IV, LINE 2B:	ny additional infe	ormation.		2
PAF	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	ny additional infe	ormation.		2
PAF	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a RT IV, LINE 2B:	RONT, HE	NDRICKS PROP	ERT	Y
PAF	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a RT IV, LINE 2B: ROUGH AN AGREEMENT WITH OPERATION HOMEF!	RONT, HE	NDRICKS PROP	ERT IPA	Y TING IN
PAF PAF MAN	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a RT IV, LINE 2B: ROUGH AN AGREEMENT WITH OPERATION HOMEF NAGEMENT LLC COLLECTS SECURITY DEPOSITS E PERMANENT HOMES FOR VETERANS PROGRAM.	RONT, HE FROM CL HENDRIC	NDRICKS PROP IENTS PARTIC	ERT IPA ECT	Y TING IN S FUNDS
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PAH THE MAN THE FRC COS DEI DEI	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a RT IV, LINE 2B: ROUGH AN AGREEMENT WITH OPERATION HOMEFINA NAGEMENT LLC COLLECTS SECURITY DEPOSITS E PERMANENT HOMES FOR VETERANS PROGRAM. OM THE CLIENTS EACH MONTH IN ORDER TO PART STS WHILE THE CLIENTS ARE OCCUPYING THE EDED TO THE CLIENT. HENDRICKS REIMBURSE POSITS AND OPERATION HOMEFRONT FOR PROPA ESE SECURITY DEPOSITS AND ESCROW ACCOUNT	NY additional info RONT, HE FROM CL HENDRIC AY PROPE HOMES, S THE CL ERTY TAX TS ARE M	NDRICKS PROP IENTS PARTIC KS ALSO COLL RTY TAXES AN BUT BEFORE T IENTS FOR SE ES AND OTHER AINTAINED BY	ERT IPA ECT D I HEY CUR CO OP	Y TING IN S FUNDS NSURANCE ARE ITY STS PAID. ERATION
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PART X, LINE 2: OPERATION HOMEFRONT IS A TAX-EXEMPT ORGANIZATION UNDER INTERNAL REVENUE SERVICE CODE SECTION 501(C)(3). IN ADDITION, THE ORGANIZATION IS NOT A 'PRIVATE FOUNDATION' WITHIN THE MEANING OF SECTION 509(A) OF THE INTERNAL REVENUE CODE. DONORS OF MONEY AND/OR PROPERTY ARE ENTITLED TO THE MAXIMUM CHARITABLE CONTRIBUTION DEDUCTION ALLOWED BY LAW. THE ORGANIZATION IS NOT SUBJECT TO TEXAS MARGIN TAX. MANAGEMENT IS NOT AWARE OF ANY TAX POSITIONS THAT WOULD HAVE A SIGNIFICANT IMPACT ON ITS FINANCIAL POSITION. ITS FEDERAL TAX RETURNS FOR THE LAST FOUR YEARS REMAIN SUBJECT TO EXAMINATION. PART XI, LINE 2D - OTHER ADJUSTMENTS: EMPLOYEE RETENTION CREDIT PART XI, LINE 4B - OTHER ADJUSTMENTS: EMPLOYEE RETENTION CREDIT PART XII, LINE 4B - OTHER ADJUSTMENTS: EMPLOYEE RETENTION CREDIT PART XII, LINE 4B - OTHER ADJUSTMENTS: EMPLOYEE RETENTION CREDIT PART XII, LINE 4B - OTHER ADJUSTMENTS: EMPLOYEE RETENTION CREDIT Standard D(Form 990, 2021 31 2021.03040 OPERATION HOMEFRONT, INC. 058-0	Schedule D (Form 990) 2021 OPERATION HOM	EFRONT, INC.		32-00	33325	Page 5
SERVICE CODE SECTION 501(C)(3). IN ADDITION, THE ORGANIZATION IS NOT A 'PRIVATE FOUNDATION' WITHIN THE MEANING OF SECTION 509(A) OF THE INTERNAL REVENUE CODE. DONORS OF MONEY AND/OR PROPERTY ARE ENTITLED TO THE MAXIMUM CHARITABLE CONTRIBUTION DEDUCTION ALLOWED BY LAW. THE ORGANIZATION IS NOT SUBJECT TO TEXAS MARGIN TAX. MANAGEMENT IS NOT AWARE OF ANY TAX POSITIONS THAT WOULD HAVE A SIGNIFICANT IMPACT ON ITS FINANCIAL POSITION. ITS FEDERAL TAX RETURNS FOR THE LAST FOUR YEARS REMAIN SUBJECT TO EXAMINATION. PART XI, LINE 2D - OTHER ADJUSTMENTS: EMPLOYEE RETENTION CREDIT PART XI, LINE 4B - OTHER ADJUSTMENTS: EMPLOYEE RETENTION CREDIT PART XII, LINE 2D - OTHER ADJUSTMENTS: EMPLOYEE RETENTION CREDIT PART XII, LINE 4B - OTHER ADJUSTMENTS: ENDION PART XII, LINE 4B - OTHER ADJUSTMENTS: ENDIONE PART XII = CONE						
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THAT WOULD HAVE A SIGNIFICANT IMPACT ON ITS FINANCIAL POSITION. ITS         FEDERAL TAX RETURNS FOR THE LAST FOUR YEARS REMAIN SUBJECT TO EXAMINATION.         PART XI, LINE 2D - OTHER ADJUSTMENTS:         EMPLOYEE RETENTION CREDIT       814,791.         PART XI, LINE 4B - OTHER ADJUSTMENTS:         BAD DEBT PROVISION       95,287.         PART XII, LINE 2D - OTHER ADJUSTMENTS:         EMPLOYEE RETENTION CREDIT       814,791.         PART XII, LINE 2D - OTHER ADJUSTMENTS:         EMPLOYEE RETENTION CREDIT       814,791.         PART XII, LINE 4B - OTHER ADJUSTMENTS:         BAD DEBT PROVISION       95,287.         PART XII, LINE 4B - OTHER ADJUSTMENTS:         BAD DEBT PROVISION       95,287.	CHARITABLE CONTRIBUTION DEDUCTION	ALLOWED BY	LAW. THE O	RGANIZATION	ISN	OT
FEDERAL TAX RETURNS FOR THE LAST FOUR YEARS REMAIN SUBJECT TO EXAMINATION.         PART XI, LINE 2D - OTHER ADJUSTMENTS:         EMPLOYEE RETENTION CREDIT         PART XI, LINE 4B - OTHER ADJUSTMENTS:         BAD DEBT PROVISION         95,287.         PART XII, LINE 2D - OTHER ADJUSTMENTS:         EMPLOYEE RETENTION CREDIT         95,287.         PART XII, LINE 2D - OTHER ADJUSTMENTS:         EMPLOYEE RETENTION CREDIT         814,791.         PART XII, LINE 4B - OTHER ADJUSTMENTS:         BAD DEBT PROVISION       95,287.         BAD DEBT PROVISION       95,287.	SUBJECT TO TEXAS MARGIN TAX. MANAG	EMENT IS NO	T AWARE OF	ANY TAX PO	SITIO	NS
PART XI, LINE 2D - OTHER ADJUSTMENTS: EMPLOYEE RETENTION CREDIT 814,791. PART XI, LINE 4B - OTHER ADJUSTMENTS: BAD DEBT PROVISION 95,287. PART XII, LINE 2D - OTHER ADJUSTMENTS: EMPLOYEE RETENTION CREDIT 814,791. PART XII, LINE 4B - OTHER ADJUSTMENTS: BAD DEBT PROVISION 95,287. BAD DEBT PROVISION 95,287. Schedule D (Form 990) 2021	THAT WOULD HAVE A SIGNIFICANT IMPA	ACT ON ITS F	INANCIAL P	OSITION. IT	s	
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PART XI, LINE 4B - OTHER ADJUSTMENTS:          BAD DEBT PROVISION       95,287.         PART XII, LINE 2D - OTHER ADJUSTMENTS:       814,791.         PART XII, LINE 2D - OTHER ADJUSTMENTS:       814,791.         PART XII, LINE 4B - OTHER ADJUSTMENTS:       95,287.         BAD DEBT PROVISION       95,287.	PART XI, LINE 2D - OTHER ADJUSTMEN	ITS:				
BAD DEBT PROVISION       95,287.         PART XII, LINE 2D - OTHER ADJUSTMENTS:       814,791.         PART XII, LINE 4B - OTHER ADJUSTMENTS:       814,791.         PART XII, LINE 4B - OTHER ADJUSTMENTS:       95,287.         BAD DEBT PROVISION       95,287.	EMPLOYEE RETENTION CREDIT				814,	791.
PART XII, LINE 2D - OTHER ADJUSTMENTS: EMPLOYEE RETENTION CREDIT 814,791. PART XII, LINE 4B - OTHER ADJUSTMENTS: BAD DEBT PROVISION 95,287. Schedule D (Form 990) 2021 Schedule D (Form 990) 2021	PART XI, LINE 4B - OTHER ADJUSTMEN	TS:				
EMPLOYEE RETENTION CREDIT         814,791.           PART XII, LINE 4B - OTHER ADJUSTMENTS:         BAD DEBT PROVISION         95,287.           BAD DEBT PROVISION         95,287.         95,287.	BAD DEBT PROVISION				95,	287.
PART XII, LINE 4B - OTHER ADJUSTMENTS: BAD DEBT PROVISION 95,287. 95,287. 95,287. Schedule D (Form 990) 2021 13205 10-28-21	PART XII, LINE 2D - OTHER ADJUSTME	INTS:				
BAD DEBT PROVISION 95,287.	EMPLOYEE RETENTION CREDIT				814,	791.
Schedule D (Form 990) 2021	PART XII, LINE 4B - OTHER ADJUSTME	INTS:				
132055 10-28-21 31	BAD DEBT PROVISION				95,	287.
132055 10-28-21 31						
132065 10-28-21 31						
132065 10-28-21 31						
132055 10-28-21 31						
	132055 10-28-21			Schedule	e D (Form	990) 2021
	4290505 131839 058-033730		OPERATION	HOMEFRONT,	INC.	058-03

(Form 990)	Complete if th	ental Information Regarding e organization answered "Yes" on organization entered more than \$1	Form	990, P	art IV, line 17, 18, o	r 19, or if the	2021
Department of the Treasury		Attach to Form 990					Open to Public
Internal Revenue Service Name of the organizatio		o to www.irs.gov/Form990 for inst	ruction	s and	the latest information		Inspection entification number
name of the organizatio		ON HOMEFRONT, INC.				32-003	
Part I Fundrais		Complete if the organization answ		es" or	Form 990, Part IV, I	ine 17. Form 990-E	Z filers are not
	complete this par						
a X Mail solicital	-	sed funds through any of the following	-		overnment grants		
	email solicitations	s f 🗶 Solicita	ation of	gover	nment grants		
c Phone solic		g X Specia	il fundra	ising	events		
d X In-person so		or oral agreement with any individua	lőnekve	ina of	licare directore Inve	lease or	
-		art VII) or entity in connection with p		-		X Y	s 🗌 No
b If "Yes," list the 10	) highest paid indi	viduals or entities (fundraisers) pursu	uant to	agreer	ments under which th	he fundraiser is to	be
compensated at le	east \$5,000 by the	organization.					
(i) Name and addres	e of individual		.00	Did	(iv) Gross receipts	(v) Amount paid	(vi) Amount paid
or entity (fund		(iii) Activity	fund have o or con	trol of	from activity	to (or retained by fundraiser	to (or retained by) organization
MARKETEAM - 1200 A	DEDNIS BUTY		Contrib Yes	No No		listed in col. (i)	-
ROAD NE, STE 1600,		DIRECT RESPONSE/PRINTING	Tes	X	4,807,482.	2,029,803	2,777,679.
			-				
			+				
			+	_			
			+	-			
			+				
Total	ish the executive	a la registerad as lineaned to colleit	contrib	<b>•</b>	4,807,482.	2,029,803	
or licensing.	ich the organizatio	on is registered or licensed to solicit	contrib	Joons	or has been notified	it is exempt from i	egistration
AL, AK, AZ, AR,	CA, CO, CT,	DE, FL, GA, HI, ID, IL,	IN,I	A,K	S, KY, LA, ME	, MD, MA, MI	, MN, MS, MO
MT, NE, NV, NH,	NJ, NM, NY,	NC, ND, OH, OK, OR, PA,	RI,S	C,S	D, TN, TX, UT	, VT, VA, WA	,WV,WI,WY
LUA For Descent D	aduation 8-181-1	in the last with a feet	000	000 5	7	Bahada	6 C /Earne 0001 000
		ice, see the Instructions for Form FOR CONTINUATIONS	990 OF	990-E	2.	Schedu	le G (Form 990) 202
32081 10-21-21	I MALL IV	FOR CONTINOATIOND					

_		ON HOMEFRONT			0033325 Page 2
Pa	art II Fundraising Events. Complete if the				
_	of fundraising event contributions and gro				s greater than \$5,000.
- 1		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
- 1		VFSAC GOLF			(add col. (a) through
- 1		TOURNAMENT	MCOY	1	
- 1		(event type)	(event type)	(total number)	col. (c))
9			(creating page)	1	
Reven	1 Gross receipts	163,750.	131,000.	88,134.	382,884
	2 Less: Contributions	140,618.	131,000.	65,160.	336,778
$\downarrow$	3 Gross income (line 1 minus line 2)	23,132.		22,974.	46,106
	4 Cash prizes	0.	80,000.		80,000.
	5 Noncash prizes	429.	1,390.	263.	2,082.
Expenses	6 Rent/facility costs	17,318.	0.	9,700.	27,018.
Direct E	7 Food and beverages	11,974.	٥.	3,761.	15,735.
		٥.	o.		
- 1	8 Entertainment	32,522.	0.	4 000	27 504
- 1	9 Other direct expenses		0.	4,982.	37,504
- 1	10 Direct expense summary. Add lines 4 through				162,339
	11 Net income summary. Subtract line 10 from lin	ne 3, column (d)			-116,233
Pa	art III Gaming. Complete if the organization a	answered "Yes" on Form	990, Part IV, line 19, or r	eported more than	
	\$15,000 on Form 990-EZ, line 6a.				
		(a) Binon	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue		(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c
20					
e e					
$\rightarrow$	1 Gross revenue				
- 1					
8	2 Cash prizes				
Expenses	3 Noncash prizes				
Direct E	4 Rent/facility costs				
$\rightarrow$	5 Other direct expenses			_	
- 1		Yes %	Yes %	Yes %	
- 1	6 Volunteer labor	No	No	No	
	7 Direct expense summary. Add lines 2 through	5 in column (d)		•	
	8 Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	Enter the state(s) in which the organization condu	cts gaming activities:			
a	a Is the organization licensed to conduct gaming ac	tivities in each of these	states?		Yes No
	b If "No," explain:				
10.2	Were any of the organization's gaming licenses re-	voked, suspended, or te	rminated during the tax w	ear?	Yes No
	b If "Yes," explain:	renda, anapanana, or re	and a second second and the text y		
0	, i too, togram.				
13300	82 10-21-21			Sepa	dule G (Form 990) 202
10200	be menel			Sche	unio di (Form 990) 202
		33			
905	505 131839 058-033730		03040 OPERATI	ON HOMERDON	TNC 059
505	303 131033 030-033730	2021.	COULD OF BRATI	ON HOMEFROM	, INC. 050-

	Does the organization conduct gaming activities with nonmembers?		Vee	
12	Does the organization conduct gaming activities with nonmembers?		res	
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	
	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a		9
b	An outside facility	13b		9
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	🗌 No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount			
	of gaming revenue retained by the third party <b>&gt;</b> \$			
c	If "Yes," enter name and address of the third party:			
	Name 🕨			
	Address 🕨			
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation  \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
-				
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
a			Yes	
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		Yes	□ No
	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?			
b	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ Inter IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part			
Pa	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Denter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ <b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	t III, lin		
Pa	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ Inter IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part	t III, lin		
Pa SC	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? • Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ <b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS	t III, lin		
	a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ <b>TUV</b> Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS ) NAME OF FUNDRAISER: MARKETEAM	t III, lin		
	<ul> <li>Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?</li> <li>Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$</li> <li>Supplemental Information. Provide the explanations required by Part I, line 2b, columns (ii) and (v); and Part 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.</li> <li>HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS</li> <li>NAME OF FUNDRAISER: MARKETEAM</li> <li>ADDRESS OF FUNDRAISER:</li> </ul>	t III, lin		
	a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ <b>TUV</b> Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS ) NAME OF FUNDRAISER: MARKETEAM	t III, lin		
	<ul> <li>Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?</li> <li>Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$</li> <li>Supplemental Information. Provide the explanations required by Part I, line 2b, columns (ii) and (v); and Part 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.</li> <li>HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS</li> <li>NAME OF FUNDRAISER: MARKETEAM</li> <li>ADDRESS OF FUNDRAISER:</li> </ul>	t III, lin		
	<ul> <li>Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?</li> <li>Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$</li> <li>Supplemental Information. Provide the explanations required by Part I, line 2b, columns (ii) and (v); and Part 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.</li> <li>HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS</li> <li>NAME OF FUNDRAISER: MARKETEAM</li> <li>ADDRESS OF FUNDRAISER:</li> </ul>	t III, lin		
	<ul> <li>Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?</li> <li>Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$</li> <li>TIV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.</li> <li>HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS</li> <li>) NAME OF FUNDRAISER: MARKETEAM</li> <li>) ADDRESS OF FUNDRAISER:</li> <li>00 ABERNATHY ROAD NE, STE 1600, ATLANTA, GA 30328</li> </ul>	t III, in	nes 9,	

Part IV Supplemental Informati	ERATION HOMEFRONT on (continued)		32-0033325 Page 4
			Schedule G (Form 990
32084 11-18-21			
	35		HOMEFRONT, INC. 058-0
0505 131839 058-033730	2021.	03040 OPERATION	HOMEFRONT, INC. 058-

SCHEDULE I (Form 990)	,	Go	rants and Oth vernments, an ete if the organization	d Individual n answered "Yes" Attach to For	ls in the Uni on Form 990, Pa m 990.	ted States rt IV, line 21 or 22.		OMB No. 1545-0047
Internal Revenue Service			Go to www.ir	s.gov/Form990 fo	r the latest inform	nation.		Inspection
Name of the organiz	operation	HOMEFRON	r, INC.					Employer identification number 32-0033325
Part I General	Information on Grants a	nd Assistance						
1 Does the orga	nization maintain records t	lo substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the select	ion
criteria used t	o award the grants or assis	tance?						X Yes No
2 Describe in Pa	art IV the organization's pro	cedures for monits	oring the use of grant t	funds in the United	States.			
	and Other Assistance to I					anization answered "Y	es" on Form 990, Par	t IV, line 21, for any
recipien	t that received more than \$	5,000. Part II can	be duplicated if addition	onal space is need	ed.			
	address of organization government	(b) EN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
2 Enter total nur	mber of section 501(c)(3) a	nd government org	anizations listed in the	e line 1 table				• •
	mber of other organizations							
	ork Reduction Act Notice,							Schedule I (Form 990) 2021

132101 10-26-21

art III Grants and Other Assistance to Domestic Individuals.	Complete if the		red "Yes" on Form 9	90. Part IV, line 22.	32-0033325 Page
Part III can be duplicated if additional space is needed.					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
					FOOD, TOYS, FURNITURE,
					COMPUTERS AND COMPUTER
					EQUIPMENT, CLOTHING,
ISTANCE TO CLIENTS	58447	5,346,952.	18,999,495.	PHV .	DECORATIVE ITEMS, SCHOOL
art IV Supplemental Information. Provide the information requ	ired in Part I, lin	e 2; Part III, column	(b); and any other ad	ditional information.	
RT I, LINE 2:					
TH THE EXCEPTION OF GIFT CARDS PR	OVIDED F	OR HOLIDAY	MEALS, FU	NDS ARE NOT	
ID TO THE CLIENTS DIRECTLY. THEY	ARE PAID	TO THE LE	INDING		
STITUTION/LESSOR/CREDITOR UPON RE	VIEW OF	THE BILLS	AND FINANC	IAL	
TATEMENTS.					
7) DESCRIPTION OF NON-CASH ASSISTA	NCE: FOO	D, TOYS, F	URNITURE,	COMPUTERS	
ID COMPUTER EQUIPMENT, CLOTHING, D	ECORATIV	E ITEMS, S	CHOOL SUPP	LIES, GIFT	
102 10-26-21					Schedule I (Form 990) 2021

Schedule   (Form 990) OPERATION HOMEFRONT, INC. Part IV Supplemental Information	32-0033325 Page:
CARDS, VEHICLES, AND CONCERT/SPORTS TICKETS.	
	Schedule I (Form 99
132091 04-01-21 38	

Part I Par Par b If ar rein 2 Did trus 3 Indi CEC est	eck the appropriate box t VII, Section A, line 1a. ] First-class or charter t ] Travel for companions ] Tax indemnification a ] Discretionary spendin ny of the boxes on line nbursement or provision the organization requir tetes, and officers, inclu icate which, if any, of th O/Executive Director. C	Complete Part III to provide a travel s nd gross-up payments gg account 1a are checked, did the organi n of all of the expenses descrit e substantiation prior to reimb uding the CEO/Executive Direct the following the organization us heck all that apply. Do not che the CEO/Executive Director, b littee	Id any of the following to or for a person listed on For my relevant information regarding these items. Housing allowance or residence for per Payments for business use of personal Health or social club dues or initiation f Personal services (such as maid, chauf ization follow a written policy regarding payment or bed above? If "No," complete Part III to explain ursing or allowing expenses incurred by all directors, itor, regarding the items checked on line 1a? sed to establish the compensation of the organization ick any boxes for methods used by a related organiz- but explain in Part III. Written employment contract	rsonal use residence (ees feur, chef) <u>1b</u> 2 n's	Yes
1a Che Par b If ar rein 2 Did trus 3 Indi CEC esta	eck the appropriate box t VII, Section A, line 1a. ] First-class or charter t ] Travel for companion: ] Tax indemnification a ] Discretionary spendin ny of the boxes on line nbursement or provision the organization requir tees, and officers, inclu- icate which, if any, of th O/Executive Director. C ablish compensation of ] Compensation comm ] Independent compen	exacting Compensation (es) if the organization provide Complete Part III to provide a travel s nd gross-up payments ig account 1a are checked, did the organi n of all of the expenses descrit e substantiation prior to reimb uding the CEO/Executive Direct the following the organization un heck all that apply. Do not che the CEO/Executive Director, b ittee	Id any of the following to or for a person listed on For my relevant information regarding these items. Housing allowance or residence for per Payments for business use of personal Health or social club dues or initiation f Personal services (such as maid, chauf ization follow a written policy regarding payment or bed above? If "No," complete Part III to explain ursing or allowing expenses incurred by all directors, itor, regarding the items checked on line 1a? sed to establish the compensation of the organization ick any boxes for methods used by a related organiz- but explain in Part III. Written employment contract	m 990, rsonal use residence lees feur, chef) , 1 , 2 n's	Yes
b If ar rein 2 Did trus 3 Indii CEC	t VII, Section A, line 1a. First-class or charter t Travel for companion: Tax indemnification a Discretionary spendin my of the boxes on line nbursement or provision the organization requir stees, and officers, inclu- icate which, if any, of th D/Executive Director. C ablish compensation of Compensation comm Independent compen-	Complete Part III to provide a travel s nd gross-up payments gg account 1a are checked, did the organi n of all of the expenses descrit e substantiation prior to reimb uding the CEO/Executive Direct the following the organization us heck all that apply. Do not che the CEO/Executive Director, b littee	In relevant information regarding these items. Housing allowance or residence for per Payments for business use of personal Health or social club dues or initiation f Personal services (such as maid, chauf zation follow a written policy regarding payment or bed above? If "No," complete Part III to explain ursing or allowing expenses incurred by all directors, itor, regarding the items checked on line 1a? sed to establish the compensation of the organization text any boxes for methods used by a related organiza- but explain in Part III. Written employment contract	rsonal use residence (ees feur, chef) <u>1b</u> 2 n's	
b If ar rein 2 Did trus 3 Indii CEC	t VII, Section A, line 1a. First-class or charter t Travel for companion: Tax indemnification a Discretionary spendin my of the boxes on line nbursement or provision the organization requir stees, and officers, inclu- icate which, if any, of th D/Executive Director. C ablish compensation of Compensation comm Independent compen-	Complete Part III to provide a travel s nd gross-up payments gg account 1a are checked, did the organi n of all of the expenses descrit e substantiation prior to reimb uding the CEO/Executive Direct the following the organization us heck all that apply. Do not che the CEO/Executive Director, b littee	In relevant information regarding these items. Housing allowance or residence for per Payments for business use of personal Health or social club dues or initiation f Personal services (such as maid, chauf zation follow a written policy regarding payment or bed above? If "No," complete Part III to explain ursing or allowing expenses incurred by all directors, itor, regarding the items checked on line 1a? sed to establish the compensation of the organization text any boxes for methods used by a related organiza- but explain in Part III. Written employment contract	rsonal use residence (ees feur, chef) <u>1b</u> 2 n's	
b If ar rein 2 Did trus 3 Indi CESU	First-class or charter t Travel for companion: Tax indemnification a Discretionary spendin ny of the boxes on line nbursement or provision the organization requir tees, and officers, inclu- icate which, if any, of th D/Executive Director. C ablish compensation of Compensation comm Independent compen	travel s nd gross-up payments ig account 1a are checked, did the organi n of all of the expenses descrit e substantiation prior to reimb uding the CEO/Executive Direc the following the organization us heck all that apply. Do not che the CEO/Executive Director, b littee	Housing allowance or residence for per Payments for business use of personal Health or social club dues or initiation f Personal services (such as maid, chauf variant of follow a written policy regarding payment or bed above? If "No," complete Part III to explain ursing or allowing expenses incurred by all directors, itor, regarding the items checked on line 1a? sed to establish the compensation of the organization to explain in Part III. Written employment contract	residence lees feur, chef) <u>1b</u> 2 n's	
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2 Did trus 3 Indi CEC esta	nbursement or provision the organization requir stees, and officers, inclu- icate which, if any, of th O/Executive Director. C ablish compensation of Compensation comm Independent compen	n of all of the expenses describ e substantiation prior to reimb uding the CEO/Executive Direc he following the organization u heck all that apply. Do not che the CEO/Executive Director, b ittee	bed above? If "No," complete Part III to explain wrsing or allowing expenses incurred by all directors, itor, regarding the items checked on line 1a? sed to establish the compensation of the organization teck any boxes for methods used by a related organiz- but explain in Part III. Written employment contract	. <u>2</u>	
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CEC esta	O/Executive Director. C ablish compensation of Compensation comm Independent compen	heck all that apply. Do not che the CEO/Executive Director, b ittee	eck any boxes for methods used by a related organiz out explain in Part III. Written employment contract	<ul> <li>Constraints</li> </ul>	
CEC esta	O/Executive Director. C ablish compensation of Compensation comm Independent compen	heck all that apply. Do not che the CEO/Executive Director, b ittee	eck any boxes for methods used by a related organiz out explain in Part III. Written employment contract	<ul> <li>Constraints</li> </ul>	
esta	ablish compensation of Compensation comm Independent compen	the CEO/Executive Director, b ittee	out explain in Part III.	ation to	
	Compensation comm Independent compen	ittee	Written employment contract		
	Independent compen		and the second se		
E		sation consultant			1 1
	Form 990 of other ord		X Compensation survey or study	10000000	1 1
S 198		ganizations	X Approval by the board or compensation	n committee	
	ring the year, did any pe anization or a related or		VII, Section A, line 1a, with respect to the filing		
10.55		ent or change-of-control paym	ent?	4a	
		ryment from a supplemental no		4b	
c Par	ticipate in or receive pa	ryment from an equity-based o	ompensation arrangement?	40	
H ")	Yes" to any of lines 4a-o	, list the persons and provide	the applicable amounts for each item in Part III.		
Onl	v section 501(c)(3), 50	1(c)(4), and 501(c)(29) organi	zations must complete lines 5-9.		
		and the second state of th	1a, did the organization pay or accrue any compensa	tion	1 1
	tingent on the revenue				
a The	organization?			5a	
				5b	
H *7	Yes" on line 5a or 5b, d	escribe in Part III.			
			<ol> <li>fa, did the organization pay or accrue any compensation</li> </ol>	tion	
	tingent on the net earn				
				6a	
				<u>6b</u>	
	Yes" on line 6a or 6b, d		ta, did the organization provide any nonfixed paymer	ate.	1 1
	* 2 CO C C C C C C C C C C C C C C C C C	nd 6? If "Yes," describe in Part		7	
			or accrued pursuant to a contract that was subject to		
			- EQ 40EQ 4/4/0/0 H EVer E describe in Dect III	8	
			uttable presumption procedure described in	101000101000000000	
Rec	gulations section 53.495	58-6(c)?		9	
LHA Fo	r Paperwork Reductio	on Act Notice, see the Instruc	tions for Form 990.	Schedule J (For	m 990)

132111 11-02-21

For each individual whose compensation mus Do not list any individuals that aren't listed on Note: The sum of columns (B)(I)-(iii) for each lit	Form 9	90, Part VII.						
		(B) Breakdown of W	/2 and/or 1099-MIS/ compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(I)(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	compensation			on prior Form 95
(1) JOHN I. PRAY, JR.	0	450,000.	45,000.	720.	10,907.	0.	506,627.	
PRESIDENT/CEO	00	0.	0.	0.	0.	0.	0.	
(2) MARGUERITE KIRST	0	241,797.	25,000.	0.	7,115.	1,923.	275,835.	
CHIEF REVENUE OFFICER	00	0.	0.	0.	0.	0.	0.	
(3) ROBERT THOMAS	0	222,288.	19,000.	720.	6,856.	761.	249,625.	
CHIEF OPERATING OFFICER	00	0.	0.	0.	0.	0.		
(4) ANDRE HAWKINS	0)	158,444.	12,700.	0.	6,748.	23,044.	200,936.	
CHIEF FINANCIAL OFFICER	00	0.	0.	0.	0.	0.		
(5) JILL ESKIN-SWITH	0)	162,120.	6,500.	0.	6,485.	0.	175,105.	
VP OF CORPORATE & FOUNDATION PARTN	R (0)	0.	0.	0.	0.	0.	0.	
(6) TROY KASBARIAN	0)	147,283.	6,500.	720.	6,127.	7,106.	167,736.	
VP OF IT, LOGISTICS & PACILITIES	00	0.	0.	0.	0.	0.		
(7) KAREN SMITHHART	0)	136,054.	9,000.	0.	5,523.	7,106.	157,683.	
SR VP, HUMAN RESOURCES	00	0.	0.	0.	0.	0.	0.	
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132112 11-02-21

Schedule J (Form 990) 2021

40

hedule J (Form 990) 2021	OPERATION H	HOMEFRONT,	INC.			32-0033325	Page
art III Supplemental Informa							
ovide the information, explanat	ion, or descriptions require	ed for Part I, lines 1a	, 1b, 3, 4a, 4b, 4c, 5a,	5b, 6a, 6b, 7, and 8, and for	Part II. Also complete this	part for any additional information.	
						Schedule J (Form	990) 20
13 11-02-21			41				
			41				

Depart	Immed of the Treasury       Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.         Immed of the Treasury       Attach to Form 990.         If Revenue Service       Go to www.irs.gov/Form990 for instructions and the latest information.						20 Open to Inspe			
Name	e of the organiz							ridentificatio		
Par	rt I Type:	s of Property								_
	1000 fills 100 second		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contr amounts repoi Form 990, Part V	rted on	noncash c	(d) d of determin ontribution ar		5
1		art	-							_
2	Art - Historical	treasures								_
3		l interests			54	000	mar			_
4		blications			1,053	,082.				_
5	C	nousehold goods	X	7	1,055	,440.	PMV			_
6		r vehicles	-	<u> </u>	203	,440.	FMV			_
7	Boats and pla Intellectual pro		-				-			-
9	A 112 1 2 2 1 1 2 3 4	blicly traded	X	10	320	,904.	FMV			_
10		osely held stock								_
11		rtnership, LLC, or								
12	Securities - Mi									_
13	Qualified cons Historic struct	ervation contribution - ures								
14	Qualified cons	ervation contribution - Other								
15	Real estate - F	lesidential	X	6	1,627	,141.	FMV			
16	Real estate - C		-							_
17		Other								_
18				10	120		-		_	_
19	Food inventor		X	46	136	,651.	FMV			_
20	Drugs and me		-				-			_
21			-							_
22	Historical artif		-							_
23	Scientific spec Archeological		-			_	<u> </u>			_
25		(TOYS )	X	49	5,416	.892.	FMV			-
26		SCHOOL SUPPLI	X	69	4,858					_
27		GIFT CARDS	X	137			FACE VAL	UE		_
28	Other ►	BABY ITEMS	X	68		,099.		0000		
29	Number of Fo	ms 8283 received by the orga	nization during	the tax year for co	ntributions				- 10.0	
	for which the	organization completed Form 8	283, Part V, D	onee Acknowledge	ment	29			6	1
						25		-	Yes	N
30a		r, did the organization receive								
		at least three years from the da		I contribution, and	which isn't require	ed to be u	used for			
		ses for the entire holding perio	d?					30a		13
		ibe the arrangement in Part II.	1						v	F
		nization have a gift acceptance						31	X	$\vdash$
	contributions?			**************************************	0.0001000000000000000000000000000000000			32a		3
	If "Yes," descri If the organiza	ibe in Part II. tion didn't report an amount in	column (c) fo	r a type of property	for which column	(a) is che	cked			
-	describe in Pa	et II.				i (a) is crie	23.99A 		0000	
LHA	For Paperw	ork Reduction Act Notice, se	e the instruc	uons for Porm 990			Sche	dule M (Forn	1990	20
	1 11-17-21									

Schedule M (Form 990) 2021 OPERATION HOMEFRONT, INC.	32-0033323	Page :
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, is reporting in Part I, column (b), the number of contributions, the number of items received, or this part for any additional information.		
PART I, OTHER TYPES OF PROPERTY:		
AUCTION ITEMS AND GOODLE BAGS		
(A) CHECK IF APPLICABLE = X		
(B) NUMBER OF CONTRIBUTIONS = 21		
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 6052.		
(D) METHOD OF DETERMINING REVENUE: FMV		

PET FOOD

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 20

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 2902.

hedule M (Form 990) 2021 OPERATION HOMEFRONT, INC.

(D) METHOD OF DETERMINING REVENUE: FMV

SCHEDULE M, PART I, COLUMN (B):

AMOUNTS IN COLUMN B FOR LINES 6 & 15 ARE NUMBER OF ITEMS CONTRIBUTED.

43

ALL OTHER AMOUNS IN COLUMN B ARE NUMBER OF CONTRIBUTIONS.

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Schedule M (Form 990) 2021

32-0033325 Page 2

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization 

Employer identification number 32-0033325

FORM 990, PART VI, SECTION A, LINE 1A:

THE EXECUTIVE COMMITTEE SHALL BE ESTABLISHED AS SET FORTH AND PURSUANT TO

ARTICLE VII, SECTION 1, OF THE ASSOCIATION'S BYLAWS. THE WORK OF THE

OPERATION HOMEFRONT, INC.

COMMITTEE REVOLVES AROUND FOUR MAJOR AREAS:

-PERFORM POLICY WORK

-ACT AS LIAISON TO THE PRESIDENT/CEO

-CONDUCT EXECUTIVE SEARCHES

-HANDLE URGENT OR EMERGENCY ISSUES

THE EXECUTIVE COMMITTEE IS COMMISSIONED BY AND RESPONSIBLE TO THE BOARD TO:
-ACT ON BEHALF OF THE BOARD ON ALL EMERGENCY ISSUES RELATED TO BUSINESS
THAT ARISES BETWEEN BOARD MEETINGS. THE COMMITTEE CHAIR WILL NOTIFY THE
REMAINING BOARD MEMBERS THROUGH ELECTRONIC MEANS. THE ISSUE WILL BE ADDED
TO THE AGENDA OF THE NEXT MEETING FOR FULL BOARD DISCUSSION.
-CONDUCT THE ANNUAL PERFORMANCE ASSESSMENT OF THE PRESIDENT/CEO. THE
RESULTS OF THE ASSESSMENT WILL BE REPORTED TO THE FULL BOARD. THE CHAIRMAN
WILL REVIEW THE RESULTS OF THE EVALUATION WITH THE PRESIDENT/CEO.
-COORDINATE AND REVIEW THE GOALS AND OBJECTIVES OF THE CURRENT STRATEGIC
PLAN AND INCORPORATE ANY RECOMMENDED CHANGES INTO THE PRESIDENT/CEO GOALS
FOR THE NEXT EVALUATION YEAR.
-WHEN REQUIRED, ASSUME THE ROLE AS THE EXECUTIVE SEARCH COMMITTEE IN THE
SEARCH FOR A NEW PRESIDENT/CEO.
-OBTAIN APPROVAL FROM THE FULL BOARD BEFORE TERMINATING AN EXISTING
PRESIDENT/CEO OR HIRING A NEW PRESIDENT/CEO.
-RESOLVE AN EMERGENCY OR ORGANIZATIONAL CRISIS (E.G., LOSS OF FUNDING OR
UNEXPECTED LOSS OF PRESIDENT/CEO).
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2021
132211 11-11-21 44
14290505 131839 058-033730 2021.03040 OPERATION HOMEFRONT, INC. 058-033

Name of the organization OPERATION HOMEFRONT, INC.	Employer identification number 32-0033325
-MAKE FUNDING DECISIONS UP TO \$500,000. THE DECIS	ION WILL BE ADDED TO THE
AGENDA OF THE NEXT MEETING FOR FULL BOARD DISCUSS	ION. ANY DECISION GREATER
THAN \$500,000 WILL BE BROUGHT TO THE ATTENTION OF	THE FULL BOARD.
FORM 990, PART VI, SECTION B, LINE 11B:	
THE FORM 990 IS REVIEWED BY THE CEO, CDO, COO, CF	AO, AND SR. VP OF HR PRIOR
TO SUBMITTING TO THE BOARD OF DIRECTORS FOR APPRO	WAL.
FORM 990, PART VI, SECTION B, LINE 12C:	
EACH YEAR, ALL BOARD MEMBERS ARE REQUIRED TO REVI	EW AND RECERTIFY THE
CONFLICT OF INTEREST POLICY. IF A POTENTIAL CONFL	ICT OF INTEREST ARISES ITS
DISCUSSED BY THE AFFECTED INDIVIDUAL, THE CEO AND	THE BOARD. IT IS ALSO
DISCUSSED PERIODICALLY DURING THE YEAR WHEN THE B	OARD MEMBERSHIP IS
REASSESSED.	
FORM 990, PART VI, SECTION B, LINE 15:	
AN EMPLOYEE COMPENSATION STUDY WAS PERFORMED IN M	ID-2020. THE STUDY LOOKED
AT A NUMBER OF FACTORS INCLUDING JOB CONTENT, ORG	ANIZATIONAL REVENUE AND
PROFILE, INDUSTRY, AND GEOGRAPHIC REGION. THIS CO	MPENSATION SURVEY WAS USED
TO DETERMINE THAT CURRENT EMPLOYEE COMPENSATION W	AS REASONABLE AND WITHIN
RANGE.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIV	ING COPY OF FORM 990:
AL, AK, AZ, AR, CA, CO, CT, DC, DE, FL, GA, HI, ID, IL, IN, IA, K	S, KY, LA, ME, MD, MA, MI, MN, MS
MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, S	D, TN, TX, UT, VT, VA, WA, WV, WI,
WY	
FORM 990, PART VI, SECTION C, LINE 19:	
132212 11-11-21 45	Schedule O (Form 990) 203

Name of the organization OPERATION HOMES	FRONT, INC.		Employer iden 32-00	ntification numbe 33325
THE FINANCIAL STATEMENTS ARE	MADE AVAILABLE	ON OPERATION	HOMEFRONT	WEBSITE
AND ARE AVAILABLE				
UPON REQUEST.				
132212 11-11-21	46		Schedule	O (Form 990) 202

## **OPERATION HOMEFRONT**

FINANCIAL STATEMENTS AND INDEPENDENT AUDITORS' REPORT

YEARS ENDED DECEMBER 31, 2021 AND 2020



WEALTH ADVISORY | OUTSOURCING AUDIT, TAX, AND CONSULTING

CLAconnect.com

## OPERATION HOMEFRONT TABLE OF CONTENTS YEARS ENDED DECEMBER 31, 2021 AND 2020

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STATEMENTS OF FINANCIAL POSITION	4
STATEMENTS OF ACTIVITIES	5
STATEMENTS OF FUNCTIONAL EXPENSES	7
STATEMENTS OF CASH FLOWS	9
NOTES TO FINANCIAL STATEMENTS	10



CliftonLarsonAllen LLP CLAconnect.com

#### INDEPENDENT AUDITORS' REPORT

Board of Directors Operation Homefront San Antonio, Texas

# Report on the Audit of the Financial Statements

## Opinion

We have audited the accompanying financial statements of Operation Homefront, which comprise the balance sheets as of December 31, 2021, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Operation Homefront as of December 31, 2021, and the results of its operations and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

### Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Operation Homefront and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

## Other Matter

The financial statements of Operation Homefront as of and for the year ended December 31, 2020, were audited by other auditors, whose report dated March 26, 2021 expressed an unmodified opinion on those financial statements. As discussed in Note 13 to the financial statements, Operation Homefront has adjusted its 2020 financial statements to retrospectively apply the change in accounting for correction of an error. The other auditors reported on the financial statements before the retrospective adjustment.

As part of our audit of the 2021 financial statements, we also audited the adjustment to the 2020 financial statements to retrospectively apply the change in accounting as described in Note 13. In our opinion, such adjustments are appropriate and have been properly applied. We were not engaged to audit, review, or apply any procedures to Operation Homefront's 2020 financial statements other than with respect to the adjustments and, accordingly, we do not express an opinion or any other form of assurance on the 2020 financial statements as a whole.



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#### **Responsibilities of Management for the Financial Statements**

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Operation Homefront's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

## Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit
  procedures that are appropriate in the circumstances, but not for the purpose of expressing an
  opinion on the effectiveness of Operation Homefront's internal control. Accordingly, no such
  opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant
  accounting estimates made by management, as well as evaluate the overall presentation of the
  financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Operation Homefront's ability to continue as a going concern for a reasonable period of time.

Board of Directors Operation Homefront

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Clifton Larson Allen LLP

CliftonLarsonAllen LLP

San Antonio, Texas April 19, 2022

## OPERATION HOMEFRONT STATEMENTS OF FINANCIAL POSITION DECEMBER 31, 2021 AND 2020

ASSETS	2021	2020
ASSETS		
Cash:		
Operating	\$ 4,625,484	\$ 4,797,344
Escrow Funds	297,939	309,407
Security Deposits	26,500	41,500
Total Cash	4,949,923	5,148,251
Investments, at Fair Value	2,005,520	2,005,317
Contributions Receivable, Net of Discount of \$95,287 and \$-0-	7,563,181	3,334,142
Employee Retention Credits Receivable - See Note 5	816,742	
Contributed Houses Inventory	7,973,279	12,732,616
Contributed Goods Inventory	1,077,935	971,229
Prepaid Expenses	289,343	313,718
Other Current Assets	1,703	1,701
Property and Equipment, Net	6,127,318	4,422,096
Total Assets	\$ 30,804,944	\$ 28,929,070
LIABILITIES AND NET ASSETS		
LIABILITIES		
Accounts Payable	\$ 706,516	\$ 360,567
Accrued Expenses	823,185	1,012,662
Accrued Escrow Accounts	441,439	467,907
Capital Lease Payable	160,832	<u> </u>
Total Liabilities	2,131,972	1,841,136
NET ASSETS		
Without Donor Restrictions:		
Undesignated	7,472,960	4,149,664
Designated for Thv & Th-V Transitional Housing & Villages	-	893,554
Designated for Permanent Housing	7,682,502	12,384,791
Designated for Critical Financial Assistance	4,802,086	4,106,401
Total Without Donor Restrictions	19,957,548	21,534,410
With Donor Restrictions, Time Restrictions	8,715,424	5,553,524
Total Net Assets	28,672,972	27,087,934
Total Liabilities and Net Assets	\$ 30,804,944	\$ 28,929,070

## OPERATION HOMEFRONT STATEMENT OF ACTIVITIES YEAR ENDED DECEMBER 31, 2021

	Without Donor With Donor		
	Restrictions	Restrictions	Total
SUPPORT AND REVENUES			
Contributed Houses	\$ 1,627,141	\$-	\$ 1,627,141
Contributed Goods, Services And Facilities	16,924,428	-	16,924,428
Contributions	19,183,673	7,204,195	26,387,868
Employee Retention Credit (See Note 5)	814,791	-	814,791
Special Events, Net of Expenses of \$222,740	160,144		160,144
	38,710,177	7,204,195	45,914,372
Other Revenues:			
Investment Earnings, Net	4,211	-	4,211
Other Revenues	83,091		83,091
Total Support and Revenues	38,797,479	7,204,195	46,001,674
EXPENSES			
Program Services	38,995,457		38,995,457
Management And General	2,071,210		2,071,210
Fundraising	3,349,969	-	3,349,969
Total Expenses	44,416,636	-	44,416,636
CHANGE IN NET ASSETS	(5,619,157)	7,204,195	1,585,038
Net Assets Released From Restrictions	4,042,295	(4,042,295)	
Net Assets - Beginning of Year	21,534,410	5,553,524	27,087,934
NET ASSETS - END OF YEAR	\$ 19,957,548	\$ 8,715,424	\$ 28,672,972

## OPERATION HOMEFRONT STATEMENT OF ACTIVITIES YEAR ENDED DECEMBER 31, 2020

		ithout Donor Restrictions	-	Vith Donor testrictions	_	Total
SUPPORT AND REVENUES						
Contributed Houses	\$	4,137,297	\$	-	\$	4,137,297
Contributed Goods, Services And Facilities,						
As Restated		20,691,455		-		20,691,455
Contributions		16,129,135		3,043,524		19,172,659
PPP Grant		1,607,412		-		1,607,412
Special Events, Net of Expenses of \$168,839		200,257		-		200,257
		42,765,556		3,043,524	_	45,809,080
Other Revenues:						
Investment Earnings, Net		19,192		-		19,192
Loss on Disposal of Contributed Houses		(142,640)		-		(142,640)
Other Revenues		6,529		-		6,529
Total Support and Revenues	_	42,648,637		3,043,524		45,692,161
EXPENSES						
Program Services, As Restated		41,408,458		-		41,408,458
Management And General		1,690,124		-		1,690,124
Fundraising		2,683,183		-		2,683,183
Total Expenses	_	45,781,765		-	_	45,781,765
CHANGE IN NET ASSETS		(3,133,128)		3,043,524		(89,604)
Net Assets Released From Restrictions		3,661,287		(3,661,287)		-
Net Assets - Beginning of Year	_	21,006,251	_	6,171,287	_	27,177,538
NET ASSETS - END OF YEAR	\$	21,534,410	\$	5,553,524	\$	27,087,934

#### OPERATION HOMEFRONT STATEMENT OF FUNCTIONAL EXPENSES YEAR ENDED DECEMBER 31, 2021

	Program Services																		
	Veteran					Permanent THV and TH-V													
	Critical Caregiver		Field Homes			Trans. Housing			Management										
	As	sistance	ce Support		Operations		1	for Veterans		& Villages		Total		and General		Fundraising		Total	
Salaries, Taxes and Employee	_		_		_		_		_		_		_		_		_		
Benefits	\$	1,518,163	\$	99,771	\$	3,541,689	\$	967,549	\$	652,933	\$	6,780,105	\$	1,297,995	\$	1,541,133	\$	9,619,233	
Professional Services		173,798		11,246		704,662		319,800		90,702		1,300,208		363,707		842,185		2,506,100	
Supplies		13,928		1,162		73,474		25,094		7,961		121,619		18,503		8,063		148,205	
Communications		14,184		1,470		69,074		20,380		11,269		116,377		26,648		7,865		150,890	
Postage and Shipping		61,718		10,003		207,803		91,631		27,487		398,642		7,824		480,493		886,959	
Occupancy		57,974		3,807		374,329		107,767		30,705		574,582		192,144		1,181		767,907	
Equipment Rental and Maintenance		1,894		124		7,930		3,521		1,135		14,604		5,651		-		20,255	
Printing and Publications		38,756		2,545		161,943		72,043		20,526		295,813		4,385		358,803		659,001	
Travel		2,700		80		15,885		2,276		1,594		22,535		5,849		14,903		43,287	
Conferences and Meetings		1,164		74		8,129		2,106		639		12,112		3,263		504		15,879	
Specific Assistance to Individuals		2,180,232		115,722		1,226,329		417,218		1,407,451		5,346,952						5,346,952	
Memberships and Dues		2,607		322		13,695		4,647		1,309		22,580		2,546		8,217		33,343	
In-Kind Expenses		1,062,139		43,932		14,424,358		7,507,500		327,826		23,365,755		76,305		29,083		23,471,143	
Depreciation		19,823		48,728		256,950		53,993		127,362		506,856		23,393		4,757		535,006	
Miscellaneous	_	18,846	_	389	_	58,276	_	11,024	_	28,182	_	116,717	_	42,997	_	52,762	_	212,476	
Total Expenses	\$	5,167,926	\$	339,375	s	21,144,526	\$	9,606,549	\$	2,737,081	\$	38,995,457	\$	2,071,210	\$	3,349,969	\$	44,416,636	
Special Events Costs Not Included Ab	wer:																		
Awards															s	81.653			
Production Costs															-	28,485			
Value to Guests																29,532			
Other Direct Costs																83,070			
															_				
Total															\$	222,740			

See accompanying Notes to Financial Statements.

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#### OPERATION HOMEFRONT STATEMENT OF FUNCTIONAL EXPENSES YEAR ENDED DECEMBER 31, 2020

		Veteran		Permanent	THV and TH-V				
	Critical	Caregiver	Field	Homes	Trans. Housing		Management		
	Assistance	Support	Operations	for Veterans	& Villages	Total	and General	Fundraising	Total
Salaries, Taxes and Employee									
Benefits	\$ 1,522,502	\$ 76,655	\$ 3,570,894	\$ 999,246	\$ 600,049	\$ 6,769,346	\$ 1,202,151	\$ 1,305,215	\$ 9,276,712
Professional Services	226,263	8,288	850,659	319,667	95,316	1,500,193	324,881	632,672	2,457,746
Supplies	7,414	525	43,199	11,223	4,684	67,045	12,463	1,444	80,952
Communications	15,575	1,107	84,185	22,922	10,118	133,907	13,475	8,215	155,597
Postage and Shipping	67,266	9,116	222,728	81,188	24,534	404,832	4,235	306,347	715,414
Occupancy	86,603	3,243	519,095	123,960	37,155	770,056	88,015	84	858,155
Equipment Rental and Maintenance	2,802	105	10,905	4,011	1,330	19,153	3,803		22,956
Printing and Publications	66,631	2,495	256,055	95,372	28,587	449,140	1,289	338,911	789,340
Travel	5,068	72	24,372	2,981	1,379	33,892	6,024	10,747	50,663
Conferences and Meetings	2,248	84	16,686	3,218	965	23,201	10,956	1,021	35,178
Specific Assistance to Individuals	2,066,828	76,197	1,036,702	623,543	1,297,616	5,100,886	-	-	5,100,886
Memberships and Dues	950	32	4,151	1,217	579	6,929	1,767	9,651	18,347
In-Kind Expenses, As Restated	1,977,454	51,971	16,710,155	6,438,803	417,066	25,595,449	2,621	18,728	25,616,798
Depreciation	92,159	53	182,865	62,382	115,215	452,674	4,256	-	456,930
Miscellaneous	11,965	407	49,130	15,582	4,681	81,755	14,188	50,148	146,091
Total Expenses	\$ 6,151,738	\$ 230,350	\$ 23,581,781	\$ 8,805,315	\$ 2,639,274	\$ 41,408,458	\$ 1,690,124	\$ 2,683,183	\$ 45,781,765
Special Events Costs Not Included Ab	ove:								
Awards								\$ 77,318	
Production Costs								60,264	
Value to Guests								11,023	
Other Direct Costs								20,234	
Total									
1 char								\$ 168,839	,

See accompanying Notes to Financial Statements.

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## OPERATION HOMEFRONT STATEMENTS OF CASH FLOWS YEARS ENDED DECEMBER 31, 2021 AND 2020

	_	2021		2020	
CASH FLOWS FROM OPERATING ACTIVITIES	~	4 505 020		(90 004)	
Change in Net Assets Adjustments to Reconcile Change in Net Assets to Net Cash	\$	1,585,038	\$	(89,604)	
Provided by Operating Activities: Depreciation		E2E 000		456,933	
Bad Debt Expense		535,006 57,861		400,933	
Realized/Unrealized (Gain) Loss on Investments		1,395		(19,192)	
Contributed Houses		(1,627,141)		(4,137,297)	
Contributed Goods. Services and Facilities		(16,924,428)		(4, 137,297) 18,581,455)	
Contributed loods, Services and Facilities		(10,924,420)	(	(48,898)	
In-Kind Expenses		23,471,139		(46,696) 23,506,792	
Loss (Gain) on Disposal of Contributed Houses		23,471,139		142,640	
Changes in Operating Assets and Liabilities:		-		142,040	
Contributions Receivable		(4,286,900)		4,686,840	
Grants Receivable		(816,742)		4,000,040	
Prepaid Expenses		24.375		13,640	
Inventory		(266,939)		(36,875)	
Other Current Assets		(200,535)		(5)	
Accounts Payable		345,949		(371,722)	
Accrued Expenses		(189,477)		167,360	
Accrued Escrow Accounts		(26,468)		104,118	
Net Cash Provided by Operating Activities	_	1.882.666		5,793,275	
Net Cash Provided by Operating Activities		1,002,000		5,755,275	
CASH FLOWS FROM INVESTING ACTIVITIES					
Purchase of Property and Equipment		(2,035,368)		(1,682,340)	
Proceeds from the Sale of Houses		(		215,157	
Purchase of investments		(326,458)			
Proceeds from sale of investments		324,860			
Net Investment Activity				50,705	
Net Cash Used by Investing Activities		(2,036,966)	(1,416,478)		
CASH FLOWS FROM FINANCING ACTIVITIES					
Payments on Capital Lease Obligations		(44,028)		-	
Payments on Debt	_	- (44.000)		(197,004)	
Net Cash Used by Financing Activities	_	(44,028)		(197,004)	
NET CHANGE IN CASH AND CASH EQUIVALENTS		(198,328)		4,179,793	
Cash and Cash Equivalents - Beginning of Year	_	5,148,251		968,458	
CASH AND CASH EQUIVALENTS - END OF YEAR	\$	4,949,923	\$	5,148,251	
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION Cash Paid During the Year for Interest	\$	8,749	\$	800	
Property and Equipment Obtained through Capital Lease	\$	204,860	\$	-	

### OPERATION HOMEFRONT NOTES TO FINANCIAL STATEMENTS YEARS ENDED DECEMBER 31, 2021 AND 2020

## NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

### **Organization**

Operation Homefront, Inc. (Organization or Operation Homefront), was incorporated in 2002 as CincHouse.com, Inc., an Arizona not-for-profit, for the purpose of providing assistance to deployed military troops and their families. The Organization changed its name to Operation Homefront, Inc. in 2006. The Organization receives its funding from community sponsorships, corporate and individual donations and also participates in numerous fundraising events throughout the year. The Organization provides emergency financial and other assistance/services to military families and wounded warriors across the United States through its 2 headquarter offices (San Antonio, TX and McLean, VA) and its 20 field offices that serve all 50 states.

Operation Homefront provides direct services to military families to alleviate emergency financial burdens as well as counseling and/or recovery support. Key service areas include:

- Financial assistance (rent/mortgage payments, home/car repairs, utility/grocery bills and other essential items);
- · Transitional and permanent housing; and
- Recurring family support (back-to-school supplies, holiday meals, holiday toys and other essential litems).

These key service areas are provided through the contribution of goods, gift cards and other services which are recognized at fair value and reflected in the accompanying financial statements as in-kind contributions which are offset by a like amount included as expenses of the Organization.

Operation Homefront also operates a program called Permanent Homes for Veterans (formally known as Homes on the Homefront), which receives donated houses from certain financial institutions. These homes are located throughout the United States and are made available to eligible military families and veteran candidates. Operation Homefront is tasked with identifying and placing eligible candidates in those homes, mortgage free. Contributions of these homes are recognized at the estimated fair value as provided by an appraisal less the present value of the estimated closing costs of transferring these homes to the deserving candidate when deeded to Operation Homefront.

## Basis of Presentation

The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with U. S. generally accepted accounting principles.

#### Cash and Cash Equivalents

Cash and cash equivalents consist of cash on hand and deposits held by financial institutions with maturities of three months or less.

## **Investments**

Investments are reported at fair market value determined by quoted market prices. Gains and losses (realized and unrealized) are reported as investment earnings, net of expenses in the accompanying statements of activities.

### OPERATION HOMEFRONT NOTES TO FINANCIAL STATEMENTS YEARS ENDED DECEMBER 31, 2021 AND 2020

## NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

## Contributions Receivable

Contributions are recorded as receivables and revenue in the year made unless the contribution is dependent upon the occurrence of a specified future and uncertain event to bind the donor. Contributions are recognized when the conditions upon which they depend are substantially met or when the possibility that the condition will not be met is remote. An allowance was not considered necessary at December 31, 2021 and 2020.

Contributed property and equipment are recorded at fair value at the date of donation. Operation Homefront records contributed property and equipment as unrestricted support unless explicit donor stipulations specify how the donated assets must be used. If a donor stipulates how long the assets must be used, the contribution is recorded as restricted support.

## **Contributed Houses Inventory**

Contributed houses inventory consists of in-kind contributions of houses from various financial institutions received by Operation Homefront for distribution in the Organization's programs. Revenue for the contributed houses is recognized in circumstances in which Operation Homefront has sufficient discretion over the use and disposition of the houses to recognize a contribution in conformity with accounting standards. Contributed houses are valued and recorded as revenue on the statement of activities at the estimated fair value as of the date contributed, less the present value of the estimated closing costs to Operation Homefront. The distribution of these houses for Operation Homefront's programs is recorded as program expenses in the statements of functional expenses.

## Contributed Goods Inventory

Contributed goods inventory consists of in-kind contributions of goods, including gift cards, children's toys and other household items acquired through major retail donations, for distribution and use in Operation Homefront's programs. Revenue for the contributed goods is recognized in circumstances in which Operation Homefront has sufficient discretion over the use and disposition of the items to recognize acontribution in conformity with accounting standards. Contributed goods are valued and recorded as revenues on the statement of activities at the estimated fair value as of the date the goods are contributed. The distribution of these contributed goods for Operation Homefront's programs are recorded as program expenses in the statements of functional expenses.

## Property and Equipment

Property and equipment is valued at historical cost or estimated fair value at the date of donation. Expenditures for betterments greater than \$1,000 that materially extend the useful life of an asset are capitalized. Depreciation is recorded using the straight-line method over the estimated useful lives of the related assets, which is generally three to five years for furniture, equipment, and software, and forty years for buildings.

## NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

#### Accrued Escrow Accounts

Operation Homefront's accrued escrow accounts consists of funds collected from the military families or veterans for escrowed deposits, real estate taxes, home insurance and homeowners'association fees that are participating in Permanent Homes for Veterans.

#### Net Assets

Net assets, support and revenues, and expenses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets of the Organization and changes therein are classified and reported as follows:

Net Assets Without Donor Restrictions – Net assets for use in operations and not subject to donor-imposed stipulations. Grants and contributions for recurring programs are generally not considered restricted under GAAP, though for internal reporting the Organization tracks such grants and contributions to verify the disbursement matches the intent.

Net Assets With Donor Restrictions – Net assets subject to donor-imposed restrictions that are more restrictive than Operation Homefront's mission and purpose. Donor imposed restrictions, that are temporary in nature are released when the restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both.

## **Revenue Recognition**

The Organization recognizes contributions and grants either when a valid promise to give (generally in writing) is received or as collected in the case of most smaller denomination gifts. Contributions and grants are reported as without or with donor restriction, depending on the existence and/or nature of any restrictions. Support that is restricted by the donor is reported as an increase in net assets without donor restriction if the restriction expires in the reporting period in which the support is recognized. All other donor- restricted support is reported as an increase in net assets with donor restriction depending on the nature of the restriction. When a restriction expires, the net assets are reclassified to net assets without donor restriction.

Gifts of houses or other tangible goods are reported as without donor restrictions unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used, and gifts of cash or other assets that must be used to acquire long-lived assets, are reported as with donor restrictions. Absent explicit donor stipulations about how long those long- lived assets must be maintained, expirations of donor restrictions are reported when the donated or acquired long-lived assets are placed in service.

The Organization does not have any material contract assets or contract liabilities as of December 31, 2021 and 2020.

## NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

## Employee Benefit Plan

The Organization has a 401(k) employee benefit plan covering all employees after three months of service and are a least 21 years old. Employees may contribute a percentage of their annual compensation up to the limit allowed by the IRS. The Organization matches up to 4% of the employees' contributions. The Organization's contributions to the Plan were approximately \$237,000 and \$231,00, respectively, in the years ended December 31, 2021 and 2020.

## Income Taxes

Operation Homefront is a tax-exempt organization under Internal Revenue Service Code Section 501(c)(3). In addition, the Organization is not a "private foundation" within the meaning of Section 509(a) of the Internal Revenue Code. Donors of money and/or property are entitled to the maximum charitable contribution deduction allowed by law. The Organization is not subject to Texas margin tax. Management is not aware of any tax positions that would have a significant impact on its financial position. Its federal tax returns for the last four years remain subject to examination.

## Functional Allocation of Expenses

The statements of functional expenses report certain categories of expenses that are attributable to one or more program or supporting functions of the Organization. Therefore, these expenses require allocation on a reasonable basis that is consistently applied. The expenses that are allocated include all expenses, which are allocated on the basis of estimates of time and effort, except specific assistance to individuals.

## <u>Advertising</u>

Advertising, printing and publication costs are expensed as incurred.

## Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of financial statements, and the reported amounts of revenues and expenses during the reporting year. Actual results could differ from those estimates.

## Concentrations of Credit Risk

Financial instruments that potentially subject the Organization to concentrations of credit risk consist principally of cash and investments. The Organization places its cash and investments with financial institutions, and limits the amount of credit exposure, although it may from time to time have cash balances or investments in excess of that insured by the FDIC. The Organization periodically assesses the financial condition of the institutions and believes the risk of loss is minimal. The Organization had cash accounts that exceeded federally insured limits by approximately \$3,793,000 and \$4,500,000 at December 31, 2021 and 2020, respectively.

## NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

## Concentrations of Credit Risk (continued)

In-kind contributions totaling \$10,021,682 and \$10,403,806 were received from one donor for the years ended December 31, 2021 and 2020, which represent 22% and 23% of total support and revenues. Should these contribution levels decrease, the Organization may be adversely affected.

#### New Accounting Pronouncements

In February 2016, the FASB issued a new accounting pronouncement regarding lease accounting for reporting periods beginning after December 15, 2021. A lessee will be required to recognize on the balance sheet the assets and liabilities for leases with terms of more than 12 months. Management does not expect the new standard to have a significant impact to its financial position, results of operations and related disclosures.

In September 2020, the FASB issued ASU No. 2020-07 *Presentation and Disclosures by Not-for Profit Entities for Contributed Nonfinancial Assets*, which requires not-for-profits to present contributed nonfinancial assets as a separate line item in the statement of activities and provide additional disclosures about contributions of nonfinancial assets. Contributed nonfinancial assets include fixed assets (such as land, buildings, and equipment), use of fixed assets or utilities, materials and supplies, intangible assets, services, and unconditional promises of those assets. This ASU is effective for periods beginning after June 15, 2021 with early adoption permitted. The Organization is evaluating the impact on its financial statements.

## **Reclassification**

Certain reclassifications of amounts previously reported have been made to the accompanying consolidated financial statements to maintain consistency between periods presented. The reclassifications had no impact on previously reported net assets.

## Subsequent Events

Management has evaluated subsequent events through April 19, 2022, which is the date the financial statements were available to be issued.

On February 18, 2022 and March 17, 2022, the Organization closed on the sale of two homes for a total estimated gain on sale of approximately \$374,000.

On March 24, 2022, the Organization announced receipt of a momentous gift of \$20 million from MacKenzie Scott, the largest single donation in the Organization's 20-year history.

## NOTE 2 FAIR VALUE MEASUREMENTS

In accordance with accounting principles generally accepted in the United States, the Organization utilizes a fair value hierarchy that prioritizes the inputs for the valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3).

The three levels of the fair value hierarchy are as follows:

*Level 1* – Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities inactive markets that the Organization has the ability to access.

Level 2 - Inputs to the valuation methodology include:

- quoted prices for similar assets or liabilities in active markets
- quoted prices for identical or similar assets or liabilities in inactive markets
- inputs other than quoted prices that are observable for the asset or liability
- inputs that are derived principally from or corroborated by observable market data bycorrelation or other means

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used

Cash and Cash Equivalents – Valued at its carrying amount due to short-term maturity of the instrument.

Certificates of Deposit – Valued at its cost plus accrued interest which approximates fair value.

Mutual Fund - Valued at the daily closing price reported on the active market.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Organization believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

## NOTE 2 FAIR VALUE MEASUREMENTS (CONTINUED)

The following table sets forth, by level within the fair value hierarchy, the Organization's investments measured at fair value:

	Fa	air Value Mea	surements Usi	ng
	Level 1	Level 2	Level 3	Total
December 31, 2021				
Cash and Cash Equivalents	\$ 2,005,520	<u>\$</u> -	\$ -	\$ 2,005,520
Total Investments, at Fair Value	\$ 2,005,520	s -	\$-	\$ 2,005,520
December 31, 2020				
Cash and Cash Equivalents	\$ 1,702,067	\$-	\$-	\$ 1,702,067
Certificates of Deposit	300,581	-	-	300,581
Mutual Fund	2,669	-		2,669
Total Investments, at Fair Value	\$ 2,005,317	\$ -	\$-	\$ 2,005,317
Cash and Cash Equivalents Certificates of Deposit Mutual Fund	300,581 2,669	\$ - - - \$ -	\$ - - - \$ -	300,581 2,669

## NOTE 3 CONTRIBUTIONS RECEIVABLE

Contributions receivable are due as follows at December 31:

	 2021	 2020
Due Within One Year	\$ 5,592,168	\$ 3,274,142
Due in One to Five Years	1,791,300	60,000
Due in More Than Five Years	 275,000	 -
Total Contributions Receivable, Gross	7,658,468	 3,334,142
Less Discount at 1.6%	 (95,287)	 -
Total Contributions Receivable, Net of Discount	\$ 7,563,181	\$ 3,334,142

## NOTE 4 EMPLOYEE RETENTION CREDIT

Grants from the government are recognized when all conditions of such grants are fulfilled or there is reasonable assurance that they will be fulfilled. On December 6, 2021, the Organization complied with the conditions of Employee Retention Credit (ERC) funding as established by the CARES Act in the amount of \$814,791 in compliance with the program.

Grants related to this program are classified as other income and employee retention credit receivable. The Organization recognized \$814,791 of ERC revenue and grants receivable related to performance requirements being met and costs being incurred in compliance with the program during the year ended December 31, 2021.

## NOTE 5 PROPERTY AND EQUIPMENT

Property and equipment consist of the following at December 31:

	 2021	 2020
Land	\$ 819,387	\$ 611,237
Buildings	4,656,186	3,229,828
Computers and Equipment	707,672	500,613
Furniture and Fixtures	259,120	251,089
Vehicles	43,611	37,821
Software	1,697,650	1,380,332
Software Development in Progress	 149,202	 103,419
Total Property and Equipment	 8,332,828	6,114,339
Less: Accumulated Depreciation	 (2,205,510)	 (1,692,243)
Property and Equipment, Net	\$ 6,127,318	\$ 4,422,096

## NOTE 6 LINE OF CREDIT

The Organization has a line of credit with Merrill Lynch, which is secured by their investment account with Merrill Lynch, with interest at LIBOR plus 1.25%. The available credit is based on various percentages of the assets in their investment account. As of December 31, 2021 and 2020, no borrowings were advanced under the line of credit.

## NOTE 7 NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions consisted of the following as of December 31, 2021 and 2020:

		2021	2020		
Subject to the Passage of Time: Campaign - Ready Reserve Fund	\$	3,014,724	\$	215,000	
Campaign - Program Growth Fund Campaign - Future Needs Fund		1,298,550 75,000		-	
Future Programs	_	4,327,150		5,338,524	
Total Net Assets With Donor Restrictions	\$	8,715,424	\$	5,553,524	

## NOTE 8 LEASES

Operation Homefront leases office space in various cities where its field offices and headquarters are located under noncancelable operating leases with monthly payments ranging from \$800 to \$18,272 with expiration dates through May 2024. The Organization also leases warehouse and storage facilities in multiple locations which are used for the storage of the inventories of in-kind donations. The agreements are month-to-month with payments ranging from \$50 to \$2,275. In addition, the Organization leases apartment units for disabled service members discharged from military service who are transitioning from military base housing to permanent housing. These agreements have monthly payments ranging from \$1,229 to \$3,650 with varying expiration dates through May 2022. For the years ended December 31, 2021 and 2020, rent expense totaled \$592,023 and \$690,034, respectively.

The Organization also entered into a capital lease for equipment, which expires in March 2024. As of December 31, 2021 and 2020, the cost of this leased equipment was \$204,860 and \$-0-, respectively and accumulated depreciation was \$56,906 and \$-0-, respectively. The aggregate minimum future lease payments on noncancelable operating and capital leases at December 31, 2021, are as follows:

. . .

	0	perating	Capital			
Year Ending December 31.		Leases		Leases		
2022	\$	271,814	\$	74,241		
2023		162,297		74,241		
2024		105,542		18,560		
Total Minimum Lease Payments		539,653		167,042		
Less Amounts Representing Interest		-		(6,210)		
Present Value of Net Minimum Lease Payments	\$	539,653	\$	160,832		

## NOTE 9 GIFTS IN-KIND

Contributed goods, services and facilities consisted of the following for the years ended December 31:

		2021	 2020
Gift Cards	\$	555,081	\$ 435,384
Facilities		115,877	109,320
Goods		11,679,557	13,605,651
Media and Other Services		4,208,487	6,332,947
Vehicles	_	365,426	 208,153
Total	\$	16,924,428	\$ 20,691,455

(18)

## NOTE 10 JOINT COSTS

In accordance with accounting standards, Operation Homefront conducts activities that include a fundraising appeal. Those activities include direct mail campaigns. For the year ending December 31, 2021, the costs of conducting these activities included a total of \$2,434,497 of joint costs, with \$1,022,489 allocated to program expenses and \$1,412,008 allocated to fundraising expenses. For the year ending December 31, 2020, the costs of conducting these activities included a total of \$2,497,824 of joint costs, with \$1,373,803 allocated to program expenses.

## NOTE 11 PAYCHECK PROTECTION PROGRAM

The Organization received funding under the Paycheck Protection Program (PPP) in the amount of \$1,607,412 as part of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act), administered by the U.S. Small Business Administration (SBA). The funding was subject to loans administered by the SBA under the CARES Act.

All proceeds were used for payroll costs and other permitted expenses during 2020. Prior to year end the Organization received notification from the SBA the loan was forgiven in full; accordingly, the Organization recognized the proceeds as grant income in 2020.

## NOTE 12 LIQUIDITY AND AVAILABILITY

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the statement of financial position date, comprise the following:

	2021	2020
Cash	\$ 4,949,923	\$ 5,148,251
Investments	2,005,520	2,005,317
Contributions Receivable, Current	5,592,168	3,274,142
Employee Retention Credits Receivable, Current	816,742	· · ·
Less: Ecrow Funds	(297,939)	(309,407)
Less: Security Deposits	(26,500)	(41,500)
Less: Donor Restricted Net Assets	 (8,715,424)	 (5,553,524)
Total financial assets available for general	 	 
expenditures in the next 12 months	\$ 4,324,490	\$ 4,523,279

The Organization also has a line of credit which is available in the event of unanticipated liquidity needs. The Organization believes it has sufficient financial assets available with normal levels of operations to meet its financial obligations for general expenditures for the next year.

## NOTE 13 CORRECTION OF ERROR

During the year ended December 31, 2021, management determined that certain contributed media and other services totaling \$2,110,000 in 2020 was not recognized. As such, the Organization restated its 2020 financial statements as noted in the table below.

	Original	Restatement	As Restated
Statement of Activities			
Contributed goods, services and			
facilities	\$ 18,581,455	\$ 2,110,000	\$ 20,691,455
Total support and revenues	40,538,637	2,110,000	42,648,637
Program services	39,298,458	2,110,000	41,408,458
Total expenses	43,671,765	2,110,000	45,781,765
Statement of Functional Expenses			
In-Kind Expenses:			
Critical Assistance	\$ 1,663,988	\$ 313,466	\$ 1,977,454
Veteran Caregiver Support	40,233	11,738	51,971
Field Operations	15,508,527	1,201,628	16,710,155
Permanent Homes for Veterans	5,990,121	448.682	6,438,803
	5,990,121	440,002	0,430,003
THV and TH-V Transitional Housing	000 500		
and Villages	282,580	134,486	417,066
Total Program	23,485,449	2,110,000	25,595,449
Total	23,506,798	2,110,000	25,616,798

# Sources of Income Table

Percentage	Funding Source
0 %	Government grants (federal, state, county, local)
0 %	Government contracts
14 %	Foundations
18 %	Business
11 %	Events (include event sponsorships)
11 0/	Individual contributions
11 %	Individual contributions
0 %	Fees/earned income
0 %	Workplace giving campaigns
40 %	In-kind contributions (optional)
6 %	Other
100 %	TOTAL (must equal 100%.)

## Major Contributors

Some of Operation Homefront's major contributors include popular companies such as The Dollar Tree, Home Depot, Walmart Foundation, Pillsbury, A. James and Alice B. Clark Foundation, Wounded Warrior Project, and CSX Transportation. Every one of these donors are part of the Chairman's Circle which means they have donated more than \$1,000,000 or more to Operation Homefront.

The next section of sponsors is also mainly corporate as well, which includes Chobani, JPMorgan Chase & Co., Thrive Causemetrics, and Vehicles for Veterans. These sponsors are part of the President's circle which means they have contributed at least \$500,000, but not over \$1,000,000. No matter how much money sponsors give Operation Homefront, we are thankful for each and every donation which makes taking care of Veterans in need that much more possible. What corporate sponsors cannot make up for, we bring up in-kind contributions, which can be the driving force to reach goals for each fiscal year.

## In- Kind Contributions

One of the main ways anyone is able to donate to Operation Homefront, is through our ways to give tab on our website. This allows the user options for donation, the urgent needs of Operation Homefront today, and volunteering, with other ways to give as well. These donations are key to providing Veterans and their families during their time of need.

Within this donation page, there is the option to provide monthly donations or only set a Veteran up with a one-time payment. Our one-time payment ranges from \$25 to \$1,000 with the option to put in more or less. This is similar to our monthly donations which start at \$15/mo and go to \$100/mo. The most important option on this donation page is the idea to make this contribution in memory or in honor of someone. Allowing family members to donate in memory of a lost brother, sister, husband, or father. The user is then prompted to set up their information in the boxes below to benefit Operation Homefront in seeing who is donating to the program and adding them to an Investor Group.

# Board of Directors List

Our Board Members:

- Uli Correa Chair Regional Vice President – Dallas, TX, Central Division, Walmart Stores US
- **Greg Ham** *Vice Chair* Partner, The MWS Group and 24 Entertainment
- Brig. Gen. Linda Medler, USAF, Ret. Treasurer President & CEO, L.A. Medler & Associates, LLC
- Col. Tyrone "Woody" Woodyard, USAF, Ret. Secretary Vice President, Communications, Rotary and Mission Systems, Sikorsky, A Lockheed Martin Company
- Steve Adkinson Board Member
   Senior Vice President & Senior Advisor, Merrill Lynch Wealth
   Management
- **Derek Blake** *Board Member* Head of Partnerships, TaxAct, Blucora
- Rod Essig Board Member
  Music Agent, Creative Artists
- JK Huey Board Member
- Dianna Purvis Jaffin, Ph.D. Board Member Science and Resilience Adviser
- Angelo Lombardi Board Member
   President, Sentia Wellness
- Kelly Mayhall Board Member President, Southern Division of The Home Depot
- COL. Steven G. Mahon, USA, Ret. Board Member Former EVP, General Counsel & Corporate Secretary, SAIC
- Brig. Gen. John I. Pray, Jr., USAF, Ret. Board Member President and CEO, Operation Homefront
- **Faith Arnold Schwartz -** *Board Member* CEO, Housing Finance Strategies, LLC
- . Ken Slater Emeritus Board Member Principal, Tremont Partners, LLC
- . **Terry Smith** *Board Member* CEO Rushmore Loan Management Services, LLC

efile	e Gl	RAPHIC	print - DO NOT PROCESS As Filed Data -				DLN:	934	9310201136
Form	9	an	Return of Organization Exempt From	Inco	me T	Гах		0	MB No. 1545-004
Form	5.	50	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code	e (except	private	e found	ations		2020
-		- Calor	Do not enter social security numbers on this form as it may	y be mad	e public	c.			Open to Public
Departs Treasus Interna	ey -	on the renue Servic	Go to <u>www.irs.gov/Form990</u> for instructions and the l	latest info	ormati	on.		Ì	Inspection
			alendar year, or tax year beginning 01-01-2020 , and ending 12-31	1-2020	_				
		applicable: s change	C Name of organization OPERATION HOMEFRONT INC		'				ation number
🗆 Na	me c	hange	Parine Ausiance as		_	32-00	33325	•	
Init     Init     Init		eturn /m/terrrinate	Doing business as						
🗆 Am	hende	ed return	Number and street (or P.O. box if mail is not delivered to street address) Room/suit	ite	- 1	E Teleph			
D Ap	plicat	tion pending	City or town, state or province, country, and ZIP or foreign postal code			(210)	549-4	629	
			SAN ANTONIO, TX 78232			G Gross	receipt	\$ 39,	832,259
			F Name and address of principal officer: JOHN I PRAY JR	H(a) Is	this a	group i	return	for	
			1355 CENTRAL PKWY S STE 100 NO 100	ы н(ь) А	ubordin re all si		ates		□Yes ☑No
T Tax	x-exe	empt status	SAN ANTONIO, TX 78232	in	cluded?	?			Yes No
				H(c) G					hstructions)
				1.2		2003			fired deviates 47
K Form	n of a	organization	: 🗹 Corporation 🗆 Trust 🗋 Association 🗋 Other 🕨	L Year of f	ormation	11: 2002	<b>M</b> S	kate d	f legal domicile: AZ
Pa	irt I		imary						
	1		scribe the organization's mission or most significant activities: DN HOMEFRONT BUILDS STRONG, STABLE, AND SECURE MILITARY FAMILIE	ES.					
Activities & Governance									
emé									
20 M			is box ▶	ore than 2	25% of	its net	asset	s. 3	2
×ð			of independent voting members of the governing body (Part VI, line 1b) .				ł	4	2
these			mber of individuals employed in calendar year 2020 (Part V, line 2a) .				l	5	13
ti n	6	Total nu	mber of volunteers (estimate if necessary)	essary)					3,50
ă	7a	a Total unrelated business revenue from Part VIII, column (C), line 12					[	7a	
	ь	Net unre	lated business taxable income from Form 990-T, line 39	<u></u>	Prior	¥	$\rightarrow$	7b	Current Year
	8	Contribu	tions and grants (Part VIII, line 1h)		Prior	44,274	1.155	_	39,166,55
enue			service revenue (Part VIII, line 2g)				0		
Ravenue	10	Investm	ent income (Part VIII, column (A), lines 3, 4, and 7d )			118	3,450		-115,82
-			venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				5,658		206,78
	-		renue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	_		44,699	-		39,257,52
			nd similar amounts paid (Part IX, column (A), lines 1–3)	$\vdash$		31,887	,484		24,258,00
s,			other compensation, employee benefits (Part IX, column (A), lines 5–10)			8,955			9,276,71
Expenses			onal fundraising fees (Part IX, column (A), line 11e)				0		
ě ž	ь	Total fund	raising expenses (Part IX, column (D), line 25) >2,679,731						
Ξ.			penses (Part IX, column (A), lines 11a-11d, 11f-24e)			5,617			5,804,99
			penses. Add lines 13-17 (must equal Part IX, column (A), line 25)			46,461			39,339,70
xő		Nevenue	less expenses. Subtract line 18 from line 12	Beginn	ning of (	-1,762 Current	-		-82,18 End of Year
Net Assets or Fund Balances		We had	and (Brack V. Kar Ad)			30.011			56 656 7
Ass Ba			ets (Part X, line 16)	-		29,215			28,828,57
2ž			silities (Part X, line 26)			2,037	<u> </u>		27,087,93
_	rt II		ature Block				,		
			perjury, I declare that I have examined this return, including accompanying of, it is true, correct, and complete. Declaration of preparer (other than offic						
any k			r, r is case, contact, and complete: declaration of preparer (summ chan one						inch preparer has
		<b></b>			2021-0	4-09			
Sign		Signa	ture of officer		Date				
Here	•		I PRAY JR. PRESIDENT/CEO or print name and title						
	_		Print/Type preparer's name Preparer's signature Di	ate			PTIN		
Paid	t	L		021-04-09	Check self-em	ployed	P0095		
Prep		er	Firm's name FADKF PC		Firm's	EIN 🏲 7	4-2606	559	
Use	0	nly	Firm's address F 8610 N NEW BRAUNFELS SUITE 101		Phone	no. (210	) 829-1	1300	
			SAN ANTONIO, TX 78217					_	
<u> </u>								¥	ns 🗆 No
ror P	ape	rwork Re	duction Act Notice, see the separate instructions.	Cat. N	lo. 112	62Y			Form 990 (202

Form	990 (2020)					Page 2
Pa	statement of	of Program Servi	ce Accomplis	hments		
	Check if Sched	ule O contains a resp	onse or note to	any line in this Part III .		🗆
1	Briefly describe the or	ganization's mission:				
					D THEY CAN THRIVE - NOT SIMPLY	STRUGGLE TO GET BY -
IN TH	HE COMMUNITIES THEY	HAVE WORKED SO F	ARD TO PROTEC	-l.		
=						
2	Did the organization u	indertake any signific	ant program car	vices during the year wh	ich were not listed on	
<u>۱</u>	the prior Form 990 or				ich here not hated on	🗆 Yes 🗹 No
	If "Yes," describe thes					
3				changes in how it condu	cts, any program	
1	services?	21	-	-		Ves No
	If "Yes," describe thes					
4		,		ats for each of its three I	argest program services, as measu	red by expenses
Ľ	Section 501(c)(3) and	501(c)(4) organizati	ons are required	to report the amount of	f grants and allocations to others, t	
	expenses, and revenu	e, if any, for each pro	ogram service re	ported.		
4a	(Code:	) (Expenses \$	34 970 129	including grants of \$	24,258,003 ) (Revenue \$	)
**	See Additional Data	/ (Expenses \$	54,970,129	including grants or a	24,230,003 ) (Nevenue s	,
4b	(Code:	) (Expenses \$		including grants of \$	) (Revenue \$	)
	(	,,			,,	,
<u> </u>						
4c	(Code:	) (Expenses \$		including grants of \$	) (Revenue \$	)
4d	Other program service					
	(Expenses \$		luding grants of		) (Revenue \$	)
4e	Total program servi	ice expenses >	34,970,1	29		
						Form 990 (2020)

Par	tiv Checklist of Required Schedules			
			Yes	No
L	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 😒	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🛸	2	Yes	
1	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		N
ŀ	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		N
•	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		N
	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   3.	6		N
,	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		N
•	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 😼	8		N
,	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
)	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		N
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	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	11b		N
	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	11c		N
	in Part X, line 16? If "Yes," complete Schedule D, Part IX 😏	11d	Yes	
	Did the organization report an amount for other inabilities in Part X, line 25? If Tes, complete Schedule D, Part X 20 Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		N
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸	11f		N
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		N
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		N
а	Did the organization maintain an office, employees, or agents outside of the United States?	14a		N
ь	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		N
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		N
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV .	16		N
	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	Yes	
	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	Yes	
	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		N
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		N
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic	20b		N
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		I "'

Form	990 (2020)			Page 4
Par	tiv Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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 3	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
ь	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		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L,Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
ь	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🚬 🕺	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes	
Pa	<b>tV</b> Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
	Enterthe sumber constant in Paul 2 of From 1004 Fisher O March		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 48 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Yes	
		F	orm 99	0 (2020)

Form	990 (2020)			Page 5
Pa	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country:  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
с	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 as charitable contributions?	6a		No
ь	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).			
а	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		No
ь	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	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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	Yes	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
ь	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
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			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	If "res, see instructions and the Form +/20, schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . If "res," complete Form 4720, Schedule O.	16		No
		닉	iorm <b>99</b>	0 (2020)

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI			lines 🗹
Se	ction A. Governing Body and Management		N	
1.	Enter the number of voting members of the governing body at the end of the tax year   1a   21		Yes	No
10	If there are material differences in voting rights among members of the governing body at the end of the tax year in a security of the governing body, or if the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь	Enter the number of voting members included in line 1a, above, who are independent <b>1b</b> 20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	_		
ь	members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a 7b		No No
8	persons other than the governing body?			
	the following: The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	00	Tes	
-	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	-	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AL , AK , AZ , AR , CA , CO , CT , DE , DC , IN , IA , KS , KY , LA , ME , MD , MA , MI NE , NV , NH , NJ , NM , NY , NC , ND , OH SC , SD , TN , TX , UT , VT , VA , WA , WV	, MN , , OK ,	MS , MO OR , PA	D, MT, , RI,
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O)			
19 20	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records:			
	► OPERATION HOMEFRONT INC 1355 CENTRAL PARKWAY S STE 100 SAN ANTONIO, TX 78232 (210) 659-7756			0 (2020)

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Part VII	Compensation of Officer	s, Directors,	Truste	es,	Key	/ En	nploy	ees	, Highest Comp	ensated Employ	-
	and Independent Contra										
Cashian	Check if Schedule O contains a										🗆
	A. Officers, Directors, Tru e this table for all persons requin				_		-				manization's tax
year.	of the organization's current of		,						, ,		
	ation. Enter -0- in columns (D), ( of the organization's <b>current</b> key							finit	ion of "key employe	e."	
	organization's five current high										)
organization	d reportable compensation (Box and any related organizations.										
of reportable	of the organization's <b>former</b> offic e compensation from the organiz	ation and any r	elated o	rgani	izati	ons.					
organization	of the organization's former dire , more than \$10,000 of reportab	le compensatio	n from t								e
	ions for the order in which to list										
Check t	his box if neither the organizatio		ed orgar	nizatio			ensate	ed ar		rector, or trustee.	
	(A) Name and title	(B) Average hours per week (list any hours for related	than o is b	one b oth a direct	ox, u in of tor/t	t ch unle: ficer	eck mo ss pers r and a xee)	ion	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	(W-2/1099- MISC)	organization and related organizations
See Addition	al Data Table			$\vdash$	$\vdash$	$\vdash$		$\vdash$			
				$\vdash$	$\vdash$	$\vdash$		$\vdash$			
				$\vdash$	⊢	$\vdash$	-	$\vdash$			
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						F					
				-	-	$\vdash$					
				<u> </u>	-	-	<u> </u>				
											Form 990 (2020)

_	1 990 (2020) Section A. Officers, Direct	tors, Trustees	, Key	Emp	love	es,	and	Hial	hest Compensate	d Employees (	conti	nued)	Page 8	
	(A) Name and title	hours per than one box, unless person compensation compensation week (list is both an officer and a any hours director/trustee) organization organization								Τ	(F) Estima amount o compens from	ated of other sation		
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(Ŵ-2/1099- MISC)				
See Additional Data Table											+			
—					$\vdash$		$\vdash$	┢			+			
$\square$														
—				$\vdash$	$\vdash$			$\vdash$			+			
				$\vdash$	$\vdash$		$\vdash$	$\vdash$			+			
c	Sub-Total	art VII, Section						_	1,821,533		0		0	
2	Total number of individuals (including of reportable compensation from the	g but not limited	to thos			bove	e) who	o rec	eived more than \$1	00,000				
3	Did the organization list any <b>former</b> line 1a? If "Yes," complete Schedule									employee on	3	Yes	No	
4	For any individual listed on line 1a, is organization and related organization individual									n the			No	
5	Did any person listed on line 1a receipservices rendered to the organization										5	Yes	No	
<u>s</u>	ection B. Independent Contract Complete this table for your five high		d indep	ende	nt co	ntra	actors	that	received more than	\$100,000 of con	npens	ation		
	from the organization. Report compe	(A) and business addre		year	end	ling	with o	r wit		(B)		(0		
	KETEAM LLC ABERNATHY ROAD NE STE 1600	and business addin	-20							ription of services PONSE/PRINTING		Compen 1	,984,085	
ATLA	NTA, GA 30328 GROUP MEDIA SOLUTIONS INC								DIRECT MAI	LING SERVICES	+		242,542	
OMA	0X 3243 HA, NE 68106 ESPOT MEDIA LLC								WEBSITE SE	RVICES	+		154,600	
WAS	7TH ST NW 201 HINGTON, DC 20001													
4000	THWEST PUBLISHING INC								DIRECT MAI	LING SERVICES			148,973	
THO	XA, KS 66609 IPSON HABIB & DENISON INC AYDEN AVENUE SUITE 300								DIRECT MAI	LING SERVICES	+		143,545	
<u>LEXI</u> 2	NGTON, MA 02421 Total number of independent contracto compensation from the organization ►		not lim	ited t	to th	ose	listed	abo	ve) who received m	ore than \$100,00	0 of			
I—	compensation from the organization F	-										Form 99	0 (2020)	

Form 1	99	0 (2020)								Page 9
Part			of F	Revenue						
		Check if Sched	fule	O contain	s a resp	onse or note to an	line in this Part VIII			🗆
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1	a Federated campaig	pns		1a					
Grants		b Membership dues			16					
s. Grants Amounts		c Fundraising events	۶.		1c					
źŚ		d Related organizati	ons		1d					
Gifts.		e Government grants (	contr	ibutions)	1e	1,607,412				
ons. Gift Similar		All other contribution	s, gif	ts, grants,						
ie ie		and similar amounts above			1f	37,559,144				
ributio	5	g Noncash contribution lines 1a - 1f:\$	s ind	uded in		18,386,485				
Contributions. and Other Sin		h Total. Add lines 1a			1g					
Ŭ ä	4	n Totals Add thes to	1-11		• •		39,166,556			
	þ	-				Business Code				<u> </u>
	ľ									
Ę	L									
Revenue	L	b								
	I	c								
Service			_							
e S	I	d								
Program	l	•								
č	l									<u> </u>
1	l	f All other program								
<u> </u>	Ļ	9 Total. Add lines 2	_				_			
	Ľ	3 Investment income similar amounts) .	(inc	luding div	idends,	interest, and other	26,97	6		26,976
	ŀ	4 Income from invest				bond proceeds	•			
	Ŀ	5 Royalties					•			
	L			(i) P	eal	(ii) Personal	_			
	k	6a Gross rents	6a							
	þ	b Less: rental					1		1	
I .	L	expenses Rental income	6b				-		1	
1	ľ	or (loss)	бc							
	l	d Net rental income	or	(loss) .			]			
	L			(i) Sec	urities	(ii) Other	_			
	ľ	7a Gross amount from sales of	7a		47,94	15 215,1	57			
	l	assets other than inventory								
	þ	b Less: cost or other basis and	7b		48,10	357,7	97			
	l	sales expenses	_				<u> </u>			
	I.	c Gain or (loss)	70		-15	56 -142,6	10		1	
	Γ	d Net gain or (loss)					-142,79	6	1	-142,795
	ŀ	Ba Gross income from fu	indra							
enne	l	(not including \$ contributions reporte	d an	line 1c).	"					
5	L	See Part IV, line 18	•		84	369,09	6		1	
۳.	L	b Less: direct expen							1	
Other	l	c Net income or (los	is) fr	om fundra	hising e	vents 🕨	200,25	7		200,257
l °	þ	Gross income from	gam	ing activitie	15.					
	L	See Part IV, line 19			94				1	
	L	b Less: direct expen			96					
	l	c Net income or (los	is) fr	om gamin	g activi	ties				<u> </u>
1	4	OaGross sales of inve								
	l	returns and allowa			10		_			
		b Less: cost of good			10					
	F	<ul> <li>Net income or (los Miscellaneo</li> </ul>			of inver	Business Code				<u> </u>
	þ	11aMISCELLANEOUS		- 15: 19E		9000	6,26	9	1	6,269
	l	b FEES	_			9000	19 26	0		260
1	I									
1	I	c								
1										
1		d All other revenue								
1	I	e Total. Add lines 1	1a-)	11d	•	🔸	6,52	9		
1	ŀ	12 Total revenue. S	ee ir	structions			39,257,52		0	0 90,966
<b>—</b>	-						37,437,34	-1	-	Form 990 (2020)

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PartIX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must o	omplete all columns.	All other organizatio	ns must complete colu	imn (A).
Check if Schedule O contains a response or note to an	y line in this Part IX			🗆
Do not include amounts reported on lines 6b, 'b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<ol> <li>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</li> </ol>				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	24,258,003	24,258,003		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,821,532	1,329,197	236,049	256,28
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	5,969,277	4,355,865	773,547	839,86
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	230,847	168,452	29,915	32,48
9 Other employee benefits	651,150	475,153	84,381	91,61
10 Payroll taxes	603,906	440,679	78,259	84,96
11 Fees for services (non-employees):				
a Management				
bLegal	112,924	68,928	14,927	29,06
c Accounting	64,801	39,554	8,566	16,68
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	207		207	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,253,454	1,375,495	297,876	580,08
12 Advertising and promotion	26,568	16,217	3,512	6,83
13 Office expenses	1,764,259	1,074,077	35,265	654,91
14 Information technology				
15 Royalties				
16 Occupancy	858,155	770,056	88,015	8
17 Travel	50,663	33,892	6,024	10,74
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	35,178	23,201	10,956	1,02
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	456,930	452,674	4,256	
23 Insurance				
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 0.)				
a MISCELLANEOUS	146,092	81,757	14,187	50,14
b MEMBERSHIP & DUES	18,347	6,929	1,767	9,65
¢ IN-KIND	17,414		2,138	15,27
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	39,339,707	34,970,129	1,689,847	2,679,73
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☑ if following SOP 98-2 (ASC 958-720).	2,497,824	1,373,803	0	1,124,02
Check here F 🖾 If following SOP 98-2 (ASC 958-720).				Form 990 (202)

	_	(2020)			Page 11
Pa	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part IX			🗆
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	821,119	1	4,989,244
	2	Savings and temporary cash investments	147,339	2	159,007
	3	Piedges and grants receivable, net	8,020,982	3	3.334,142
	4	Accounts receivable, net		4	
	5	Loans and other payables to any current or former officer, director, trustee,			
	6	key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons Loans and other receivables from other disgualified persons (as defined under		5	
		section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	327,358	9	313,718
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 6,114,339			
	ь	Less: accumulated depreciation 10b 1,692,243	2,656,689	10c	4,422,096
	11	Investments—publicly traded securities .	1,987,932	11	2,005,317
	12	Investments-other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	15,254,003	15	13,605,046
	16	Total assets. Add lines 1 through 15 (must equal line 33)	29,215,422	16	28,828,570
	17	Accounts payable and accrued expenses	1,477,091	17	1,272,725
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	363.789	21	467,907
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
1	23	Secured mortgages and notes payable to unrelated third parties	197.004	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	2,037,884	26	1,740,636
alances	27	Organizations that follow FASB ASC 958, check here ► ☑ and complete lines 27, 28, 32, and 33.	21.006.251	27	21.534.410
Bal		Net assets without donor restrictions	6,171,287		5,553,524
P	28	Net assets with donor restrictions	0,171,287	28	0,003,024
Assets or Fund	29	Organizations that do not follow FASB ASC 958, check here ► □ and complete lines 29 through 33. Capital stock or trust principal, or current funds		29	
\$	30	Paid-in or capital surplus, or land, building or equipment fund		30	
SSe	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	27,177,538	32	27.087.934
Š	33	Total liabilities and net assets/fund balances	29,215,422	33	28,828,570
-	55	The meaning and the assessment services is in it is in it is	20,210,922	55	Form 990 (2020

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Par	tX Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		39	,257,522
2	Total expenses (must equal Part IX, column (A), line 25)	2		39	,339,707
3	Revenue less expenses. Subtract line 2 from line 1	3			-82,185
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		27	,177,538
5	Net unrealized gains (losses) on investments	5			-7,419
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10		27	,087,934
Pa	tXI Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				$\checkmark$
				Yes	No
1	Accounting method used to prepare the Form 990: Cash 🗹 Accrual 🗍 Other				
	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		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	basis,			
	Separate basis Consolidated basis Both consolidated and separate basis				
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	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S Audit Act and OMB Circular A-133?	2	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ired	3ь		
			-	Form 99	0 (2020)

## Additional Data

Software ID: Software Version:

EIN: 32-0033325

Name: OPERATION HOMEFRONT INC

#### Form 990 (2020)

## Form 990, Part III, Line 4a:

OPERATION HOMEFRONT ASSISTS MILITARY FAMILIES COPING WITH A VARIETY OF FINANCIAL CHALLENGES. THE MOST COMMON TYPES OF NEED ARE FOR SHORT-TERM RELIEF CONSISTING OF RENT/MORTGAGE ASSISTANCE, HOME/CAR REPAIRS, FOOD, UTILITIES, AND TRANSITIONAL HOUSING; LONG TERM RESILIENCY CONSISTING OF PERMANENT MORTGAGE-FREE HOMES AND CAREGIVER SUPPORT; AND RECURRING FAMILY SUPPORT CONSISTING OF HOLIDAY MEALS, HOLIDAY TOYS, BACK-TO-SCHOOL ITEMS, BABY SHOWER AND HOMEFRONT CELEBRATIONS THAT ARE DESIGNED TO SUSTAIN, UPLIFT AND TRANSFORM.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	pers	an on on is	e bo boti recto	t che x, u h an	ex less ce Highest compensated	er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
ANGELO LOMBARDI VICE CHAIRMAN	1.00	х		×				0	0	0
BOB MCGOWAN DIRECTOR	1.00	х						0	0	0
JOHN I PRAY JR PRESIDENT/CEO	40.00	х		×				447,318	0	0
DIANA PURVIS JAFFIN SECRETARY	1.00	х		×				0	0	0
MARTY HAUSER DIRECTOR	1.00	х						0	0	0
ED DELGADO DIRECTOR	1.00	х						0	0	0
TYRONE WOODYARD DIRECTOR	1.00	x						0	0	0
FRANK PARAS DIRECTOR	1.00	х						0	0	0
STEVEN MAHON DIRECTOR	1.00	х						0	0	0
GREG HAM DIRECTOR	1.00	x						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	pers	an on on is	e bo boti recto	x, u n an or/tr	office ustee)	۱r	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
JK HUEY TREASURER	1.00	х		x				o	0	0
LAURA FREDRICKS DIRECTOR	1.00	x						0	0	0
LAURIE GALLO DIRECTOR	1.00	x						0	0	0
BRIAN ARNOLD DIRECTOR	1.00	x						0	0	0
LEE BAXTER CHAIRMAN	1.00	х		x				0	0	0
LINDA MEDLER DIRECTOR	1.00	х						0	0	0
ROBERT GIANNETTA DIRECTOR	1.00	х						0	0	0
STEVEN ADKINSON DIRECTOR	1.00	x						0	0	0
ANTHONY WILLIAMS DIRECTOR	1.00	x						0	0	0
ULISES CORREA DIRECTOR	1.00	x						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,
and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	pers	an on on is	e bo boti ecto	t che x, u n an er/tr	k no office Highest compensated	нг )	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
ROD ESSIG DIRECTOR	1.00	×						0	0	c
MARGUERITE KIRST CDO	40.00			×				257,307	0	(
ROBERT THOMAS COO	40.00			×				226,331	0	c
ANDRE HAWKINS CFAO	40.00			×				166,215	٥	(
JILL ESKIN-SMITH VP OF CORPORATE & FOUNDATI	40.00					x		160,788	0	c
JAY STERNBERG VP OF MARKETING	40.00					x		155,434	٥	c
KAREN SMITHHART VP OF HUMAN RESOURCES	40.00					x		132,958	0	c
TROY KASBARIAN VP OF IT & GENERAL SERVICES	40.00					x		150,813	٥	c
JAKE ADAMS MANAGER, SOFTWARE DEVELOPER	40.00					x		124,369	0	c

efi	e GR/	APHIC pri	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9	3493102011361
SC	HED	ULE A		Public	Charity Statu	e and Bul	alic Supp	ort	OMB No. 1545-0047
	m 99		Con		rganization is a sect				2020
990)	EZ)				4947(a)(1) nonexe Attach to Form	mpt charitable	trust.		2020
		the Treasury	•	Go to <u>www.irs</u>	ormation.	Open to Public Inspection			
Nam	ame of the organization Employer identificat							cation number	
OPER	ALION P							32-0033325	
	rt I				us (All organization			See instructions.	
1 1	organiz				e it is: (For lines 1 thro asociation of churches				
2	Ц								
3	Ц				1)(A)(ii). (Attach Sch				
					vice organization desc			-	
4			esearch orga and state:	nization operat	ed in conjunction with	a hospital descri	bed in section 3	170(b)(1)(A)(iii). E	nter the hospital's
5			ation operate (iv). (Comple		t of a college or univer	rsity owned or op	perated by a gov	ernmental unit descr	ibed in section 170
6		A federal, s	tate, or local	government or	r governmental unit de	scribed in section	on 170(b)(1)(A	)(v).	
7	V	section 17	0(b)(1)(A)	(vi). (Complete	,		-	nit or from the gener	al public described in
8		A commun	ty trust desci	ribed in section	n 170(b)(1)(A)(vi).	(Complete Part I	I.)		
9		non-land g	rant college o	f agriculture. S	ee instructions. Enter	the name, city, a	and state of the o	college or university:	
10		from activit investment	ies related to income and	its exempt fur unrelated busin	(1) more than 331/39 actions—subject to cert tess taxable income (le complete Part III.)	tain exceptions,	and (2) no more	than 331/3% of its s	
11		An organiz	ation organize	ed and operated	d exclusively to test fo	r public safety. S	ee section 509	(a)(4).	
12		more public	ly supported	organizations	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or see	ction 509(a)(2)	). See section 509(	
a		Type I. A : organizatio	supporting on n(s) the pow	ganization oper	ated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organia	zation(s), typically by	
b		Type II. A manageme	supporting o nt of the sup	rganization sup	ervised or controlled i ation vested in the sar				
c		Type III f	unctionally	integrated. A	supporting organizatio ions). You must com				ated with, its
d		Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.							
е					ved a written determin		RS that it is a Ty	pe I, Type II, Type I	II functionally
f	Enter			'	integrated supporting	organization.			
g					upported organization(	s).			
	(i) N	lame of sup; organization		(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the org in your govern	anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Tota For I		work Reduc	tion Act Not	ice, see the T	nstructions for	Cat. No. 11285	E C	Schedule A (Form 9	90 or 990-EZ) 2020
		or 990-EZ.	CON ACC NO	ice, see the I	instructions for	Cot. NO. 11203		schedule A (roims	50 01 550-62) 2020

Sch	dule A (Form 990 or 990-EZ) 2020						Page 2
	art II Support Schedule for	Organizations	Described in S	ections 170(b)	)(1)(A)(iv) and	d 170(b)(1)(A)	
	(Complete only if you ch	necked the box of	on line 5, 7, or 8	of Part I or if th	e organization f	ailed to qualify u	
6	If the organization failed ection A. Public Support	to quality unde	er the tests listed	below, please c	complete Part III	1.)	
	Calendar year	(-) 2016	(1) 2017	(-) 2010	(d) 2019	(-) 2020	(f) Tabal
	(or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(a) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not	45,244,698	39,815,536	45,825,491	48,573,242	43,498,823	222,957,790
	include any "unusual grant.")						
	Tax revenues levied for the organization's benefit and either						
	paid to or expended on its behalf						
	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3	45,244,698	39,815,536	45,825,491	48,573,242	43,498,823	222,957,790
	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						84,415,733
	amount shown on line 11, column						
6	(f) Public support. Subtract line 5						138,542,057
_	from line 4. ection B. Total Support						
	Calendar year	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	(or fiscal year beginning in) 🕨		39,815,536	45,825,491			
	Amounts from line 4 Gross income from interest,	45,244,698	39,815,536	45,825,491	48,573,242	43,498,823	222,957,790
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources	33,653	23,842	37,159	42,763	26,976	164,393
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	-4,150	41,795	48,473	80,006	6,529	172,653
	assets (Explain in Part VI.).	.,				-,	
11	Total support. Add lines 7 through 10						223,294,836
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	2,450,644
13	First 5 years. If the Form 990 is for	the organization's	first, second, third	, fourth, or fifth tax	x year as a section	501(c)(3) organiz	ation, check
	this box and stop here					► 🗆	
	ection C. Computation of Publi						
	Public support percentage for 2020 (li					14	62.040 %
	Public support percentage for 2019 Se					15	60.070 %
16a	33 1/3% support test-2020. If the						
h	and stop here. The organization qua 33 1/3% support test-2019. If th	nties as a publicly in the organization did	supported organiza I not check a box o	n line 13 or 16a. a		3% or more, check	this
5	box and stop here. The organization						
17a	10%-facts-and-circumstances tes is 10% or more, and if the organization in Part VI how the organization meets	t—2020. If the or on meets the "facts"	ganization did not s-and-circumstance	check a box on line es" test, check this	e 13, 16a, or 16b, box and stop her	and line 14 re. Explain	
							► 🗆
ь	organization . <b>10%-facts-and-circumstances te</b> 15 is 10% or more, and if the organi Explain in Part VI how the organizati	zation meets the "	facts-and-circumst	ances" test, check	this box and stop	here.	
-	10%-facts-and-circumstances te 15 is 10% or more, and if the organi Explain in Part VI how the organizati supported organization	zation meets the " on meets the "fact	facts-and-circumst s-and-circumstanc	ances" test, check es" test. The orgar	this box and <b>stop</b> nization qualifies a	here. s a publicly	► 🗆
-	10%-facts-and-circumstances te 15 is 10% or more, and if the organi Explain in Part VI how the organizati	zation meets the " on meets the "fact 	facts-and-circumst s-and-circumstanc	ances" test, check es" test. The orgar  5a, 16b, 17a, or 17	this box and <b>stop</b> nization qualifies a 7b, check this box	and see	

Scheo	dule A (Form 990 or 990-EZ) 2020						Page
_	Support Schedule for	Organization	s Described in	Section 509(	a)(2)		, oge .
	(Complete only if you cl					d to qualify un	der Part II. If
	the organization fails to	qualify under	the tests listed	below, please co	omplete Part II.	)	
Se	ction A. Public Support					-	
	Calendar year	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	(or fiscal year beginning in) ► Gifts, grants, contributions, and	(-)	(-7	()	(-)	(-)	
1	membership fees received. (Do not						
	include any "unusual grants.") .						
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						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
	under section 513 Tax revenues levied for the						
4	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
5	the organization without charge Total. Add lines 1 through 5						-
	Amounts included on lines 1, 2, and						-
-	3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line						
	13 for the year.						
с	Add lines 7a and 7b.						
в	Public support. (Subtract line 7c						
6	from line 6.)						
se	ction B. Total Support						
	Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6.						
0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
ь	income from similar sources Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975.						
	Add lines 10a and 10b.						
1	Net income from unrelated business activities not included in line 10b.						
	whether or not the business is						1
	regularly carried on.						
2							
	loss from the sale of capital assets (Explain in Part VI.) .						1
3							
	11, and 12,),						
1	First 5 years. If the Form 990 is for th						
•	check this box and stop here	<u></u>					► 🗆
		Support Bares	ntage				
	ction C. Computation of Public S			column (f))		15	
Se	ction C. Computation of Public S Public support percentage for 2020 (lin	e 8, column (f) d	, , ,	( //			
Se	ction C. Computation of Public S	e 8, column (f) d	, , ,	( //		16	
Se 5	ction C. Computation of Public S Public support percentage for 2020 (lin	e 8, column (f) d chedule A, Part I	II, line 15	( //		16	
Se 5 5 Se	ction C. Computation of Public Public support percentage for 2020 (lin Public support percentage from 2019 S	e 8, column (f) d chedule A, Part I <b>nent Income</b>	II, line 15 Percentage			16	
Se 5 5 5 5 5	ction C. Computation of Public Support percentage for 2020 (lin Public support percentage from 2019 S ction D. Computation of Investor	e 8, column (f) d chedule A, Part I ment Income 0 (line 10c, colu	II, line 15 Percentage mn (f) divided by	line 13, column (f	))		
Se 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	ction C. Computation of Public Support percentage for 2020 (lin Public support percentage from 2019 S ction D. Computation of Investre Investment income percentage for 202 Investment income percentage from 20	e 8, column (f) d chedule A, Part I ment Income 0 (line 10c, colu 019 Schedule A,	II, line 15 Percentage mn (f) divided by Part III, line 17 .	line 13, column (f	))	17 18	ine 17 is not
Se 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	ction C. Computation of Public Support percentage for 2020 (lin Public support percentage from 2019 S ction D. Computation of Investre Investment income percentage for 202 Investment income percentage from 21 331/3% support tests—2020. If the	e 8, column (f) d chedule A, Part I ment Income 10 (line 10c, colu 019 Schedule A, organization did r	II, line 15 Percentage mn (f) divided by Part III, line 17 . not check the box	line 13, column (f	))  ne 15 is more than	17 18 33 1/3%, and li	
Se 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	ction C. Computation of Public Support percentage for 2020 (lin Public support percentage from 2019 S ction D. Computation of Investre Investment income percentage for 202 Investment income percentage from 20	e 8, column (f) d chedule A, Part I ment Income 0 (line 10c, colu 019 Schedule A, organization did r stop here. The o	II, line 15	line 13, column (f on line 14, and lin	))	17 18 33 1/3%, and li tion	🕨 🗆
Se 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	ction C. Computation of Public S Public support percentage for 2020 (lin Public support percentage from 2019 S ction D. Computation of Investor Investment income percentage for 202 331/3% support tests—2020. If the a33 1/3% support tests—2019. If the	e 8, column (f) d chedule A, Part I nent Income (0 (line 10c, colu 019 Schedule A, organization did r (top here. The o to organization did	II, line 15 Percentage mn (f) divided by Part III, line 17 . not check the box rganization qualifi I not check a box	line 13, column (f on line 14, and lin ies as a publicly so on line 14 or line	())	17 18 133 1/3%, and li tion	► □ /3% and line 18 i
Se 5 5 5 5 6 7 8 9 a	ction C. Computation of Public S Public support percentage for 2020 (lin Public support percentage from 2019 S ction D. Computation of Investre Investment income percentage for 202 Investment income percentage from 20 331/3% support tests—2020. If the more than 33 1/3%, check this box and a	e 8, column (f) d chedule A, Part I ment Income (0 (line 10c, colu 019 Schedule A, organization did r (top here. The o to organization did and stop here.	II, line 15 Percentage mn (f) divided by Part III, line 17 not check the box rganization qualifi I not check a box The organization	line 13, column (f on line 14, and lin ies as a publicly su on line 14 or line qualifies as a publ	))	17 18 133 1/3%, and li tion	▶ □ /3% and line 18 i . ▶ □

Par	t IV Supporting Organizations			
	(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and E box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If yo 12d, of Part I, complete Sections A and D, and complete Part V.)			
Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?			
	If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).			
-		2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.			
		3a		-
ь	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.			
		3b		
с	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	30		<u> </u>
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you	3c		<u> </u>
40	checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		<u> </u>
ь	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported	44		<u> </u>
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
с	Did the organization support any foreign supported organization that does not have an IRS determination under sections			
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		<u> </u>
5a		40		<u> </u>
	and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by	5a		
	amendment to the organizing document).	54		
ь	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
с	Substitutions only. Was the substitution the result of an event beyond the organization's control?	50 5c		-
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other			<u> </u>
Ū	than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing			
	organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).			
-		7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	6		
0-	Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons, as	8		-
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .			
		9a		-
D	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		<u> </u>
с	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in			<u> </u>
~	which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		<u> </u>
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding	20		-
	certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"			
	answer line 10b below.	10a		
ь	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the propagation had every hydrogen holdings)			
	the organization had excess business holdings).	10b		

sche	dule A (Form 990 or 990-EZ) 2020		Page
Par	t IV Supporting Organizations (continued)		
		Yes	No
1	Has the organization accepted a gift or contribution from any of the following persons?		
а	avversing body of a supported organization?		
_	11	-	
	A family member of a person described in 11a above? 111		
с	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part VI.	;	
Se	ection B. Type I Supporting Organizations		_
		Yes	No
	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
	applied to such powers during the tax year.		
	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit		
	carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.		
5.	ection C. Type II Supporting Organizations	_	
-	ceton c. Type II Supporting Organizations	Yes	N
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of		<u> </u>
	each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	+	⊢
50	ection D. All Type III Supporting Organizations		<u> </u>
	Cellon D. All Type III Supporting organizations	Yes	N
	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing		
	documents in effect on the date of notification, to the extent not previously provided?	+	$\vdash$
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
	maintaineu a close and continuous working relationship with the supported organization(s).		
	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant		
	voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		$\vdash$
Se	ection E. Type III Functionally-Integrated Supporting Organizations		-
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	):	
a	The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	uctions	)
	Activities Test. Answer lines 2a and 2b below.		_
		Yes	N
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted		
	substantially all of its activities.		
b	Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
	involvement. 2b	+	⊢
	Parent of Supported Organizations. Answer lines 3a and 3b below.	-	1
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.		
b	<ul> <li>Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.</li> </ul>		
_		_	1

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true	-		Part VI). See
_	instructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
ь	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in instructions)	ntegrat	ed Type III supporting o	rganization (see

Schedule A (Form 990 or 990-EZ) 2020 Part V Type III Non-Functionally Integrated	509(a)(3) Supporting	Organizations (c	ontinue	Page d)
Section D - Distributions	Supporting	organizations (o	onanae	Current Year
				ourrent rear
<ol> <li>Amounts paid to supported organizations to accomplish</li> </ol>	exempt purposes		1	
<ol> <li>Amounts paid to perform activity that directly furthers e excess of income from activity</li> </ol>	xempt purposes of supported	organizations, in	2	
3 Administrative expenses paid to accomplish exempt pur	poses of supported organization	ons	3	
4 Amounts paid to acquire exempt-use assets			4	
5 Qualified set-aside amounts (prior IRS approval required	d - provide details in Part VI)		5	
6 Other distributions (describe in Part VI). See instruction			6	
	15			
7 Total annual distributions. Add lines 1 through 6.			7	
8 Distributions to attentive supported organizations to wh details in Part VI). See instructions	ich the organization is respons	sive ( <i>provide</i>	8	
9 Distributable amount for 2020 from Section C, line 6			9	
10 Line 8 amount divided by Line 9 amount			10	
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributi Pre-2020	ons	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6				
<ol> <li>Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions.</li> </ol>				
3 Excess distributions carryover, if any, to 2020:				
a From 2015				
b From 2016				
c From 2017				
e From 2019				
f Total of lines 3a through e				
g Applied to underdistributions of prior years				
h Applied to 2020 distributable amount				
i Carryover from 2015 not applied (see instructions)				
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2020 from Section D, line 7:				
\$ a Applied to underdistributions of prior years				
b Applied to 2020 distributable amount				
c Remainder. Subtract lines 4a and 4b from line 4.				
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.				
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.				
7 Excess distributions carryover to 2021. Add lines 3j and 4c.				
8 Breakdown of line 7:				
a Excess from 2016				
b Excess from 2017				
c Excess from 2018				
e Excess from 2020				Form 990 or 990-EZ) (202

Schedule A (Form 990 or 990-EZ) 2	Page 8					
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).						
Facts And Circumstances Test						
990 Schedule A, Supplement	al Information					
Return Reference	Explanation					
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER         MISCELLANEOUS INCOME - 2016 AMOUNT: \$ -6,105. 2017 AMOUNT: \$ 40,815. 2018 AMOUNT: \$ 47,628           INCOME:         . 2019 AMOUNT: \$ 79,536. 2020 AMOUNT: \$ 6,269. LATE FEES - 2016 AMOUNT: \$ 1,955. 2017 AMOU           INCOME:         NT: \$ 980. 2018 AMOUNT: \$ 845. 2019 AMOUNT: \$ 470. 2020 AMOUNT: \$ 260.						

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	HEDULE D	Supple	emental Fina	ncial Statements			OMB No. 1545-0047		
	m 990)	► Complete i	f the organization a 7, 8, 9, 10, 11a, 11b	nswered "Yes," on Form 99 , 11c, 11d, 11e, 11f, 12a, or			2020		
	tment of the Treasury al Revenue Service	► Go to <u>www.irs.go</u>	Attach to I v/Form990 for inst	rorm 990. ructions and the latest info	rmatio	on.	Open to Public Inspection		
Na	me of the organ	ization			Emp	ployer ident	tification number		
OPE	INATION HOMEPRON	1 Dec			32-0	0033325			
Pa		zations Maintaining Dong te if the organization answe			or Acc	counts.			
I—	comple	te il the organization answe		Donor advised funds		(b) Funds a	and other accounts		
1	Total number at	end of year							
2	Aggregate value	of contributions to (during year	)						
3		of grants from (during year)							
4		at end of year			L				
5	organization's p	ation inform all donors and dono roperty, subject to the organiza ation inform all grantees, donors	tion's exclusive legal	control?			e 🗌 Yes 🗌 No		
ľ	charitable purpo	ses and not for the benefit of th	e donor or donor adv	isor, or for any other purpose			ssible		
I	-						🗆 Yes 🗆 No		
Pa		vation Easements. te if the organization answe	red "Yes" on Form	990, Part IV, line 7.					
1		inservation easements held by t							
	Preservatio	on of land for public use (e.g., r	ecreation or education	n) Preservation of an	histor	rically import	ant land area		
	_	of natural habitat		Preservation of a	certifie	d historic str	ucture		
	Preservation	on of open space							
2		a through 2d if the organization	held a qualified cons	servation contribution in the fo	rm of a				
		e last day of the tax year. conservation easements				Held at t	the End of the Year		
а		stricted by conservation easeme			2a 2b				
Ľ	-	ervation easements on a certifie			20				
d	Number of conse	ervation easements included in ( n the National Register			2d				
3	Number of cons tax year ►	ervation easements modified, tr	ansferred, released, e	extinguished, or terminated by	the on	ganization di	uring the		
4	Number of state	s where property subject to cor	servation easement i	s located >		_			
5	Does the organiz and enforcemen	zation have a written policy reg t of the conservation easement	arding the periodic most it holds?	onitoring, inspection, handling	of viola		Yes 🗌 No		
6	Staff and volunt	eer hours devoted to monitoring	g, inspecting, handling	g of violations, and enforcing o	onserv	ation easem	ents during the year		
7	Amount of expe	nses incurred in monitoring, ins	pecting, handling of v	iolations, and enforcing conser	rvation	easements o	during the year		
8		ervation easement reported on I (h)(4)(B)(ii)?			.70(h)(		Yes No		
9	balance sheet, a	cribe how the organization repo and include, if applicable, the tex 's accounting for conservation e	at of the footnote to t						
Par	t IIII Organi	zations Maintaining Colle te if the organization answe	ctions of Art, His		ner Si	milar Asse	ets.		
<b>1</b> a	historical treasu	on elected, as permitted under res, or other similar assets held xt of the footnote to its financia	for public exhibition,	education, or research in furth					
ь	historical treasu	on elected, as permitted under res, or other similar assets held its relating to these items:	FASB ASC 958, to rep for public exhibition,	ort in its revenue statement a education, or research in furth	nd bala nerance	ance sheet w a of public se	orks of art, rvice, provide the		
(	,	ed on Form 990, Part VIII, line	1			►\$			
(	ii)Assets included	in Form 990, Part X							
2	If the organizati	on received or held works of art its required to be reported under	, historical treasures,	or other similar assets for fina			the		
а	Revenue include	ed on Form 990, Part VIII, line 1				. ►\$			
b		in Form 990, Part X							
For I	Paperwork Redu	ction Act Notice, see the Ins	tructions for Form	990. Cat. No.	52283	3D Sched	ule D (Form 990) 2020		

Sche	dule D	(Form 990) 2020													Page 2
Part	1111	Organizations M	aintaining Col	lections of	of Art, I	Histori	cal Tr	reasu	res, o	r Other	Similar A	ssets (	continue	d)	
3		the organization's acq (check all that apply):		n, and other	r records,	, check a	any of	the fol	llowing t	that are a	significant	use of it:	s collecti	on	
а		Public exhibition				d		Loan	or exchi	ange prop	arams				
ь	_														
_		Scholarly research						Other							
с	$\Box$	Preservation for future	e generations												
4	Provid Part )	de a description of the XIII.	organization's col	lections and	d explain	how the	ey furth	her the	organiz	tation's e	xempt purp	ose in			
5		g the year, did the org s to be sold to raise fur										🗆 Ye	⊧s □	] NG	•
Par	t IV	Escrow and Cust Complete if the or X, line 21.			" on Fo	rm 990	, Part	IV, lir	ne 9, o	r reporte	ed an amo	unt on f	Form 99	90, I	Part
1a		e organization an agent ded on Form 990, Part )				diary for	contril	butions	s or othe	er assets	not 	🗆 Ye	•s 🗹	] NG	•
b	If "Ye	es," explain the arrange	ement in Part XIII	and comple	ete the fo	ollowing	table:					Amount			-
c		ning balance				-				1c					-
d		ions during the year .								1d					-
e	Distri	butions during the year	r							1e					-
f	Endin	g balance								1f					-
2-		he organization include								convet liv	shilib.2		. Г	] N	-
2a		-										_	15 L	1 140	0
b	_	s," explain the arrange		. Check her	e if the e	xplanati	on has	been	provide	d in Part	×III • • • •	. 🖭			
Pa	rt V	Endowment Fund Complete if the on		vered "Ves	" on For	rm 990	Part	TV. lir	ne 10.						
		complete il tile on	gamzation anov	(a) Currei			rior yea			ears back	(d) Three ye	ears back	(e) Four	year	s back
1a	Beginn	ing of year balance .													
b	Contrib	outions													
с	Net inv	vestment earnings, gair	ns, and losses												
d	Grants	or scholarships													
		expenditures for faciliti ograms	es												
f	Admini	istrative expenses													
g	End of	year balance													
2	Provid	de the estimated perce	ntage of the curre	ent year end	d balance	line 1	a, colur	mn (a)	) held a	is:					
а		d designated or quasi-e		,,				,	,						
ь	Perm	anent endowment F	110000												
c	Term	endowment >													
·		ercentages on lines 2a	. 2b. and 2c shou	ild equal 10	0%.										
3a	Are th	here endowment funds	not in the posses	sion of the	organizat	tion that	are h	eld and	d admini	istered fo	r the				
	-	nization by:										_		es	No
		nrelated organizations					•	• •	• •				a(i)	$\rightarrow$	
•		elated organizations		• • • •			· ·		• •				a(ii)	+	
ь 4		es" on 3a(ii), are the re ribe in Part XIII the inte	-					•	• •			· L	3b		
Dar	tVI			-		THE IL	anas.								
- ui		Complete if the on			" on For	rm 990	, Part	IV, lir	ne 11a.	. See Fo	rm 990, Pa	art X, lir	ne 10.		
	Descri	ption of property	(a) Cost or oth (investme		(b) Cost	t or other	basis (o	other)	(c) Acc	umulated (	depreciation	-	(d) Book	value	,
1.2	Land				<u> </u>		61	1,237							611,23
	Buildin							9,828			95,981				,133,84
		old improvements			<u> </u>		5,64				201201	<u> </u>		9,	
		nent			<u> </u>		53	8,434			535,502	<u> </u>			2,93
					<u> </u>			34,840			1,060,760				674,08
		ines 1a through 1e. (C	Column (d) must a	vaual Form	990 Part	t X. colu			10(c) }		1,060,760	<u> </u>			,422,09
oud	a Aud	inica za cirougii ze. (c	wanni (a) mast e	iquer ronn :	sso, ran	. <i>n,</i> coiu	(9)	, me	. o(c)./			hedule C	(Form		

	Investments—Other Securities. Complete if the organization answered "Yes" on Form 99	0. Part TV	ne 11	See Form 990	Part X, line 12
	(a) Description of security or category (including name of security)	(b) Book value		(c) Meth	od of valuation: f-year market value
) Financia	al derivatives				
	held equity interests	· —			
)		-			
)					
)			-		
)			-		
			-		
		_			
-	n (b) must equal Form 990, Part X, col. (8) line 12.)	•			
rt VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 99	0, Part IV, li	ne 110	. See Form 990,	Part X, line 13.
	(a) Description of investment			(b) Book value	(c) Method of valuatio Cost or end-of-year may value
)					
)					
)					
)					
)					
)					
)					
, 0)					
-					
	on (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets.		•		
		), Part IV, lin	ne 11d	See Form 990, Pa	et X. line 15.
	Complete if the organization answered 'Yes' on Form 990 (a) Description				
)GIFT CA	(a) Description RDS				(b) Book value 142
)IN-KIND	(a) Description RDS GOODS				(b) Book value 142 829
ON-KIND CONTRIS OTHER	(a) Description RDS				(b) Book value 142 829 12,632
)IN-KIND CONTRIE OTHER	(a) Description RDS GOODS				(b) Book value 142 829 12,632
IN-KIND CONTRIS OTHER	(a) Description RDS GOODS				(b) Book value 142 829 12,632
) CONTRIS OTHER )	(a) Description RDS GOODS				(b) Book value 142 829 12,632
) CONTRIS OTHER )	(a) Description RDS GOODS				(b) Book value 142 829 12,632
IN-KIND CONTRIE OTHER	(a) Description RDS GOODS				(b) Book value 142 829 12,632
)IN-KIND CONTRIE )OTHER )	(a) Description RDS GOODS				(b) Book value 142 829 12,632
) ) ) ) ) ) ) ) ) ) ) ) ) )	(a) Description RDS GOODS BUTED HOUSES INVENTORY imm (b) must equal Form 990, Part X, col.(B) line 15.)				(b) Book value 142 823 12,632 1 1 1 1 1 1 1 1 1 1 1 1 1
)(N-KIND )(CONTRIS )(OTHER ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) )	(a) Description RDS GOODS BUTED HOUSES INVENTORY umn (b) must equal Form 990, Part X, col.(8) line 15.) Other Liabilities.				(b) Book value 142 823 12,632 1 1 1 1 1 1 1 1 1 1 1 1 1
DN-KIND CONTRII OTHER ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) )	(a) Description RDS GOODS BUTED HOUSES INVENTORY  Imm (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 99( (a) Description of liat	 D, Part IV, lir	 he 11e		(b) Book value 142 823 12,632 1 1 1 1 1 1 1 1 1 1 1 1 1
IN-KIND CONTRIE OTHER ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) )	(a) Description ROS GOODS BUTED HOUSES INVENTORY umn (b) must equal Form 990, Part X, col.(8) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 990	 D, Part IV, lir	 ne 11e		(b) Book value 142 823 12,632 1 1 1 1 1 1 1 1 1 1 1 1 1
IN-KIND CONTRIE OTHER ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) )	(a) Description RDS GOODS BUTED HOUSES INVENTORY  Imm (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 99( (a) Description of liat	 D, Part IV, lir	 ne 11e		(b) Book value 142 823 12,632 1 1 1 1 1 1 1 1 1 1 1 1 1
IN-KIND CONTRII OTHER	(a) Description RDS GOODS BUTED HOUSES INVENTORY  Imm (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 99( (a) Description of liat	 D, Part IV, lir			(b) Book value 142 829 12,632 1 1 1 1 1 1 1 1 1 1 1 1 1
) CONTRIS OTHER ) ) ) ) ) ) ) ) ) ) ) ) )	(a) Description RDS GOODS BUTED HOUSES INVENTORY  Imm (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 99( (a) Description of liat	 D, Part IV, lir			(b) Book value 142 829 12,632 1 1 1 1 1 1 1 1 1 1 1 1 1
EN-KIND CONTRIS JOTHER J J J J J J J J J J J J J J J J J J J	(a) Description RDS GOODS BUTED HOUSES INVENTORY  Imm (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 99( (a) Description of liat	 D, Part IV, lir	, , , ne 11e		(b) Book value 142 829 12,632 1 1 1 1 1 1 1 1 1 1 1 1 1
(Contraining of the second of	(a) Description RDS GOODS BUTED HOUSES INVENTORY  Imm (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 99( (a) Description of liat	 D, Part IV, lir			(b) Book value 142 829 12,632 1 1 1 1 1 1 1 1 1 1 1 1 1
) ) ) ) ) ) ) ) ) ) ) ) ) )	(a) Description RDS GOODS BUTED HOUSES INVENTORY  Imm (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 99( (a) Description of liat	 D, Part IV, lir			(b) Book value 142 823 12,632 1 1 1 1 1 1 1 1 1 1 1 1 1
(CONTRELED TO THE CONTRELED TO THE CONTR	(a) Description RDS GOODS BUTED HOUSES INVENTORY  Imm (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 99( (a) Description of liat	 D, Part IV, lir			(b) Book value 142 829 12,632 1 1 1 1 1 1 1 1 1 1 1 1 1
(Contraction of the second of	(a) Description RDS GOODS BUTED HOUSES INVENTORY  Imm (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 99( (a) Description of liat	 D, Part IV, lir	 ne lle		(b) Book value 142 029 12,632 1 13,605
) IN-KIND CONTRIE ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) )	(a) Description RDS GOODS BUTED HOUSES INVENTORY  Imm (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Form 99( (a) Description of liat	 D, Part IV, lir			(b) Book value 142 829 122,632 12,632 12,632 14 14 142 142 142 142 142 142 142 142

Par	rt XI Reconciliation of Revenue per Audited Financial Statements With Reven	ue per Re	turn.	
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	ac per re	curn.	
L	Total revenue, gains, and other support per audited financial statements		1	43,582,16
:	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1		
a	Net unrealized gains (losses) on investments	-7,419		
b	Donated services and use of facilities	4,332,265		
c	Recoveries of prior year grants			
đ	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		2e	4,324,84
	Subtract line 2e from line 1		3	39,257,31
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	207		
ь	Other (Describe in Part XIII.)			
с	Add lines 4a and 4b		4c	20
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	.	5	39,257,52
Par	t XII Reconciliation of Expenses per Audited Financial Statements With Expen	ises per R	eturn.	
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.			
	Total expenses and losses per audited financial statements	·	1	43,671,76
	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	4,332,265		
b	Prior year adjustments			
с	Other losses			
đ	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d	·	2e	4,332,26
1	Subtract line 2e from line 1	·	3	39,339,50
ł	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	207		
b	Other (Describe in Part XIII.)			
с	Add lines 4a and 4b	·	4c	20
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	39,339,70
Par	rt XIII Supplemental Information			
	vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b a		V, line 4; i	Part X, line 2; Part
XI, I	lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional infor	mation.		
	Return Reference Explanation			
ie A	Additional Data Table			
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_				

Schedule D (Form 990) 2020 Page							
Part XIII Supplemental Infe	ormation (continued)						
Return Reference	Explanation						
	Schedule D (Form 990) 2020						

	Software ID:	
	Software Version:	22.0022225
	EIN:	
	Name:	OPERATION HOMEFRONT INC
Supplemental Information		
Return Reference		Explanation

efile GRAPHIC print - DO	NOT PROCESS A	s Filed Data	-	DLN	: 93493102011361				
SCHEDULE G	Supplen	nental Inf	ormation Rega	rdina	OMB No. 1545-0047				
(Form 990 or 990-EZ)			Gaming Activit	•	2020				
	Complete if the organizatio	in answered "Yes"	on Form 990, Part IV, lines 1 an \$15,000 on Form 990-EZ, li	7, 18, or 19, or if the					
Department of the Treasury Internal Revenue Service		Attach to Form	n 990 or Form 990-EZ.		Open to Public Inspection				
Name of the organization	Go to www.ins	.gov/Form990 to	r instructions and the latest in		ntification number				
OPERATION HOMEFRONT INC				32-0033325					
Part I Fundraising Acti	vities. Complete if th	e organizatio	n answered "Yes" on Fo	rm 990, Part IV, line 1	17.				
	s are not required to								
1 Indicate whether the organi	ization raised funds thro	ugh any of the	following activities. Check	all that apply.					
a 🗹 Mail solicitations			e 🗹 Solicitation of non-	government grants					
<ul> <li>Internet and email solic</li> </ul>	✓ Internet and email solicitations f □ Solicitation of governme								
c D Phone solicitations	events								
d 🗹 In-person solicitations									
2a Did the organization have a	written or oral agreeme	ant with any inc	ividual (including officers	directors trustees					
or key employees listed in F					es 🗆 No				
b If "Yes," list the 10 highest to be compensated at least			) pursuant to agreements	under which the fundraise	er is				
to be compensated of least	so,ooo oy are organiza								
<ul> <li>(i) Name and address of individual</li> </ul>	(ii) Activity	(iii) Did fundraiser hav	e from activity	(v) Amount paid to (or retained by)	(vi) Amount paid to (or retained by)				
or entity (fundraiser)		custody or control of		fundraiser listed in col. (i)	organization				
		contributions? Yes No	,	coi. (i)					
	DIRECT		1						
MARKETEAM 1200 ABERNATHY ROAD NE	RESPONSE/PRINTING	No	4,854,047	1,984,085	2,869,962				
STE 1600			4,004,047	1,504,005	2,009,902				
ATLANTA, GA 30328	DIRECT MAILING								
THOMPSON HABIB &	SERVICES								
DENISON INC 80 HAYDEN AVENUE STE 300		No	143,545	37,123	106,422				
LEXINGTON, MA 02421									
			+						
Fotal		►	4,997,592	2,021,208	2,976,384				
<ol> <li>List all states in which the org licensing.</li> </ol>	ganization is registered o	or licensed to so	licit contributions or has b	een notified it is exempt f	rom registration or				
AL, AK, AZ, AR, CA, CO, CT, DE, I DK, OR, PA, RI, SC, SD, TN, TX, U			A, ME, MD, MA, MI, MN, M	S, MO, MT, NE, NV, NH, N	13, NM, NY, NC, ND, OH,				
For Danenwork Deduction Act Notic		- E	00-E7 Cat No	F000011 0.1.1.1.0	Form 000 or 000-F7) 2020				

_	edule G (Form 990 or 990-EZ) 2020	te if the organization	answered "Yes" on For	m 990, Part IV, line 15	Page 2 8. or reported more
r a	than \$15,000 of fundraising e gross receipts greater than \$5	vent contributions and			
		(a)Event #1 MCOY	(b) Event #2 GOLF	(c)Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	TOURNAMENTS (event type)	(total number)	co. (c))
Revenue					
	1 Gross receipts	197,000	172,096		369,096
	2 Less: Contributions				
—	line 2)	197,000	172,096	i	369,096
	4 Cash prizes	77,112	206		77,318
ses	6 Rent/facility costs		18,879		18,879
Direct Expenses	7 Food and beverages	12,500			14,033
ம் ஜ	8 Entertainment	25,089	138		25,227
Direc	9 Other direct expenses	10,842	22,540		33,382
-	10 Direct expense summary. Add lines 4 t	through 9 in column (d)			168,839
	11 Net income summary. Subtract line 10	from line 3, column (d)		🕨	200,257
Par	on Form 990-EZ, line 6a.	anization answered "Ye	s" on Form 990, Part I	IV, line 19, or reported	d more than \$15,000
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Re	1 Gross revenue				
see	2 Cash prizes				
Expenses					
	3 Noncash prizes				
Direct	4 Rent/facility costs				
0	5 Other direct expenses				
	6 Volunteer labor	□ Yes%_	□ Yes%	□ Yes%	
	7 Direct expense summary. Add lines 2 t	through 5 in column (d)			
	8 Net gaming income summary. Subtract		n (d).	•	
9 a	Enter the state(s) in which the organizati Is the organization licensed to conduct ga				
b	If "No," explain:				
10a b	Were any of the organization's gaming lic If "Yes," explain:	censes revoked, suspende	d or terminated during th	e tax year?	Yes No
				Schedule G (	Form 990 or 990-EZ) 2020

Sche	dule G (Form 990 or 990-EZ) 2020 Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?
13	Indicate the percentage of gaming activity conducted in:
а	The organization's facility
ь	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ►
	Address P Does the organization have a contract with a third party from whom the organization receives gaming revenue?
ь	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$
c	If "Yes," enter name and address of the third party:
	Name >
	Address ►
16	Gaming manager information:
	Gaming manager compensation Þ \$
	Description of services provided ►
	Director/officer
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
Ь	Enter the amount of distributions required under state law distributed to other exempt organizations or spent
Par	in the organization's own exempt activities during the tax year ► \$ Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.
	Return Reference Explanation
	Schedule G (Form 990 or 990-F7) 2020

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Note: To capture the	e full ce	ontent of this d	ocument, please se	elect landscape mode	e (11" x 8.5") who	en printing.				
Schedule I (Form 990)			Grants and C	Other Assistant	ce to Organiz	ations,			OMB No. 1545-00	
(Form 990)			Governments	and Individual	s in the Unite	d States			2020	
		Co	mplete if the organiz	ation answered "Yes," ( Attach to Form		, line 21 or 22.			Open to Publi	c
Department of the Treasury Internal Revenue Service			Go to www	w.irs.gov/Form990 for		on.			Inspection	
Name of the organization OPERATION HOMEFRONT	1140							Employer iden	tification number	
								32-0033325		
			and Assistance							
				the grants or assistance,		for the grants or assistan	ce, and		V Yes	
2 Describe in Part IV	the orga	inization's procedur	res for monitoring the us	se of grant funds in the Ur	nited States.				20 145	<u> </u>
Part II Grants and that received			estic Organizations a can be duplicated if add		ents. Complete if the o	rganization answered "Yes	s" on Form	n 990, Part IV,	line 21, for any reci	pient
(a) Name and addres organization or government		(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		Description of cash assistance		
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
				s listed in the line 1 table				·:: <b>:</b> -		
For Paperwork Reduction		-			Cat. No. 5005				Schedule I (Form 99	0) 2020

Schedule I (Form 990) 2020								Page 2
Part III Grants and Other Ass Part III can be duplicat	sistance to ted if additio	Domestic Individu nal space is needed	aals. Complete if the orga	inization answ	ered "Yes" on Fo	rm 990, Part IV, line 22.		
(a) Type of grant or assistant	ce	(b) Number of recipients	f (c) Amoun cash grad		(d) Amount of ncash assistance	(e) Method of valuation FMV, appraisal, oth		(f) Description of noncash assistance
(1) ASSISTANCE TO CLIENTS		57139	5,100,886	1	9,156,780 FMV		COMPL ITEMS	TOYS, FURNITURE, COMPUTERS AND JTER EQUIPMENT, CLOTHING, DECORATIVE , SCHOOL SUPPLIES, GIFT CARDS, VEHICLES, ONCERT/SPORTS TICKETS.
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
Part IV Supplemental I	Informatio	on. Provide the in	formation required in	Part I, line 2	; Part III, colur	mn (b); and any other	additio	nal information.
Return Reference	Explanation							
PART I, LINE 2:	FUNDS ARE STATEMENT	NOT PAID TO THE O	CLIENTS DIRECTLY, THEY WAYS KNOW THE FUNDS	ARE PAID TO ARE USED FO	THE LENDING IN OR THE INTENDE	STITUTION/LESSOR/CREI D PURPOSE ONLY.	DITOR U	JPON REVIEW OF THE BILLS AND FINANCIAL
								Schedule I (Form 990) 2020

efil	e GRAPHIC pr	efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93493102011361										
Sch	nedule J	Compen	sat	ion Information		OMB No.	1545-0	0047				
(Forr	m 990)	For certain Officers, Directo	ors, 1	rustees, Key Employees, and Hig	hest							
				ated Employees vered "Yes" on Form 990, Part IV,	line 23	20	)2(	)				
		► A	ttack	to Form 990.				<u></u>				
	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/Form99</u>	<u>0</u> for	instructions and the latest inform	nation.	Open t	ectio					
Nan	me of the organiza				Employer identifi							
OPERATION HOMEFRONT INC 32-0033325												
Pa	Part I Questions Regarding Compensation											
		Yes	No									
1a		opiate box(es) if the organization provided a ection A, line 1a. Complete Part III to provi										
	First-class	s or charter travel		Housing allowance or residence for	personal use							
		companions		Payments for business use of perso								
		nification and gross-up payments		Health or social club dues or initiation								
	Discretion	ary spending account		Personal services (e.g., maid, chauf	feur, chef)							
ь		xes on Line 1a are checked, did the organiz or provision of all of the expenses describe				16						
2		ation require substantiation prior to reimbur				2						
	directors, truste	es, officers, including the CEO/Executive D	recto	r, regarding the items checked on Lir	ne 1a?							
3	organization's C	if any, of the following the filing organizatic EO/Executive Director. Check all that apply d organization to establish compensation o	. Do	not check any boxes for methods								
	Compensa	ation committee	✓	Written employment contract								
		ent compensation consultant	$\checkmark$	Compensation survey or study								
	Form 990	of other organizations	$\checkmark$	Approval by the board or compensa	tion committee							
4	During the year, related organiza	, did any person listed on Form 990, Part V ition:	II, Se	ection A, line 1a, with respect to the fi	iling organization or	a						
а	Receive a sever	ance payment or change-of-control paymer	nt?.			4a		No				
b		r receive payment from, a supplemental no				4b		No				
с		r receive payment from, an equity-based co				4c		No				
	If "Yes" to any o	of lines 4a-c, list the persons and provide th	ie ap;	plicable amounts for each item in Part	t III.							
	Only 501(c)(3	), 501(c)(4), and 501(c)(29) organizat	ions	must complete lines 5-9.								
5		ed on Form 990, Part VII, Section A, line 1a		,								
	compensation c	ontingent on the revenues of:										
а	The organization	n?				5a		No				
b		anization?				5b		No				
		5a or 5b, describe in Part III.										
6		ed on Form 990, Part VII, Section A, line 1a ontingent on the net earnings of:	, did	the organization pay or accrue any								
а	The organization	n?				6a		No				
b		anization?				6b		No				
_		6a or 6b, describe in Part III.										
7		ed on Form 990, Part VII, Section A, line 1a escribed in lines 5 and 6? If "Yes," describe				7		No				
8	subject to the in	nts reported on Form 990, Part VII, paid or iitial contract exception described in Regula	tions	section 53.4958-4(a)(3)? If "Yes," de								
~						8		No				
9		8, did the organization also follow the rebut				9						
For F		ction Act Notice, see the Instructions				e J (Form	990)	2020				

Schedule J (Form 990) 2	020							a
		ctors, Trustees, Key	Employees, and Hi	ohest Compensated	Employees. Use dup	licate copies if addition	nal space is needed.	Page 2
or each individual whos	e com	pensation must be report	ted on Schedule J, report	compensation from the	organization on row (i) an			
			are not listed on Form 9 lividual must equal the to		Part VII, Section A, line	ta, applicable column (D)	and (II) amounts for the	t individual.
(A) Name and Title			of W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
(K) have and hole		(i) Base compensation	(iii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	column (8) reported as deferred on prior Form 990
JOHN I PRAY JR PRESIDENT/CEO	(i)	447,318	0	0	0	0	447,318	0
ALSO DEN 1/CEO	(ii)	0	0	0	0	0	0	0
MARGUERITE KIRST	(i)	233,307	24,000	0	0	0	257,307	0
000	(ii)	0	0	0	0	0	0	0
ROBERT THOMAS	(1)	214,331	12,000	0	0	0	226,331	0
000		0	0				0	
ANDRE HAWKINS	(11)	162,215	4,000	0	0	0	166,215	0
CFAO	(1)	0						
S JUL ESKIN-SMITH	(ii)	155,788	0	0	0	0	0	0
VP OF CORPORATE & FOUNDATI	(i) (ii)	0	5,000	0	0	0	0	0 0
MAY STERNBERG VP OF MARKETING	(1)	150,434	5,000	0 0	0	0	0	0 0
7 TROY KASBARIAN	(ii)	146,813	4.000	0	0	0	150.813	0
VP OF IT & GENERAL SERVICES	(ii)	0	0				0	
	(,							
	$\vdash$							
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	$\square$							
	$\square$							
							Schedule	J (Form 990) 2020
ichedule J (Form 990) 2	020							Page 3
Part III Supplem			entred for Death 1. House for	11 5 45 45 40 F- F		a from II. Also, converting	this and for any official	l information
Provide the information, Return Refer	_	nation, or descriptions re	quired for Part I, lines 1a	, 10, 3, 4a, 40, 4c, 5a, 5	b, 6a, 6b, 7, and 8, and f Explanation	or Part II. Also complete	this part for any addition	a information.
	_				-		Schedule	1 (Form 990) 2020

efil	e GRAPHIC p	rint - DO NOT PR	OCESS	As Filed Data -		DLN:	93493102011361
	EDULE M		N	oncash Contri	hutions		OMB No. 1545-0047
(For	m 990)		г	Concash Contri	bullons	1	2020
		►Complete if the	organizati	ons answered "Yes" on F	orm 990, Part IV, lines 29	or 30.	2020
		► Attach to Form	990.				
Depart	ment of the Treasury	►Go to <u>www.irs.g</u>	ov/Form9	90 for the latest informat	tion.		Open to Public
	al Revenue Service						Inspection
	of the organizat					Employer ident	ification number
OPERG	ATION HOMEFRONT	INC				32-0033325	
Pa	rt I Types	of Property					
			(a)	(b)	(c)		(d)
			Check if	Number of contributions or	Noncash contribution		of determining
			applicable	items contributed	amounts reported on	noncash co	ntribution amounts
					Form 990, Part VIII, line 1g		
1	Art—Works of an	t			-2		
2	Art-Historical tr	easures .					
3	Art-Fractional in	nterests					
4	Books and public	cations					
5	Clothing and hou		x		13,605,651	FMV	
6	goods Cars and other v	vehicles .					
	Boats and planes						
	Intellectual prop						
	Securities—Publi						
1	Securities-Close	,					
11	Securities-Partr	nership, LLC,					
	or trust interest						
	Securities-Misco						
13	Qualified conser- contribution—H						
	structures .						
14	Qualified conserv						
1 5	contribution-O Real estate-Res		x	19	4,137,297	EM0/	
	Real estate—Cor		-	19	4,137,297	PPIV	
	Real estate-Oth						
	Collectibles .						
	Food inventory						
	Drugs and media						
21	Taxidermy .						
	Historical artifac						
	Scientific specim						
	Archeological art						
	Other  (GIFT C Other  (		X	3,976	435,384	PMV	
	Other  (						
	Other  (						
			he organiza	ation during the tax year for	contributions		
	for which the org	ganization completed	Form 8283	3, Part IV, Donee Acknowled	gement	29	
1							Yes No
30a				y contribution any property r			
1				e of the initial contribution, a		e used for exemp	
							30a No
ь	If "Yes," describ	be the arrangement i	n Part II.				
31	Does the organi	ization have a gift ac	ceptance p	olicy that requires the review	v of any nonstandard contril	butions?	31 Yes
32a				or related organizations to s		sh	
							32a No
	If "Yes," describ						
33			amount in c	olumn (c) for a type of prop	erty for which column (a) is	checked,	
	describe in Part						
For P	aperwork Reducti	on Act Notice, see the	Instruction	is for Form 990.	Cat. No. 512273	Sched	ule M (Form 990) (2020)

Schedule M (For	m 990) (2020)					Page 2
Part II S	upplemental Informa	ımn (b), the ni	the information required by umber of contributions, the formation.			
Retur	rn Reference			Explanation		
					Schedu	le M (Form 990) (2020)
ofile GRADH	IC print - DO NOT F	POCESS	As Filed Data -		DL	N: 93493102011361
SCHEDUL (Form 990 or EZ)	E O Supj 990- Com	plementa plete to prov Form 990 or	al Information to ide information for respon- 990-EZ or to provide any Attach to Form 990 www.irs.gov/Form990 for	nses to specific quest y additional informatio or 990-EZ.	990-EZ ions on on.	OMB No. 1545-0047 2020 Open to Public Inspection
Name St the ofg					Employer ider	tification number
OPERATION HOMEF	RONTING				32-0033325	
990 Schedule	e O, Supplemental I	Information	1			
Return Reference			Expla	nation		
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS RE DIRECTORS FOR APP		EO, CDO, COO, CFAO & S	R. VP OF HR PRIOR TO	D SUBMITTING	TO THE BOARD OF
<u> </u>						
990 Schedule	e O, Supplemental I	Information	1			
Return Reference			Expla	nation		
FORM 990, PART VI, SECTION B, LINE 12C			IS ARE REQUIRED TO RE MID-YEAR IN THE BOARD		THE CONFLICT	OF INTEREST

990 Schedule	e O, Supplemental Information
Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	INDEPENDENT BOARD OFFICERS, DIRECTORS, AND TRUSTEES ARE NOT COMPENSATED. AN EMPLOYEE COMPE NSATION STUDY WAS PERFORMED IN MID-2020. THE STUDY LOOKED AT A NUMBER OF FACTORS INCLUDING JOB CONTENT, ORGANIZATIONAL REVENUE AND PROFILE, INDUSTRY, AND GEOGRAPHIC REGION. THIS CO MPENSATION SURVEY WAS USED TO DETERMINE THAT CURRENT EMPLOYEE COMPENSATION WAS REASONABLE AND WITHIN RANGE.

#### 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	DOCUMENTS MADE AVAILABLE ON OPERATION HOMEFRONT WEBSITE AND ARE AVAILABLE UPON REQUEST.

#### 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C:	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

# List of Names and Qualifications of Key Staff

- Uli Correa works as the department chair at Operation Homefront
- Linda Medler works as the treasurer at Operation Homefront
- Greg Ham is the vice department chair at Operation Homefront
- Tyrone Woodyard is the secretary at Operation Homefront
- Steve Adkinson works as a board member at Operation Homefront
- Derek Blake works as a board member at Operation Homefront
- Rod Essig works at Operation Homefront as a board member and is a music agent.
- JK Huey works as a board member at Operation Homefront
- Dianna Purvis Jaffin is a board member at Operation Homefront who is also the Science and Resilience Adviser
- Angelo Lombardi works as a board member inside Operation Homefront
- Kelly Mayhall works as a board member at Operation Homefront
- Steven G. Mahon works as a board member at Operation Homefront
- John I. Pray Jr. works as a board member at Operation Homefront who is also the President and CEO of Operation Homefront.
- Faith Arnold Schwartz works as a board member at Operation Homefront
- Ken Slater works as a board member at Operation Homefront
- Terry Smith works as a board member at Operation Homefront
- Andre Hawkins works as the Chief Financial and Administrative Officer at Operation Homefront
- Margi Kirst works as the Chief Revenue Officer at Operation Homefront

- Robert D. Thomas works as the Chief Operation Officer at Operation Homefront
- Karen Smithhart works as the Senior VP of Resources at Operation Homefront
- Scott Arcuri works as the VP of Field Operations at Operation Homefront
- Tony Barnett works as the VP of Marketing at Operation Homefront
- Gracie Broll works as the VP of Transitional and Permanent Housing at Operation Homefront
- Jill Eskin- Smith works as the VP of Corporate & Foundation Partnerships at Operation Homefront
- Troy Kasbarian works as the VP of IT, Logistics & Facilities at Operation Homefront
- Scott Wood works as the VP of Individual Giving & Campaigns at Operation Homefront
- Susan Ziesman works as the VP of Integrated Public Relations at Operation Homefront

### LEADERSHIP



Brig Gen John I. Pray, Jr., USAF, Retired  $\rightarrow$ President & CEO



Andre Hawkins → CPA, Chief Financial & Administrative Officer



Margi Kirst → Chief Revenue Officer



Brig Gen Robert D. Thomas, USAF, Retired  $\rightarrow$ Chief Operating Officer



Tony Barnett → VP of Marketing



Karen Smithhart → Senior VP of Human Resources



Gracie Broll → VP of Transitional and Permanent Housing



Colonel Scott Arcuri, USAF, Retired  $\rightarrow$ VP of Field Operations



Jill Eskin-Smith → VP of Corporate & Foundation Partnerships



Troy Kasbarian → VP of IT, Logistics & Facilities



Scott Wood → VP of Individual Giving & Campaigns



Susan Ziesman → VP of Integrated Public Relations

# Data from 2021 Annual Report



# **CELEBRATING 20 YEARS OF SERVING AMERICA'S MILITA**

#### IN THIS REPORT: UNITED WE STAND

When expectations for a better 2021 gave way to a pensistent global pandemic, continued lockdowns, and COVID-19 variants, atruggling military families cast their hopes on Operation Hometront, and we found ways to continue to innovate, grow, and give them the best-in-class programs they have earned and so richly deserve.

For Purple Heart recipient Bryan Edwards and his wife, Annabet, beginning: Operation Homefronts: Permanent Homes for Veterans program was the opportunity of a lifetime. Likewise, when Navy veteran Dandee Ajay's dream of a military career was cut short due to modical retirement, Operation Homefront's Transitional Homes for Veterans program gave her new hope for a brighter future.

This report tells the story of how Operation Homefront has grown to serve tens of thousands of military families each year, thanks to our partners, donors, and volunteew who also stand neady to serve. As we enter our 20<sup>th</sup> year, we continue our important work to support this very special and deserving group of our tellow ditzens in their time of need.

#### MISSION:

Operation Homefront builds strong, stable, and secure military families so they can thrive --not simply struggle to get by in the communities --OUR communities --they have worked so hard to protect.

Headquartered in San Antonio, Texas, and McLean, Virginia, Operation Homefront currently provides supportive programs and services to military families across the nation with 21 locations serving all 50 states.

#### VISION AND CORE BELIEF:

To be the provider of choice for short-term ortical assistance, long-term resiliency, and recurring support programs for military families.

To help our military families in their times of need for all they have done for us in our nation's time of need.



#### VALUES:

Do What's Right: Our actions must always reflect the best interests of the military families we seek to serve.

Gratiltude: As a conduit by which Americans are able to show their appreciation for all that our military community does on our behalf, we must reflect this appreciation and be grateful to all who help us accomplish our mission.

Perform with Excellence: Our troops and their families work tinelessly to protect the freedoms we ergoy daily, and they deserve our werp beat efforts to support them. To do so, we must stay focused on our mission, be accountable, and strive to exceed their expectations.

Respect Others: Recognizing the multiplicative power inherent in a diverse workdonce, we place a priority on creating a collaborative, trust-based working environment that values dignity, tearmork, and each individual's contribution to our collective mission.



# **RY FAMILIES ... AND WORKING TO SECURE THE NEXT 20**

2010 In its inaugural year, Holiday Meals for Military delivered nearly 7,000 meals to military families.

> A second location for Transitional Housing - Villages opened in the Washington, D.C., area.

2011 An initiative with The Home Depot Foundation to repair, rehab, and retrofit homes of wounded heroes started. Since the partnership began, The Home Depot Foundation has donated over \$19 million.

2012 JPMorgan Chase & Co, began providing homes to our Permanent Homes for Veterans program. To date, JPMorgan Chase has donated over 500 homes to the program, totaling nearly \$80 million in deeded value to military families.

2014 50,000" meal served in our Holiday Meals for Military program.

> In September, the Permanent Homes for Veterans program awarded its 100° mortgage-free home to a military family.

2015 The first Cornerstone Award honcred an individual for helping us transform how we deliver on our promise to military families.

2018 The 500° family in the Permanent Homes for Veterans program received a deed to a montgage-free home.

> The first of three military families entered the Transitional Homes for Veterans program, made possible by a \$4.2 militon grant from the A. James & Alice B. Clark Foundation to expand our efforts to provide housing for military families transitioning to civilian life. In 2021, the 21<sup>st</sup> family entered the program and the seventh family graduated.

2020 The Holiday Meals for Military program reached a milestone of over 100,000 military families served.

> The first veteran family graduated from the Transitional Homes for Veterans program. The family worked hard to complete the program early and bought their own home.

> The Critical Financial Assistance program reacted swiftly to needs generated by the COVID-19 creas, tuilling over 1,500 pandemic-related requests for help across 39 states and Puerto Rico and totaling nearly 51 million.

2021 The Slater Family Foundation made a \$2 million commitment to Operation Homefront's mission and to secure the futures of America's military families.

> Our 650° family completed the Permanent Homes for Veterans program and will be deeded their montgage-free home in early 2022.

2022 Operation Homefront programs will hit notable milestones:

The Critical Financial Assistance program will fulfill its 50,000° request. Since 2011, the program will have provided over \$35 million in assistance to military families.

The Transitional Housing - Villages program will provide rent- and utility-free housing to our 700<sup>th</sup> transitioning family.

Back-to-School-Brigade will deliver its 500,000° backpack filled with school supplies to a military child, saving families over \$55 milion in back-to-school expenses.

The 675° military family will graduate from our **Permanent Homes for Veterans** program, surpassing \$100 million in deeded home equity to military families.

# **OUR BOARD AND LEADERSHIP**

#### FROM THE PRESIDENT AND CEO



"THE TITLE OF THIS ANNUAL REPORT -UNITED WE STAND - REFLECTS OUR PLAN TO LAUNCH OUR \$100 MILLION, THREE-YEAR COMPREHENSIVE CAMPAIGN THAT WILL ALLOW US TO SECURE THE FUTURES OF THE MILITARY FAMILIES WE SEEK TO SERVE ... NOW AND FOR DECADES TO COME."

-JOHN I. PRAY, JR., OPERATION HOMEFRONT PRESIDENT AND CHIEF EXECUTIVE OFFICER URIG. GEN. USAF, RETIRED

"OUR CAMPAIGN IS OFF TO A FAST START DUE TO THE CONFIDENCE OUR MANY PARTNERS AND DONORS HAVE IN OUR ABILITY TO FULFILL OUR IMPORTANT MISSION."

ANGELO LOMBARDI, BOARD CHAIRMAN



While 2021 began with encouraging news of a COVID-19 vaccine and the hope of reopening communities across our nation, the pandemic pensisted, and many Americans experienced further disruption and economic hardship ... our military families among them, I am proud to report our staff, board members, volunteers, and donors met these continued challenges with determination and resolve. Using our core values – Do What's Right, Cattbuck, Perform with Excellence, and Respect Others – to guide us, we charged forward bolatered by an unwavering commitment to our mission to helping our military families have the opportunity to thrive, not simply struggle to get by, in the communities – CUR communities – they have worked so hard to protect. As you read this report, I am confident you will agree the meuts and milestones we achieved as a team are not only worth celebrating, but worth using as a solid foundation for further corvut in the years altered.

I am proud to report: We exceeded the 49,000° requests mark for our Critical Financial Assistance program, totaling nearly \$33 million in relef funding; we awarded our 640° mortgage-free home, totaling over \$96 million in deeded value through our Permanent Homes for Veterans program; we velocimed our 25° military family into our fledgiing Transitional Homes for Veterans program, saving them \$350,000 in mortgage costs, and we housed our 650° military family in our Transitional Housing - Villages, saving them over 37 million in rent and utilities. All our programs share a common purpose: to ensure the short-term financial hardships facing our families do not become longterm struggles that derail any hopes of a stronger, more stable, and more secure future.

These stellar accomplishments would not be possible without the extraordinary efforts of our talented staff and our amazing volunteers. Appreciating the need to adapt our program delivery to continue to provide the wide range of impactful programs to our military families in their communities, our headquarters and field staffs continued to work remotely while our volunteers went above and beyond to give more than 51,000 hours and to lead nearly 80% of our Back-to-School Brigade and Holiday Meals for Military distributions.

The title of this annual report – United We Stand – reflects our plan to launch our \$100 million, threeyear comprehensive campaign that will allow us to secure the futures of the military families we seek to serve ...now and for decades to come. It represents a call to action to all those who share our commitment to this very special and deserving group of our fellow citizens. Join us as we celebrate our 20° year and prepare for the next 20 years – standing united for our military families.

8-98-87

With gratitude,

John I. Pray, Jr. President and Chief Executive Officer Brig. Gen. USAF, retired

#### FROM THE BOARD CHAIRMAN

By all measures, 2021 was a difficult year. The continuing pandemic and resulting national and international turbulence and uncertainties continued to place a tremendous strain on all Americans. Yet, despite the challenges that sidelined many other nonprofits, the entire Operation Homefront family has been able to stay focused on and committed to helping our military families overcome their financial hardships.

A big "thank you" goes to all our corporate, foundation, and individual donors, large and small, who have, for 20 years now, enthusiastically supported Operation Homefront's important work and thereby sustained our ability to deliver life-changing programs to tens of thousands of military tamilies each year. Over the past 12 months, we' delivered more than 39,000 backpacks to military families; and helped nearly 1,000 meals to military families; and helped nearly 1,000 meals to military families; and helped nearly 1,000 mew and expecting moms, often far away from their loved ones, prepare to welcome a baby to their family.

Whether a military family benefits from our transitional or permanent housing programs, our financial assistance, program, or our holiday meals or backpack programs, each touchpoint with Operation Hometront reminds them that we are exceedingly grateful for all they have done to protect the freedoms we enjoy daily. I am especially proud that, in a very unsetting social and economic environment, 88 percent of our expenditures went toward our programs. Moreover, I'm proud that we continue to be trusted and respected, as demonstrated by our top ratings by major charity rating agencies. We will not rest on our laurels as we understand there is much work still to do to secure the futures of toose military families who will seek our assistance in the coming years. With this overarching purpose in mind, we continued laying the groundwork on our ambitious \$100 million United We Stand comprehensive campaign and plan to launch this major three-year fundraising effort in early 2022. Our campaign is off to a fast start due to the confidence our many partners and donors have in our ability to fuffit our important mission.

I, along with my fellow board members, believe it is both an honor and a duty to serve those who do so much to serve all of us...our military families. While we can be proud of all we have accomplished, the fact remains that many military families will continue to struggle as they transition back into their civilian communities. The good news is that we are positioned to continue dur important work, and, I am proud to say, we will be there to help them. Many thanks,

and Londonsi

Angelo Lombardi Chairman, Board of Directors President, Sentia Wellness



#### 2021 BOARD MEMBERS

Angelo Lombardi (Cher) President, Sentia Welhess

Ulises Correa (Vos Otait) Régional Voc President, Region 8 - South Central Division, Tecas, Watmant

Dienne Purvix Juttin, PhD (Decretary) Science and Resilience Advisor

JK Hany (Instructor) CED, Huny Management Bendt

Bleve Addreson Senior Vice President & Senior Advisor, Mentil Ljinch Viliath Management

Devek Blake Head of Pertnentage, TauAct, Blaces

Ped Easig Music Agent, Creative Artists Agency

Laura Fredricks Founder & CEO, The Aak

Laurie Gallo

Robert Gasnetta CID, Perston

Greg Hare Partner: The MWS Group and 24 Entertainment U.S. Air Force Col. Marty Hauser, refired President, Otero

U.B. Army Col. Siloven G. Mahon, netred Executive Vice President, General Counsel & Corporate Secretary, SAIC

Bob McGowan Airgas (retired)

U.S. Air Porce Brig. Gen. Livela Mediar, retired President & CEO, LA: Midler & Associates, LLC

Frank Paras Divisional Director, The Horne Depot

U.S. Air Force Brig. Gen. John I. Pray, Jr., retired President & CEO. Operation Homefort

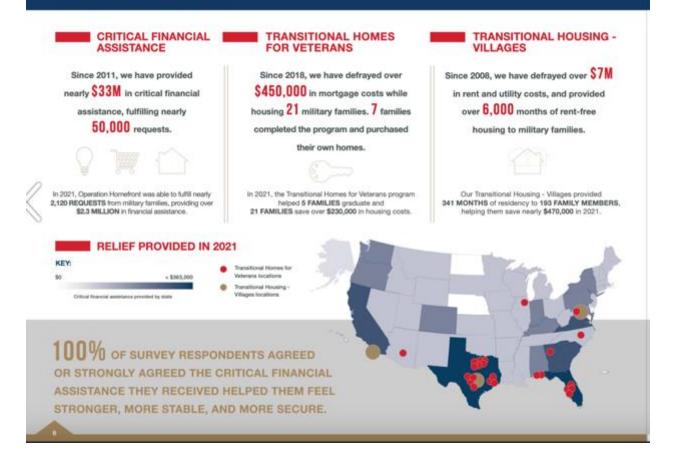
Kan Slater Principal, Twinord Partners, LLC

U.S. Army Command Spt. Maj. Arthony J. Williams, retired Manager, Business Development, ISAE Spateres (Contast Vehicles)

U.S. Air Force Col. Tyrone "Woody" Woodyant, retired Vice President, Connect-attactions, Rotary and Nesson Systems, Bitority, a Lookheed Martin Conneces

5.

# WE KNOW RELIEF



Air Force Staff Sgt. Christian Gerhart followed family tradition when he enlisted, and he was proud to serve our country. After six years of service in Italy, Niger, and the United States, Christian and his wife, China wanted to aettle in Florida with their family and finally pursue their college degrees. Owning a home was a dream neither of them considered a possibility.

When they saw our Transitional Homes for Veterans program, Christian and China spplied, scaroely hoping that they would be accepted and on a path to homeownership. The program allowed the couple to live rent-free in a home in Ruskin, Florida, for 2½ years so they could reduce their debt, enter college, settle their children in schools and activities, and work on tearning the skills of buying and maintaining a home. In just two years, the Gerharts achieved financial stability, improved their credit scores, and saved enough money for a down payment on a threebedroom, two-bath home nearby in Ruskin. Thanks to the A. James & Alice B. Clark Foundation's continuing commitment to the Transitional Homes for Veterans program, families like the Gerharts are realizing their dream of home ownership. The Garharts were one of five families to graduate from the THV program in 2021, beginning a year of celebration for their family. Christian and wife China welcomed their third child, be graduated from college ... and now they are going to be homeowners in their "Greever community."

Since 2018, Transitional Homes for Veterans has defrayed over \$450,000 in housing costs while housing 21 military families. Seven families have successfully completed the program and purchased their own homes.

After 2% years in the THV program, Christian and China Gerhart put a down payment on a home for their family.

"THANK YOU (TO OPERATION HOMEFRONT) FOR SUPPORTING US AND MAKING OUR TRANSITION TO CIVILIAN LIFE MUCH SMOOTHER AND MORE MANAGEABLE." -STAFF SQT. CHRISTIAN GERHART, U.S. AIR FORCE VETERAN





#### BY 2025, WE EXPECT TO:

FULFILL OVER 55,000 REQUESTS FOR FINANCIAL ASSISTANCE, PROVIDING NEARLY **\$40M** IN ASSISTANCE



HOUSE 100 FAMILIES IN OUR TRANSITIONAL HOMES FOR VETERANS PROGRAM

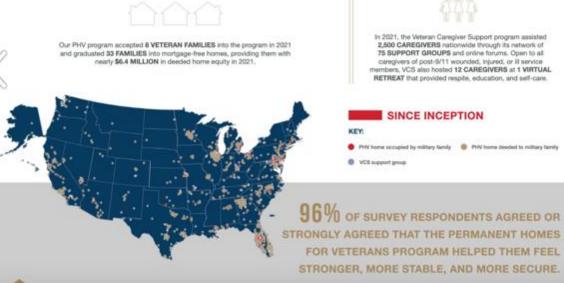


HOUSE 780 FAMILIES IN OUR TRANSITIONAL HOUSING -VILLAGES, DEFRAYING \$8.5M IN HOUSING COSTS

# WE KNOW RESILIENCY

#### PERMANENT HOMES FOR VETERANS

Since 2012, over 700 military families have been welcomed into the Permanent Homes for Veterans (PHV) program. Of those, nearly 650 military families have received mortgage-free deeds, a value of over \$96M in home equity.



VETERAN CAREGIVER SUPPORT

Since 2008, our Veteran Caregiver Support

program has assisted nearly 4,000 caregivers

through its network of support groups.

STRONGLY AGREED THAT THE PERMANENT HOMES FOR VETERANS PROGRAM HELPED THEM FEEL STRONGER, MORE STABLE, AND MORE SECURE.



#### BY 2025, WE EXPECT TO:



GRADUATE OUR 700<sup>™</sup> FAMILY, FROM OUR PERMANENT HOMES FOR VETERANS PROGRAM, PASSING OVER **\$100M** IN DEEDED HOME EQUITY

HOST OUR 700™ CAREGIVER AT A VCS RETREAT "THIS PROGRAM HAS GIVEN US STRUCTURE AND FINANCIAL SECURITY. IT WILL IMPACT OUR FAMILY FOR GENERATIONS TO COME."

-SGT. BRYAN EDWARDS, ARMY VETERAN

Hosting a dozen family members for Thanksgiving was the gravy on top of a year filed with biessings, say Army veteran Bryan Edwards and his wife, Annabel, who moved into their Permanent Homes for Veterans house in Laurel, Maryland, this fall. Walking into the newly built townhome, provided through the generasity of **PutteGroup**, Inc.<sup>15</sup> *Built to Honor* program, was sumed for the couple, who say the fully furnished home was tailord precisely to their taste.

Bryan, who began his military career in the National Guard before enlasting in the Army, was injured in a firefight in Aghanistan in 2016, He was shot while running to secure cover for his aquad. He received a Purple Heart and was medically retred. He lives with PTSD, traumatic brain injury, and other combat injuries.

Before being accepted in the Permanent Homes for Veterans program, Bryan and Annabel were living with her parents so they could save money to buy a home. Now, they are embracing the financial education that is a part of the program, and Bryan is enjoying a new job that allows him to speed more time in their new home. The job – with PubleGroup, Inc. – is also a result of the program. "It's all a goddend," he said. Bryan and Avabal Edwards are sizer to their dimarn of being borneowners since moving into the Permanent Homes for Veterans touse in Laurel, Maryland, in the fail.

The Laurel, Maryland, house is one of three of PulteGroup, Inc.'s Built to Honor homes awarded to Operation Homefront.

The Edwards family was one of eight veteran families accepted into the Permanent Homes for Veterans program in 2021, graduating 33 families into mortgagefree homes, receiving a combined \$6.4 million in deeded home equity.

Since 2012, nearly 650 families have received mortgagefree homes through Permanent Homes for Veterans, totaling more than \$96 million in home equity.

# WE KNOW RECURRING FAMILY SUPPORT

BACK-1 BRIGAD	IO-SCHOOL	HOLIDAY PROGRAMS	CELEBRATIONS
program began in 2 backpacks have t military children, s	MILITARY CHILDREN	Since 2010, we have served over 145,000 families – over 600,000 individual family members – through our Holiday Meals for Military (HMFM) and Holiday Toy Drive programs. In 2021, our Holiday Toy Drive for Military program served over 17,000 FAMILES – nearly 70,000 INDIVIDUAL FAMILY MEMBERS. Holiday Toy Drives distributed toy to over 1,000 MILITARY CHILDREN in 2021.	service. Virtual events treated spouses to guest
	RY CHILD YEAR®	STAR-SPANGLED BABIES	
Our 13 <sup>th</sup> annual Militi Awards honored eig exceptional leadershi engagemen	ht recipients for their p, volunteerism, civic	We have celebrated and supported over 19,000 new and expectant parents through the Star-Spangled Babies®	95% AND 93% OF SURVEY RESPONDENTS AGREED OR STRONGLY AGREED
Emma Remley	Nyah Gray	program since 2008.	THAT THE HMFM AND BTSB
ARMY: Caleb Pipes	COAST GUARD: Liam Cooper		PROGRAMS (RESPECTIVELY
MARINE CORPS:	NATIONAL GUARD: Elise Puliafico	In 2021, our Star-Spangled Bables <sup>®</sup> program showered 961 MILITARY PARENTS with support and essential	HELPED THEM FEEL STRONGER MORE STABLE, AND MORE SECURE

As a parent of three school-age children, Army veteran Orlando Andrews feit gratelui for the donated backpacies stuffed with school supplies. Volunteering at a Back-to-School Brigade (BTSB) event made him feel doubly blessed.

Orlando served serven years in the Army, working as a transportation specialist, During a 14-month deployment as part of Operation Iraqi Freedorn, he suffered head and back injuries when his unit was antbushed. He was medically retired and lives with symptoms relating to traumatic brain injury, PTSD, and neurological disorders. The injuries limit his ability to work as an IT technician.

He and his wife, Deborah, have five children and were excited to learn about Operation Homefront from a fellow veteran. Most recently, the family attended a BTSB drivethru event in Montgomery, Alabama.

"It's a big help to do a one-stop shop for school supplies. Usually, you go one place to get backpacks and others to get supplies," he said. In 2021, CSX renewed its commitment to Operation Hometront through its *Pride in Service* initiative, by announcing a two-year gift to our mission. Additionally, CSX partnered with Operation Hometron to distribute 1,400 backpacks and essential school supplies to military children in Jacksconville, Florida; Clarkaville, Tennessee; and Fayetteville, North Carolina, as a part of our annual Back-to-School Bingade.

"At CSX, serving those who serve is at the core of our mission and we are proud to help deliver school supplies to military children, easing at least one potential stress for their families," asid Bryan Tucker, vice president of corporate communications at CSX.

CEX employees pireod Operation Homefront staff and voluntees in Jackscover, Franka spotneric belong: Catensile, Tennesseu, and Feynteelle North Candina, to 18 backpadia with school supplies for military children as point of our Besch School Register program.



UNITED STAND BY 2025, WE EXPECT TO: PROVIDE OUR 550,000<sup>TH</sup> BACKPACK, SAVING MILITARY FAMILIES 569M SERVE OUR 190,000<sup>TH</sup> HOLIDAY MEAL, SAVING MILITARY FAMILIES S9M HONOR 9,300 MILITARY SPOUSES

> CELEBRATE 21,300 NEW AND EXPECTANT PARENTS

> > 11

# UNITED WE STAND

#### **OUR \$100 MILLION CAMPAIGN TO SECURE THEIR FUTURES**

#### OUR GOAL

United We Stand is our \$100 million comprehensive campaign to generate the resources that will allow us to secure the futures of our military families for years to come.

#### WE KNOW WHAT WORKS

Operation Homefront is one of the largest national charities dedicated to serving military families. We have a proven track record of helping them overcome their financial challenges. After two decades of innovation, rigorous evaluation, and thoughtful adaptation, our programs continue to meet the changing needs of our military families. Simply put, we know what works.



We know even temporary financial setbacks can shatter dreams and derail futures—and we are experienced at helping military families get back on a stronger, more stable, and more secure path. To do so, we offer a wide range highly valued relief, resiliency, and recurring family support programs to military families nationwide.

We also know that military families who are financially secure have a better chance of thriving in their communities after transitioning from service. Too often, recurring financial hardships prevent military families from gaining and/or maintaining the standard of living they – and their loved ones – so richly deserve. Our Critical Financial Assistance program, which couples immediate relief in the form of payment of overdue bils with caseworker support and financial counseing, provides the foundation military families can use to avert future financial crises and gain long-term financial health.

WE BELIEVE STRONG MILITARY FAMILIES CONTRIBUTE GREATLY TO BUILDING STRONG COMMUNITIES... AND THESE STRONG COMMUNITIES, IN TURN, BUILD A STRONGER AMERICA.

#### THE NEED CONTINUES

It is a national tragedy when a military family, who has worked treelessly to protect the freedoms we, as Americans, anjoy daily has to experience the demoralizing realization that a short-term financial hardship will turn into a long-term struggle that derail any hope of a brighter future. While many Americans struggle, military families often have additional burdens not faced by other segments of our society.

While Operation Homefront is able to help tens of thousands of military families each year, we miss opportunities to help more due to limited resources. Therefore, growing our financial resources is critical to our ability to deliver the support they so desperately need.

#### **OUR MISSION IS CRITICAL**

Increasing the financial self-sufficiency of families is critical to helping them becoming stronger, more stable, and more secure. Economic-related stressors are a welf-documented risk factor for family instability, family dysfunction, and child abuse and neglect. Financial distress can lead to destructive effects including increased family conflict and violence, low self-esteem, anger, depression, and abuse of alcohol and drugs.

One of Operation Homefront's major investors recently conducted a third-party assessment of our work and the impact of our mission. The study found that the work we do in helping military families become financially secure is directly related to ensuring stability and growth in other areas of the lives.



#### OUR CAMPAIGN IS BUILT UPON THREE PILLARS

UNITED: Where there is unity, there is strength. This is about Americans coming together, with the firm belief that our military families deserve, and have earned not only our utmost respect, but our active support. WE: Not every American can help in a meaningful financial way, but you are part of a special group that can make this

WE: Not every American can help in a meaningful financial way, but you are part of a special group that can make this happen. This is about you and more than 19 million veterans and active-duty service members and their families who have piedged to protect and defend our Constitution and the freedoms we enjoy daily. Their courage. Their honor. Their commitment. But we are all Americans, and we are all in this together.

STAND: This is an active stance and means we are ready to stand up for this very deserving group of our fellow Americans in their time of need, because they have served all of us in our nation's time of need.

PLANNING PHASE	ACTIVE PHASE	CLOSE
12/2020-2/2022	2022-2025	2025
Bin Of Sent - 41000	Mini-Parraman Presett - 2016	Decision Decision Company - 122



UNITED WE STAND

### \$75 MILLION

(OPERATING COMPONENT) \$23M in year 2022 \$25M in year 2023 \$27M in year 2024

+

#### \$25 MILLION

(CAPITAL COMPONENT) \$10M PROGRAM GROWTH FUND \$10M READY RESERVE FUND \$5M INNOVATION FUND

# \$100 Million

13

137

# STRENGTHENING THEM... THEIR COMMUNITIES... OUR

Ten years after arriving in the United States as a refugee from war-torn Liberia, Dandee Ajayi enlisted in the U.S. Navy. It was a way she could repay the nation that gave her a family." Dandee said. She planned to serve 20 years, but medical refirement cut short her career goal. Dandee faced the difficult transition to civilian life with her hubband, Olamide, and their two young children.

#### THEIR STORY

#### OUR IMPACT

Dandee enlisted in 2009 and served for 12 years before fibromysigia, PTSD, and chronic migraine headaches ended her career. During her military service, she worked as a damage controliman and was grateful for the supportive military community. "I had never had someone to care how I was diolog, and that motivated me to do better," she said.

When Dandee enlisted, she was living out of her car while attending college and working two jobs. Joining the military, she reasoned, would provide housing and allow her to show her gratitude to the United States for taking her in as a refugee.

While Dandee began the transition to civilian life, the Ajayi family lived at the Operation Homefront Transitional Housing - Village in San Diego. There, too, she found a supportive family that helped her integrate into her new community with confidence. Olarride earned certification as an airline mechanic and landed alob in Texas. While at the Village, the Ajays learned about the Transitional Homes for Veterans program and a house that would be available in Fort Worth, near Olarride's job.

Dandee, Clamide, their 6-year-old son, also named Olamide, and daughter Abigail, 2, moved into the new home in October. "Every night I wake up and walk around the house. I can't believe I'm living in this house," said Dandee. She is grateful to be living in the rent-free home so her family can save money toward the purchase of their own home. "There's no way this has happened because of luck," she said. "It's because of kindness and generosity. We don't take any kindness for granted or misuse it. We see it as an opportunity to better ourselves." Madison Dilon, manager of the Transitional Homes for Vetrans program, understands the many challenges facing military families transitioning to civilian IIIe. For many of them, having their own home and a sense of community feels unattainable.

In 2021, Madison facilitated the purchase of eight THV homes, bringing the number of houses in Operation Homefront's flagship housing program to 21. Among the houses was the newly built home the Ajayi family moved into, which Operation Homefront was able to purchase thanks to Pillsbury.

Dandee credita the program for helping her family along the path toward homeowneship. Not only will the Alayis be able to build savings and reduce debt while temporarily living rent-free, they also will receive financial education, training in home maintenance, and support services. "We will know how it feels to be a homeowner and what we will need and want for a home that, by the grace of God, we will purchase in Texas," she said. "It feels like a weight has been pulled off our shoulders."

#### UNITED WE STAND

Pillsbury has partnered with Operation Homefront since 2020, supporting military families through the Transitional Housing for Veterams and Critical Financial Assistance programs, and supporting residents of the Transitional Housing - Villages with product donations and community dimens.

In all, Pilisbury's investment has enabled Operation Homefront to purchase four THV homes; the Apyl tamity was one of three that moved into these homes in 2021. For the Apyls, Pilisbury is helping build stability so they can realize their dream of owning their own home. Dandee is especially grateful for the security for her children because she experienced homelessness as a child and as a young adult.

"Pilabury believes what matters most is made at home and every family deserves a space to share moments together. To put that belief into action, we are continuing our support of Operation Homefront in local communities," said Jenny Joeker, marketing communications assistant manager for Pilabury. "We are thrilled to have welcomed home the Aging family and can't wait to continue our efforts in the Dallas-Fort Worth area."

"PILLSBURY BELIEVES WHAT MATTERS MOST IS MADE AT HOME... EVERY FAMILY DESERVES A SPACE TO SHARE MOMENTS TOGETHER."

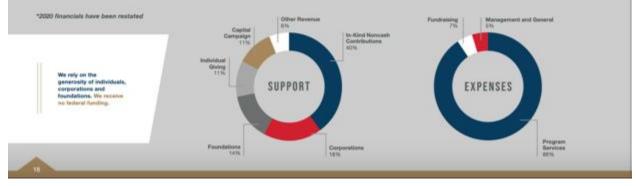
-JENNY JONKER, MARKETING COMMUNICATIONS ASSISTANT MANAGER, PILLSBURY

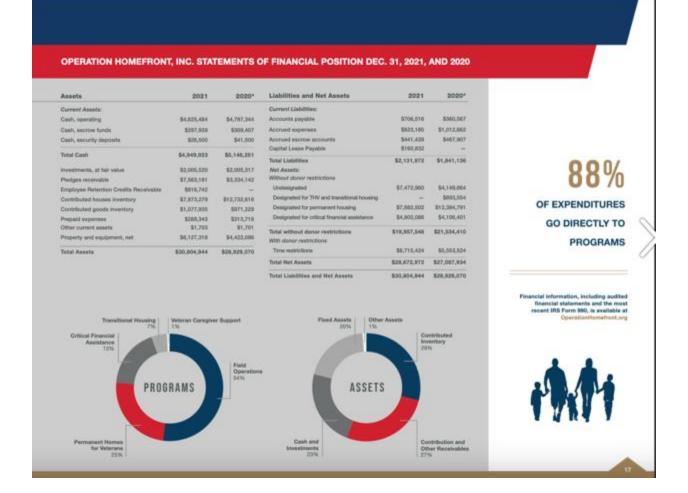


# **FINANCIAL REPORT 2021**

#### OPERATION HOMEFRONT, INC. STATEMENT OF ACTIVITIES FOR THE YEAR ENDED DEC. 31, 2021 [with summarized financial information for the year ended on Dec. 31, 2023]

	Without Donor Restriction	With Denor Restriction	2021 Tetals	2020 Totals'
Invenue, Support, and Other:				
Sontributed houses	\$1,627,141	-	\$1,827,141	\$4,137,297
Contributed goods, services, and facilities	\$16,924,420		\$10,024,428	\$25,691,465
Contributions	\$19,183,673	87.004,198	\$26,387,868	\$10,172,650
Ipecial events, net expenses of \$222,740	\$100,144		\$140,344	\$200,257
rveetnant earnings, nat	54,211	-	\$4,211	\$18,180
2Eher reverkuez	\$897,662	-	\$897,002	\$1,471,301
Istal Revenue, Bupport, and Other	838,797,478	\$7,204,195	\$46,001,674	\$40,692,18
Dependent:				
Yogram services	\$38,995,457	-	\$38,895,457	\$41,408,450
Anagement and general	\$2,071,210	-	\$0,071,210	\$1,690,12
undrassing .	\$3,543,969	-	\$3,348,998	\$2,663,18
fotal Expenses	\$44,416,830	-	\$44,410,630	\$45,701,76
Duange in net assets	\$(5,818,157)	\$7,296,196	\$1,585,038	(588,604
ket assets released from restriction	\$4,042,295	8(4,042,290)	-	
let assets at beginning of year	\$21,534,410	\$5,553,524	827,982,934	\$27,177,53
int Assets at End of Year	\$19,957,548	\$8,715,424	\$25,672,872	\$27,067,93





# **OUR COMMUNITY OF INVESTORS**

Since 2002, Operation Homefront has served America's military families in their time of need because they have served all of us in our nation's time of need. When military families need us most, we are able to meet their needs, thanks to our community of partners, donors, and volunteers.



For the third year, Bob's Discount Furniture selected Operation Homefront as a partnee for Café Calectoirs for a Cause, From October 1 to December 31, customers and employees were encouraged to donate online or in-store at cone of 150 Cate's across the country. All Café Collectors for a Cause donations collected were matched, dollar for dollar, up to \$75,000 by Bob's Discount Furniture and the Green Bay Packers teamed up with Operation Homefront to deliver new mattresses to military families in Wisconsin. Former Green Bay Packers Evan Smith and Jamét Bush were on hand to support the special deliveries and suprise military families. Since 2019, Bob's has donated over \$127,000, in cash and in-kind to Operation Homefront.



CarMax and Operation Homefront launched a new partnership in 2021 to support military and vetran families. An initial gift of \$100,000 was made in support of Operation Homefron's mission, and employees volunteered at Back-to-School Brigade events in California, Colorado, and Nevada. In November, CarMax thanked veterans through its "MaxGantinude" initiative, CarMax employees submitted over 5,600 lettes of appreciation. In honor of their employees insponse, CarMax gave an additional \$50,000, CarMax, gave an additional \$50,000, CarMax, gave an additional \$50,000, CarMax, gift new bicycles and heimets to local military children in Oregon. In 2018, Chobani launched its first charitable product. Hero Batch, and homefront. Since launch, the company has donated nearly \$2.5 million in cash and in-kind to Operation Homefront. In February 2021, as millions of Texans struggled because of a massive winter storm, Chobani dedicated \$100,000 toward Operation Homefront's efforts to help military families in the state through our critical Financial Assistance program. Chobani employees also volunteered at Holidary Masis for Military events and Back-to-School Brigade events across the country and served as judges for our prestigious Military Child of the Year<sup>#</sup> Awards. We are gratiful to Chobani for its steadfast commitment to "doing well by doing good."

CHOBANI



In the summer of 2021, the Driven Brands Charitable Foundation continued its tradition of hosting charitable goll bournaments with two of its brands, Maaco and Maineke, and raised over 755,000. This tournament, held vitually because of the ongoing pandemic, invited participants to play golf on their own and record scores on an app. Additionally, the Foundation raised nearly \$30,000 through its Proud to Sarve Those Who Serve campaign with Meineke, through which franchise owners made donations for each oil change they executed. Since the partnership began in 2018, the Driven Brands Charitable Foundation has donated over \$400,000 in support of Operation Homefront's Critical Financial Assistance program.



THANKS TO THE FOLLOWING INVESTORS FOR THEIR LEAD GIFTS IN THE UNITED WE STAND CAMPAIGN:

THE SLATER FAMILY

THE A. JAMES & ALICE B. CLARK FOUNDATION

#### CARMAX

CSX

THE KAHLERT FOUNDATION

OAK FOUNDATION

OPERATION HOMEFRONT BOARD OF DIRECTORS

PILLSBURY

PROCTER & GAMBLE

WALMART.COM



Meritage Homes has partnered ah. Operation Homefront since 2013. donating new, mortgage-free homes to our Permanent Homes for Veterans program. In 2021, Meritage Homes donated its 14th home, welcoming Navy veteran Garfield Johnson and his family to the Tampa, Florida, area. Garfield served 11 years as an aircraft structural mechanic in the Navy until a near fatal accident on the flight deck resulting in medical retirement ended his military caneer early. As the Johnson family drove up to their new house, Meritage employees lined the street waving flags and holding "Welcome Home" signs. This donated home will allow the Johnson family to be closer to family and provide them with the opportunity to establish themselves in their new community.



For more than 100 years, P&G and its brands have made military support a top priority. Since 2016, P&G, its military division, and its brands have generously invested cash and in-kind to support Operation Homefront. In 2021, P&G celebrated 308 new and expectant mome at Star-Spangled Babies showers in North Carolina, Georgia, Texas, Colorado, and Washington. During Military Appreciation Month in May, they also honored 200 military families from Hill Air Force Base, in Utah. This special drive-through event was a part of Operation Homefront's Holiday Meals for Military program and was made possible thanks to P&G, Kent's Market, and Associated Food Stores.



In October, Operation Homelhont was selected by Walmart as its charty of choice for its online round-up campaign. In October, customers who shopped on Walmart.comoculdiround-up theirpunchase to the nearest dollar to support Operation Homethont. In just four weeks, Walmart's campaign raised over \$815,000. In 2021, Operation Homefront and Hire Herces USA were awarded a nearly \$1 million grant from the Walmart Foundation to provide muchneeded career and financial assistance to wetname of color and these twing in rural communities. As part of the grant, both organizations developed DEI councils and internship programs to increase the diversity of leaders in the composit space. Walmart and the Walmart Foundation have proudly supported Operation Homefront's mission sizee 2006.

"IF THERE IS ANY GROUP OF PEOPLE THAT DESERVES OUR HELP, IT IS OUR SERVING MEMBERS OF THE MILITARY, THEIR FAMILIES, AND VETERANS. I AM NOT AWARE OF ANY ORGANIZATION IN THE UNITED STATES THAT DOES A BETTER JOB OF FULFILLING CONSTITUENTS' NEEDS THAN OPERATION HOMEFRONT."

-KEN SLATER, TREMONT LLC, SLATER FAMILY FOUNDATION

#### OUR COMMUNITY OF INVESTORS

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# **OUR COMMUNITY OF INVESTORS**

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Kyle Volker Arn L. Von Hoff Voys-Frontatream W.J. & Kathy Chamblin Family Foundation, Inc. Jeny Viagner Paul J. Wagner Michael Walacca Walmart Store #2002 Walmart Store #24 Walmart Store #24 Walmart Store #24 Walmart Store #2847 Walmart Store #2847 Walmart Store #2847 Bradford B. Watters Shih-Chen Wang Reino Wantin Jeffrey Watermolan Carylon J. Wattorn Michael Waatherty John Vieems John G. Weitsch Weils Fargo James R. Weedon John Weems John G. Weitsch Weits Fargo James Weemprikk Wemer Enterprises, Inc. Tath. A. Weedon John Wieems John G. Weitsch Weits Fargo James Weemprikk Wemer Enterprises, Inc. Tath. A. Weedon John Witem John Witems John H. Weitsch Wenner Fundation John Witems John H. Weitsch Weits Fargo James Mangenhaft Wender Unitsch Milliam Wider Johnt William Michele L. Wilson William Wider Johnt Wilson Wenter Fundation Langue Cavard G. Wong Robert Wood Soft Wood Paul M. Woods Johnt Wood Walliam Woodworth Johnt Weitey Milliam Woodworth Johnt Weitey Milliam Woodworth Johnt Weitey Milliam Woodworth Joyce Yamane Yawkey Basebal Loague, Inc. Eman Youdworth William Weiter Joyce Yamane Yawkey Basebal Loague, Inc. Eman Youdworth William William Z & Z Supply Co., Inc. Nicole Zamora Joe Zazzi Helena Zodrow Marion Zola Stephen Zukotynski



## Follow-Up To Do Guide

Dear Brig Gen John I. Pray Jr. at Operation Homefront,

This proposal is mostly completed and is ready to be sent to the funder for acceptance. I want to ask that you read over the entire proposal and sign or fill out anything that may be unclear or missing. The next step in the proposal is to send it off to Veterans United Foundation and wait for a response back from them detailing whether they have accepted Operation Homefront as their grant recipient.

The main concern I have before sending this document to the funder is the lack of a typed anti-discrimination statement that is adopted by the board of directors. There are many reasons why having an anti-discrimination statement would increase foot-traffic through your website. First, when people are looking for a new job or looking to supply money to this operation. They want to work with a non-profit that treats everyone fairly, regardless of race, gender, national origin, or other identifying characteristics. This policy helps your non-profit state clearly what its values. If you are lacking in this policy, there is reasoning for many candidates not to feel comfortable with applying for a job at Operation Homefront or giving money.

The Veterans United Foundation can be reached at <u>vuf@veteransunited.com</u> or through their website at <u>www.enhancelives.com</u>, which can be found by opening Google and typing the funder name into the search bar. If you have further questions or just want to get to know me, I can be reached by email at <u>chritz@uccs.edu</u> or by phone at 314-566-1505.

Sincerely, Cannon Hritz