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Department of the Treasury

Internal Revenue Service

## EXTENDED TO NOVEMBER 15, 2018

# **Return of Organization Exempt From Income Tax**

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

▶ Do not enter social security numbers on this form as it may be made public.

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

2017 Open to Public Inspection

OMB No 1545-0047

7	\ F	or th	e 2017 calendar year, or tax year beginning and	ending			
E	3 CI	neck if	C Name of organization		D Employer identific	cation number	
		Addre chang	e PURPLE HEART HOMES, INC.				
		Name chang	e Doing business as		26-3	516121	
		] In:tial ] return ] Final	Number and street (or P.O. box if mail is not delivered to street address) P.O. BOX 5535	Room/suite	E Telephone number 704-838-4044		
	L	return termir			G Gross receipts \$	2,452,962.	
	_	ated Amen	City or town, state or province, country, and ZIP or foreign postal code STATESVILLE, NC 28687		H(a) Is this a group re		
		Jreturn Application			for subordinates		
		pendi	19 104 GALAX DRIVE, STATESVILLE, NC 28677	$\sim 10^{-2}$	H(b) Are all subordinates in		
-	ΙT	ax-ex	empt status X 501(c)(3) 501(c) ( ) ◀ (Insert no.) 4947(a)(1) c	or 527	If "No," attach a	list (see instructions)	
_	J W	/ebsi	te: > WWW.PURPLEHEARTHOMESUSA.ORG	$\mathcal{M}$	H(c) Group exemption	n number 🕨	
			organization: X Corporation Trust Association Other	L Year	of formation: 2008 N	State of legal domicile: NC	
L	Pa	rt I	Summary	1			
		1	Briefly describe the organization's mission or most significant activities PURP1	LE HEA	RT HOMES, IN	IC. IS	
	Governance		DEDICATED TO PROVIDING HOUSING FOR SERVIC				
	ern		Check this box I if the organization discontinued its operations or dispos	sed of more	1 1	ets 8	
	8	3	Number of voting members of the governing body (Part VI, line 1a)	6	3 4	8	
0	8	4	Number of independent voting members of the governing body (Part VI, line 15) Total number of individuals employed in calendar year 2017 (Part V, line 24)	~\%]\	5	20	
5	Activities &	5 6	Total number of volunteers (estimate if necessary)	18	6	1200	
	ίζ	0 7 a	Total unrelated business revenue from Part VIII, column (C), line 12	1/9	7a	0.	
<u> </u>	۲	, u		/3/	7b	0.	
֖֖֖֖֖֡֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֓֡֡֡֓֓֓֡֡֡֓֓֡֡֡֡֡֓֡֡֡֡			Contributions and grants (Part VIII, line 1h)		Prior Year	Current Year	
ì		8	Contributions and grants (Part VIII, line 1h)		2,022,371.	2,348,121.	
)	enne	9	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		20,115.	12,935.	
_	§	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-250,487.	-177,228.	
()	<b>E</b>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	_	-9,220.	-5,324.	
2018		12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,782,779.	2,178,504.	
<u></u>		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	0.	0.	
		14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	695 749	
	Ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>	675,204.	685,748.	
	Expenses		Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  254,13	38	0.	120.	
	Š		Total fundraising expenses (Part IX, column (D), line 25)   254,13  Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<del>50.</del>  -	1,449,471.	1,706,800.	
			Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	-	2,124,675.	2,392,676.	
		19	Revenue less expenses Subtract line 18 from line 12	<del>-</del>	-341,896.	-214,172.	
-	e o			Ве	ginning of Current Year	End of Year	
	t Assets or d Balances	20	Total assets (Part X, line 16)		3,274,726.	3,449,609.	
	Ass	21	Total liabilities (Part X, line 26)		465,680.	833,647.	
	Net Est	22	Net assets or fund balances Subtract line 21/from line 20		2,809,046.	2,615,962.	
	Pa	rt II	Signature Block				
			alties of perjury, I declare that I have examined this return including accompanying schedules			knowledge and helief, it is	
<u>t</u>	rue,	corre	ct, and complete. Declaration of preparer (tiber than strice) is based on all information of wh	has any knowledge	1011 1010		
			Signature of officer		Date	13, 2018	
	Sıgr		'   <b>7</b>		Date		
ŀ	lere	•	JOHN D. GALLINA, EXECUTIVE DIRECTOR Type or print name and title				
-			Print/Type preparer's name Preparer's signature		Date Check	PTIN	
t	aid		BRIAN F. GANTT, CPA BRIAN F. GANTT,	ı	1/08/18 self employe	<b></b>	
		arer	Firm's name MARTIN STARNES & ASSOCIATES, CPA			56-1761202	
	•	Only	Firm's address PO BOX 5729				
	-	•	STATESVILLE, NC 28687		Phone no. 70	4-872-8923	
Ņ	Иaу	the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No	
-		1 11.2		ne		Form <b>990</b> (2017)	

	990 (2017) PURPLE HEART HOMES, INC.	26-3516121	Page 2
Par	t III Statement of Program Service Accomplishments	· · · · · · · · · · · · · · · · · · ·	
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission		
	PURPLE HEART HOMES, INC IS DEDICATED TO PROVIDING HOUSIN		
	CONNECTED DISABLED VETERANS THAT IS SUBSTANTIAL IN FUNCT		
	AND QUALITY FIT TO WELCOME HOME THE FIGHTING MEN AND WOM	EN OF AMERIC	<u>A.</u>
	Did the organization undertake any significant program services during the year which were not listed on the		₩
	prior Form 990 or 990-EZ?	L Yes	X No
	If "Yes," describe these new services on Schedule O		X No
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L Yes	A NO
	If "Yes," describe these changes on Schedule O		
	Describe the organization's program service accomplishments for each of its three largest program services, as		ad
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other revenue, if any, for each program service reported	s, the total expenses, at	iu
	(Code) (Expenses \$1, 546, 514. including grants of \$) (Reven	¢	
	FIRST ACCOMPLISHMENT:	ne a	,
	THE HOUSING NEEDS OF THE APPROVED VETERANS WHICH PURPLE	HEART HOMES.	
	INC. ASSISTS ARE OFTEN TIMES URGENT. PURPLE HEART HOMES,		ITY
	TO ADDRESS THESE NEEDS IN A TIMELY AND EFFECTIVE MANNER		
	ON THE FINANCIAL AND MATERIAL CONTRIBUTIONS OF INDIVIDUA		
	FOUNDATIONS, AND BUSINESSES. WHEN THE URGENT HOUSING NEE	DS OF THE	
	APPROVED VETERANS ARE MET, THE VETERANS' QUALITY OF LIFE	IMPROVES AS	
	THEY ARE ABLE TO LIVE IN A SAFE AND ACCESSIBLE HOME. IN	2017, PURPLE	
	HEART HOMES, INC. COMPLETED 85 PROJECTS THROUGH THE VETE	RANS AGING I	N
	PLACE (VAIP) PROGRAM.		
	<del></del>		
4b	(Code) (Expenses \$) (Reven	ue \$	)
			<del></del>
	<del></del>		
4c	(Code) (Expenses \$ including grants of \$) (Reven	ue \$	)
			<del></del>
		<del></del>	<del></del> -
	<del></del>		
	<del></del>	<del> </del>	
	<del></del>		
4d	Other program services (Describe in Schedule O )	<del></del>	
-	(Expenses \$ including grants of \$ ) (Revenue \$	1	
4e	Total program service expenses ► 1,546,514.		
			90 (2017)
732002	11-28-17 SEE SCHEDULE O FOR CONTINUATION (S	;)	

PURPLE HEART HOMES, INC.
Part IV Checklist of Required Schedules

	,		res	<u>NO</u>
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Ţ.	
	If "Yes," complete Schedule A	1	X	
2	is the organization required to complete Schedule B, Schedule of Contributors?	2	^	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	ا ہ		Х
	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	_		х
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5		х
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	-		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		х
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	_		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8		х
_	Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
9	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		х
	If "Yes," complete Schedule D, Part IV  Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
' '	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X_
С	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 167 If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
I2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	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	1/16		х
	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		
15		15		х
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	-13		<del></del>
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			T
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	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	Х	
19	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		_X_
		Corm	990	(2017)

Form 990 (2017)

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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

Note. All Form 990 filers are required to complete Schedule O

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Part V.	Statements Regarding Other IRS Filings and Tax Compliance
	Charles Schodule O contains a reasonne or note to any line in this Part V

	Check if Schedule O contains a response or note to any line in this Part v			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter ·O· if not applicable	_	• ~	ا ني
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		, ,	,
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	,		
	filed for the calendar year ending with or within the year covered by this return 20			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u>X</u>
	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		X
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		5a_		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u>X</u>
	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			Х
	any contributions that were not tax deductible as charitable contributions?	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		Į
_	were not tax deductible?	60		
7	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
a	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
·	to file Form 8282?	7c	'	Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
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		Ь
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		<u>                                     </u>	Ш
	sponsoring organization have excess business holdings at any time during the year?	8		L
9	Sponsoring organizations maintaining donor advised funds.		<u> </u>	ш
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	<u> </u>	<b>—</b>
· b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<del></del>
10	Section 501(c)(7) organizations. Enter			·
а	Initiation fees and capital contributions included on Part VIII, line 12	1		il
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		'
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders  11a	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	40-	<del>                                     </del>	ـــــا
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		Ш
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	134		
<b>L</b>	Enter the amount of reserves the organization is required to maintain by the states in which the	[	ĺ	
O	organization is licensed to issue qualified health plans			
^	Enter the amount of reserves on hand	1	١,	'
	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 in Schedule O	14b		
	1 TW. MANUELLE HE EASTERNISH THE CONTROL OF THE PARTY OF		agn	(2017)

PURPLE HEART HOMES, INC. Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions X

200	Check if Schedule O contains a response or note to any line in this Part VI		····			143
sec	tion A. Governing Body and Management				Vaa	No.
		ا مه ا	8		Yes	No ·
1a	Enter the number of voting members of the governing body at the end of the tax year	1a			,	. 1
	If there are material differences in voting rights among members of the governing body, or if the governing			'	٠,	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.	۱	8	-		-,1
b	Enter the number of voting members included in line 1a, above, who are independent	1b	L			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other			
	officer, director, trustee, or key employee?			2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the	direct	supervision			77
	of officers, directors, or trustees, or key employees to a management company or other person?			_3_		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 9		s filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assignificant diversion of the organization's assignificant diversion of the organization of the organizati	ets?		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 ap	point o	one or			
	more members of the governing body?			7a_		<u>X</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	lders, or			
	persons other than the governing body?			7b	ļ	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the	e following.	<u> </u>	- <u></u> -	
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	t the			
	organization's mailing address? If "Yes." provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ befor	e filing the form?	11a	Х	
b	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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	12b	Х	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," d	escribe			
	ın Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approva	l by in	dependent			1 .
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			** "		',
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	Х	
	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 arrangements	nent w	ith a	<u> </u>		Ш
	taxable entity during the year?			16a	L	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	e its p	articipation	ł		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization	ı's	<u> </u>		
	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 ▶NC					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Secti	on 501(c)(3)s only) a	vailable	Э	
	for public inspection. Indicate how you made these available. Check all that apply					
	Own website Another's website X Upon request Other (explain					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, cor	offict o	f interest policy, and	financ	ıal	
	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 boo	oks and	d records 🕨			
	MARK DILLARD - 704-838-4044					
	755 WASHINGTON AVE, STATESVILLE, NC 28677					

732006 11-28-17

# Part 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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter 0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization i	or any related	d organization compensate					sate	ted any current officer, director, or trustee					
(A)	(B)			(0				(D)	(E)	(F)			
Name and Title	Average	,,,		Pos		i than c	NDO.	Reportable	Reportable	Estimated			
	hours per	box	, unles	ss per	son i	s both	an	compensation	compensation	amount of			
	week	$\vdash$	cer an	d a d	recto	r/trust	ee)	from	from related	other			
	(list any	ector						the	organizations	compensation			
	hours for	븅	es.			ited		organization	(W-2/1099-MISC)	from the			
	related	stee	ruste		ω.	bens		(W-2/1099-MISC)		organization			
	organizations	af tru	onalı		ploye	E co				and related			
	below line)	Individual trustee or director	Institutional trustee	Officer	ey em	Highest compensated employee	rmer			organizations			
(1) DARRIN SIROIS	2.00	트	_=_	0	¥	Ξ <u>5</u>	Ξ.						
DIRECTOR		X						0.	0.	0.			
(2) CHARLES PAGE	2.00												
CHAIRMAN		$\mathbf{x}$						0.	0.	0.			
(3) RYAN REPP	2.00								-				
VICE CHAIRMAN		X						0.	0.	0.			
(4) SAMANTHA CHRISTOPHER	2.00												
SECRETARY & TREASURER		X						0.	0.	0.			
(5) VICTORIA SCHWEIZER	2.00												
DIRECTOR		Х						0.	0.	0.			
(6) LIZ PARADISE	2.00								_	_			
DIRECTOR	4	X	L					0.	0.	0.			
(7) KEITH HOTCHKISS	2.00		ŀ						_	_			
DIRECTOR	ļ	X			<u> </u>	<u> </u>		0.	0.	0.			
(8) SHERRY YASKIN	2.00	1						ł					
DIRECTOR		X						0.	0.	0.			
(9) JOHN D. GALLINA	40.00												
EXECUTIVE DIRECTOR	ļ		L.	X				70,402.	0.	0.			
(10) DALE I. BEATTY	40.00							<u> </u>					
STRATEGIC DEVELOPMENT OFFICER				Х				39,500.	0.	0.			
(11) MARK A. DILLARD	40.00												
CHIEF FINANCIAL OFFICER				X				52,125.	0.	0.			
(12) TIM PARKER	40.00	ļ											
CHIEF OPERATING OFFICER				Х				49,465.	0.	0.			
	ļ	_				_				<del></del>			
		-											
	<del> </del>	<u> </u>				$\vdash$				<del></del>			
							i						
	<del>                                     </del>	$\vdash$	Н			Н				<del></del>			
		L											

Par	VII Section A. Officers, Directors, Trus	tees, Key Emp	loy	ees,	and	Hig	ghes	t C	ompensated Employee	s (continued)				
	(A)	(B)					(D)	(E)			(F)			
	Name and title	Average	,,,		Pos				Reportable	Reportable		Es	timate	ed
		hours per	box	, unle	ss pe	rson ı	than o	an	compensation	compensatio	ın	an	nount	of
		week	-	cer an	d a d	recto	or/trus	tee)	from	from related	- 1		other	
		(list any	rector						the	organization	1		pensa	
		hours for related	ip 10	a			ated		organization	(W-2/1099-MIS	3C)		om the	
		organizations	ustee	trust		g;	bens		(W-2/1099-MISC)				anızatı d relatı	
		below	laal tr	tional		ploy	15 g	_					anızatı	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				0.9.		
			<del>  -</del>	-	Ť	×.	1 0			· · · · · · · · · · · · · · · · · · ·				
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						ĺ								
			1											
1b	Sub-total		•		•			<b>•</b>	211,492.		0.			0.
	Total from continuation sheets to Part VI	I. Section A						<b>•</b>	0.		0.			0.
d	Total (add lines 1b and 1c)	•						<b>•</b>	211,492.		0.			0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove	e) wh	o re	eceived more than \$100,	000 of reportable	 ∋			
	compensation from the organization													0
													Yes	No
3	Did the organization list any former officer,	director, or tru	ıste	e, ke	y er	nplo	yee,	or h	highest compensated er	nployee on				
	line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4	For any individual listed on line 1a, is the su	ım of reportabl	e co	mpe	ensa	tion	and	oth	ner compensation from t	ne organization				
	and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	Jf	or such individual			4		Х
5	Did any person listed on line 1a receive or a	accrue comper	sati	on fi	rom	any	unre	elate	ed organization or individ	lual for services				
	rendered to the organization? If "Yes " con	nolete Schedule	- <i>J f</i>	or si	ıch	pers	on		<del></del>			5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	mpensated inc	lepe	nde	nt co	ontra	acto	rs th	nat received more than \$	100,000 of comp	oensa <sup>1</sup>	tion fro	om	
	the organization Report compensation for	the calendar ye	ear e	endır	ng w	uth c	or wi	thın	the organization's tax y	ear				
	(A)								(B)			((		
	Name and business	address	N	INC	<u> </u>			_	Description of s	ervices		ompe	nsatio	<u>า</u>
											ı			
								_					<del></del>	
											ı			
	<u> </u>							-						
											ı			
								$\dashv$						
											ı			
							***	$\dashv$						
											ı			
2	Total number of independent contractors (i	ncludina hut n	ot hr	niter	d to	thos	se lie	ted	above) who received mo	ore than				
-	\$100,000 of compensation from the organi	_	111		0		0				i I			

		Check if Schedule O cont	ains a resnonse	or note to any line	in this Part VIII			
Γ	-,	Check if Genedate & cont	ans a response	or riote to drift inte	(A)	(B)	(C)	(D)
				•	Total revenue	Related or	Unrelated	Revenuè excluded from tax under
				•	ļ	exempt function revenue	business revenue	sections 512 - 514
Ц.,			<del></del>			revenue		512-514
돰뙴	1 a	Federated campaigns	1a					
iz a	b	Membership dues	<u>1b</u>					
S, E	С	Fundraising events	10	17,327.				
E E	d	Related organizations	1d					]
Bi,C	е	Government grants (contribut	ions) 1e			1		
ä		All other contributions, gifts, gran						
Ę į	-	similar amounts not included abo		2,330,794.				
흕ם	_			576,543.	•			
Contributions, Gifts, Grants and Other Similar Amounts.	_	Noncash contributions included in lines	1a-1f \$		./ 3,348,121.	<del></del>		<del> </del>
Ow	<u>n</u>	Total_Add_lines_fa-f(						<del> </del>
		DDWD - 24-57-55		Business Code		10.025		<del></del>
Se	2 a	RENTS RECEIVED		531110	12,935.	12,935.		<del> </del>
E S	b							<del> </del>
S a	C			ļ				<del></del>
ev.	d	l						<u> </u>
Program Service Revenue	е	·						<u> </u>
۵	f	All other program service reve	nue					
		Total Add boss On Of			√ 12,935.			
	3	Investment income (including						Ţ
1	-	other similar amounts)	,,	<b>•</b>	306.	306.		
	4	Income from investment of ta	v.evemnt hand r	voceade				†
			x-exempt bond p	noceeds				†
	5	Royalties	() DI	(v) Damanal				+
1	_		(i) Real	(II) Personal		İ		
	6 a							
l		Less rental expenses						
-	С	Rental income or (loss)		L				<del> </del>
	d	Net rental income or (loss)		<b>_</b> _				<del> </del>
	7 a	Gross amount from sales of	(ı) Securities	(II) Other				
		assets other than inventory		88,000.				
	b	Less cost or other basis	1					
		and sales expenses		265,534.				
	c	: Gain or (loss)		-177,534.				
		Net gain or (loss)		•	-177,534.	-177,534.		1
		Gross income from fundraisin	a events (not					
<u> </u>	0 4	including \$ \( \sqrt{17} \)		] !				]
ě		contributions reported on line	-	1				
Other Revenu		·	-	3,600.				
ě		Part IV, line 18	a	2 224				
\$		Less direct expenses	, <b>b</b>	<u> </u>	5 224			5 324
1		Net income or (loss) from fund	-	<b>&gt;</b>	-5,324.			-5,324.
	9 a	Gross income from gaming ac	ctivities See					
		Part IV, line 19	а					
1	b	Less direct expenses	b		••		· · –	
]	С	Net income or (loss) from gam	ning activities					
	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
	b	Less cost of goods sold	b		_			
		Net income or (loss) from sale	s of inventory	<b></b>				
- }		Miscellaneous Revenu		Business Code				
	11 a							<del>                                     </del>
								<del>                                     </del>
	b		<del></del>	<del>   </del>		<del>                                     </del>	<del></del> · · · ·	<del></del>
	C			<del>                                     </del>	<u> </u>			<del> </del>
{		All other revenue					<del></del> -	<del> </del>
	е	Total. Add lines 11a-11d		<b>P</b>	0.450.50	4.5.5.5	-	
	12	Total revenue See instructions.			2,178,504.	-164,293.	0.	5,324.

08461108 759029 00095

Porm 990 (2017) PURPLE HEART HOMES, INC.

Part IX Statement of Functional Expenses

Do	Check if Schedule O contains a respons	(A)	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII	Total expenses	expenses	general expenses	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				
3	Grants and other assistance to foreign		,		•
	organizations, foreign governments, and foreign				
	ındıvıduals See Part IV, lines 15 and 16			<del></del>	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	242 070	124 602	56 071	52 /16
	trustees, and key employees	243,979.	134,692.	56,871.	52,416
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	389,175.	266,398.	48,828.	73,949
7	Other salaries and wages	309,113.	200,330.	40,020.	13,343
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	<u>.</u>			<del></del>
9	Other employee benefits	52,594.	32,058.	9,803.	10,733
10	Payroll taxes Fees for services (non-employees)	32,334.	32,030.	3,003.	20,,33
11	Management				
a b	T	5,552.		5,552.	····
C	, · .	32,999.		32,999.	
d	· · · · · · · · · · · · · · · · ·	02,733.		52,555	
e	- D	128.			128
f	Investment management fees				
g					
9	column (A) amount, list line 11g expenses on Sch O.)	116,493.	52,520.	31,265.	32,708
12	Advertising and promotion	73,603.		71,822.	32,708 1,781
13	Office expenses	21,489.	742.	20,747.	
14	Information technology	12,606.		12,606.	
15	Royalties				
16	Occupancy				<u>-</u>
17	Travel	23,475.	16,724.	3,439.	3,312
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	34,847.	28,696.	996.	5,155
20	Interest	34,167.	3,360.	30,807.	
21	Payments to affiliates	217,150.	217,150.		
22	Depreciation, depletion, and amortization	291,151.	247,740.	43,411.	
23	Insurance	56,641.	29,166.	27,475.	
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)		اینه این هجیو		
	amount, list line 24e expenses on Schedule 0.)	102 577	490,012.	-6,435.	
a		483,577. 69,955.	430,014.	69,955.	
b		48,145.		03,300.	48,145
C		32,829.	10,603.	14,274.	7,952
d		152,121.	16,653.	117,609.	17,859
e or		2,392,676.	1,546,514.	592,024.	254,138
<u>25</u>	Total functional expenses Add lines 1 through 24e	4,334,010.	<u> </u>	334,024.	274,130
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)		· ····-		Form <b>990</b> (201

732010 11-28-17

Pai	tΧ	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
	,		(A) Beginning of year	_	(B) End of year
	1	Cash - non-interest-bearing	556,082.	1	465,778.
	2	Savings and temporary cash investments	17,030.	2	96,454.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			, "
		section 4058(f)(1)), persons described in section 4958(c)(3)(B), and contributing			•
Ø		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use	324,897.	8	516,767.
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other			
	''-	basis Complete Part VI of Schedule D 10a 755,048.			
	ь	Less accumulated depreciation 10b 42,424.	587,054.	10c	712,624.
,	11	Investments - publicly traded securities	81,049.	11	6,005.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets	607.	14	524.
	15	Other assets See Part IV, line 11	1,708,007.	15	1,651,457.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,274,726.	16	3,449,609.
	17	Accounts payable and accrued expenses	106,895.	17	171,924.
	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		21	
S	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons			
aþi		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	271,382.	24	588,467.
	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			50.056
		Schedule D	87,403.	25	73,256.
	26	Total liabilities. Add lines 17 through 25	465,680.	26	833,647.
		Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗓 and	•		• •
es		complete lines 27 through 29, and lines 33 and 34.	1 000 017		0 070 000
ğ	27	Unrestricted net assets	1,989,017.	27	2,273,092.
3al	28	Temporarily restricted net assets	820,029.	28	342,870.
힏	29	Permanently restricted net assets		29	
ᆵ		Organizations that do not follow SFAS 117 (ASC 958), check here			•
ò		and complete lines 30 through 34.		-	
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	2 900 046	32	2 615 060
~	33	Total net assets or fund balances	2,809,046. 3,274,726.	33	2,615,962.
	34	Total liabilities and net assets/fund balances	3,4/4,/40.	34	3,449,609. Form <b>990</b> (2017)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

732012 11-28-17

### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization

Employer identification number

		PURP	LE HEART HO	OMES, INC.				2	6-3516121				
Pa	rt I	Reason for Public C	harity Status (A	All organizations must co	mplete thi	s part ) Se	e instructions						
'nе	organi	zation is not a private founda	ation because it is (F	or lines 1 through 12, ch	neck only o	one box )							
1		A church, convention of chu					)(A)(ı).		NY				
2	一	A school described in secti							()				
3	$\sqcap$	A hospital or a cooperative					1).						
4	Ħ	A medical research organiza						(iiı). Enter	the hospital's name,				
•	_	city, and state		•				` '	•				
5	$\Box$	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
9	ш	section 170(b)(1)(A)(iv). (Complete Part II)											
_	$\Box$	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
6	$\mathbf{x}$												
′		section 170(b)(1)(A)(vi). (Co		itiai part of its support if	om a gove	i i i i i i i i i i i i i i i i i i i		c general p	Jubile described in				
_				4VAVui) (Complete Bart	. 11. \								
8	$\vdash$	A community trust describe				d in conii	notion with a	land-arant	college				
9		An agricultural research org											
		or university or a non-land-g	rant college or agricu	ulture (see instructions)	Enterther	iame, city,	, and state or	ine college	O				
40		An organization that normal	lly reconsect (4)	than 22 1/20/ of the access	ood from -	ontributio	ne mambarah	in feet an	d gross receipts from				
10		_	•										
		activities related to its exem											
		income and unrelated busin		(less section 5 i i tax) no	in busines	ses acquii	led by the org	anizationa	inter durie 30, 1973				
		See section 509(a)(2). (Cor An organization organized a	•	valu ta taat far public aaf	intu Son i	naatian EC	20(0)(4)						
11	=	An organization organized a	•	•	-			roy out the	nurnoses of one or				
12		more publicly supported or											
									Sheck the box in				
_		lines 12a through 12d that of Type I. A supporting orga	• •					_	avena				
а	· L	the supported organization											
					majority o	i tile dilec	iois or trustee	55 01 1116 51	apporting				
		organization You must o	•		ion with iti	cupporto	d organization	v(e) by bay	una				
b	, ட	Type II. A supporting org- control or management or	-				_						
		organization(s) You mus			anie persoi	is that coi	illoi oi manag	te trie subt	Jonea				
		Type III functionally inte	•		ın connect	ion with a	and functional	v integrate	d with				
C		its supported organization	-	· ·				y intograte	o with,				
d		Type III non-functionally		•	-	•	•	ted organiz	zation(s)				
٠		that is not functionally int	•					-					
		requirement (see instructi	•		•		•	un attoni					
е		Check this box if the orga	•	•	-			I Type III					
٠		functionally integrated, or					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	., . , po					
f	Ente	er the number of supported of		nany integrates supportin	.9 0.94								
		vide the following information		d organization(s)									
		i) Name of supported	(n) EIN	(III) Type of organization	(iv) Is the orga	nization listed	(v) Amount of	monetary	(vi) Amount of other				
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)				
							- "						
		· · · · · · · · · · · · · · · · · · ·											
		-											
								<u></u>					
Ota	al												

Schedule A (Form 990 or 990 EZ) 2017 PURPLE HEART HOMES, INC.

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Section A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
	Gifts, grants, contributions, and						_	
	membership fees received (Do not		Ì					
	include any "unusual grants ")	3088935.	2284000.	2279458.	2022371.	2348121.	12022885.	
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							
4	Total. Add lines 1 through 3	3088935.	2284000.	2279458.	2022371.	2348121.	12022885.	
	The portion of total contributions							
-	by each person (other than a					-		
	governmental unit or publicly							
	supported organization) included				;			
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)	*			_		3270984.	
6	Public support. Subtract line 5 from line 4	_ ,	;	-			8751901.	
	ction B. Total Support		·					
	ndar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
	Amounts from line 4	3088935.	2284000.	2279458.	2022371.		12022885.	
•	Gross income from interest,							
~	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	817.	12.	1,854.	102.	306.	3,091.	
9	Net income from unrelated business						• • •	
-	activities, whether or not the							
	business is regularly carried on	4,195.		27,384.			31,579.	
10	Other income Do not include gain			_ ; <u>, ,                                </u>				
10	or loss from the sale of capital							
	assets (Explain in Part VI)							
11	Total support. Add lines 7 through 10						12057555.	
	Gross receipts from related activities,					12		
	First five years. If the Form 990 is for			d, fourth, or fifth ta	x vear as a section			
	organization, check this box and stor	-		, realizing or mini to	,	- · \-/\ <del>-</del> /	▶□	
Se	ction C. Computation of Publi		centage	<del></del>			<u> </u>	
	Public support percentage for 2017 (li			olumn (f))		14	72.58 %	
	Public support percentage from 2016		•	``		15	72.98 %	
	33 1/3% support test - 2017. If the o			n line 13, and line	14 is 33 1/3% or m	<del></del>		
	stop here. The organization qualifies			,			<b>▶</b> X	
b	33 1/3% support test - 2016. If the c		-	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th		
	and stop here. The organization qual						▶□	
17=	10% -facts-and-circumstances test				13, 16a, or 16b. a	and line 14 is 10%	or more,	
	and if the organization meets the "fac						•	
	meets the "facts-and-circumstances"						•	
	10% -facts-and-circumstances test	-	•	• • •	-	7a, and line 15 is	10% or	
•	more, and if the organization meets th	_						
	organization meets the "facts-and-circ						▶□	
18	Private foundation. If the organization						·	
						edule A (Form 990		

Schedule A (Form 990 or 990-EZ) 2017

00095 1

732023 10-06-17

## Part IV | Supporting Organizations

Section A. All Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			·
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain	1		<b></b>
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 Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			L
	(b) and (c) below	3a		<u> </u>
b	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 Part VI 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 Part VI what controls the organization put in place to ensure such use			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI 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		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, 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 amendment to the organizing document)	5a_	<u> </u>	L
b	Type I or Type II only. Was any added or substituted supported organization part of a class already		<u> </u>	
	designated in the organization's organizing document?	5b		

- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 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.
- 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)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 79 If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ)
- 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 Part VI.
- **b** 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 **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Schedule A (Form 990 or 990-EZ) 2017

5c

6

7

8

9a

9b

9c

10a

10b

732025 10-06-17

Schedule A (Form 990 or 990-EZ) 2017

Schedule A	(Form 990 c	or 990-EZ)	2017

🔟 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

5

Income tax imposed in prior year

instructions)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Schedule A (Form 990 or 990-EZ) 2017

e Excess from 2017

Schedule A (Form 990 or 990-EZ) 2017 PURPLE HEART HOMES, INC. 26-	
Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, 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, Fine 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 Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional inform (See instructions)	1 B, line 1e, Part V,
·	
,	
	<del></del>
•	
•	<u> </u>
,	
<u> </u>	<u> </u>
	<u> </u>

## **SCHEDULE D**

(Form 990) ·

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

DINDIL TAKET HINDER

Employer identification number 26-3516121

D-	PURPLE HEART HUMES,	TINC.	20-3310121
Pa			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	vriting that the assets held in donor advise	d funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that grant funds can be u	ised only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose c	onferring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990, P	art IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of a histo	orically important land area
	Protection of natural habitat	Preservation of a certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form o	f a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
þ	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic stru	icture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a historic structur	e
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	ement is located	
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, i	handling of violations, and enforcing conse	ervation easements during the year
	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservati	on easements during the year
	<b>&gt;</b> \$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h	·····
_	and section 170(h)(4)(B)(ii)?		L Yes No
9	In Part XIII, describe how the organization reports conservation	·	
	include, if applicable, the text of the footnote to the organization	ion's financial statements that describes th	ne organization's accounting for
D	conservation easements  't III   Organizations Maintaining Collections of	Art Historical Transuras or Oth	or Cimilar Appata
Га			ier Sillillar Assets.
	Complete if the organization answered "Yes" on Form		
18	If the organization elected, as permitted under SFAS 116 (ASI	,,	,
	historical treasures, or other similar assets held for public exh		ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ		
p	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of publ	lic service, provide the following amounts
	relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical trea		gain, provide
	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items	
	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
			<b>&gt;</b> \$
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.	Schedule D (Form 990) 2017

Sche	dule D (Form 990) 2017 PURPLE I	HEART HOME:	s, INC	Ξ.			2	<u> 26 – 35</u>	16121	Page 2
Par					asures, or	Other S	Similar	Assets	(continu	ed)
3	Using the organization's acquisition, accession									
	(check all that apply).									
а	Public exhibition	c	<b>.</b> Lo	an or excl	hange progra	ms				
b	Scholarly research	6	· 🗌 o	ther						
c	Preservation for future generations									
4	Provide a description of the organization's co	llections and explai	n how they	further th	e organizatio	n's exemp	t purpos	e in Part 2	XIII	
5	During the year, did the organization solicit or									
_	to be sold to raise funds rather than to be ma								Yes	No
Par						Yes" on Fo	orm 990,	Part IV, I	ine 9, or	
	reported an amount on Form 990, Par									<del></del>
1a	Is the organization an agent, trustee, custodia	an or other intermed	liary for co	ntributions	s or other ass	ets not inc	luded			
	on Form 990, Part X?		•						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	llowing tab	ole						
_	3	•	•						Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
_	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990. Part X. line	21. for es	crow or cu	ustodial accou	unt liability			Yes	□ No
	If "Yes," explain the arrangement in Part XIII									
Par		_	-							
		(a) Current year	Т	or year	(c) Two year			ears back	(e) Four y	ears back
1a	Beginning of year balance	, , , , , , , , , , , , , , , , , , , ,								
b	Contributions									
	Net investment earnings, gains, and losses									
ر م	• •	-			<u> </u>					
d	Grants or scholarships	·	-							
е	Other expenditures for facilities									
	and programs									
T	Administrative expenses							-		
g	End of year balance				<u> </u>				<u> </u>	
2	Provide the estimated percentage of the curr	ent year end baland		column (a,	)) neid as					
а	Board designated or quasi-endowment	•	%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c show	•								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation that	are held ar	nd administer	ed for the	organiza	ition	Г.	
	by									Yes No
	(i) unrelated organizations								3a(i)	<del></del>
	(ii) related organizations								3a(iı)	
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requi	red on Sch	nedule R?					_3b	
4	Describe in Part XIII the intended uses of the		wment fur	nds						
Pai	t VI Land, Buildings, and Equipm									
	Complete if the organization answered							<del></del>		
	Description of property	(a) Cost or			t or other		cumulate		(d) Book	value
		basis (invest	ment)	basis	(other)	depr	eciation			
1a	Land			_			<del></del>			
b	Buildings			65	2,669.		<u>13,73</u>	35.	638	<u>,934.</u>
С	Leasehold improvements									
d	Equipment			10	2,379.		28,68	39.	73	,690 <b>.</b>
	Other									
	. Add lines 1a through 1e. (Column (d) must e	qual Form 990 Part	Y column	(R) line 1	Oc.)				712	,624.

Schedule D (Form 990) 2017

Complete if the organization answered "Yes" of a) Description of security or category (including name of security)	(b) Book value	(c) Method of val	luation Cost or end-	of-year market value
Financial derivatives				
Closely-held equity interests	<u> </u>			<u>-</u> .
Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
G)				
(H)				
al. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
art VIII Investments - Program Related.				
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11c See Form 990, P	art X, line 13	
(a) Description of investment	(b) Book value	(c) Method of va	luation Cost or end-	of-year market value
(1)				
(2)				
(3)				
(4)				
(5)		ı		
(6)				
(7)				
(8)				
(9)				
al (Col. (b) must equal Form 990, Part X, col (B) line 13.)			•	
art IX Other Assets.				
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d See Form 990, P	art X, line 15	
	Description	· · · · · · · · · · · · · · · · · · ·	<u> </u>	(b) Book value
(1) REAL ESTATE				1,032,29
(2) 2ND MORTGAGES, NET OF AMOR	TIZATION	•		610,39
(3) RECEIVABLE - CHAPTERS	<del> </del>			8,77
(4)				
(5)				
(6)		·		
(7)				
(8)				
(9)				
tal. (Column (b) must equal Form 990. Part X. col. (B) line	15)		<b>•</b>	1,651,45
art X Other Liabilities.	1,1,1	······································	<u></u>	
Complete if the organization answered "Yes" of	on Form 990. Part IV. line	11e or 11f See Form	990. Part X. line 25	
(a) Description of liability	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(b) Book value	<u>, , , , , , , , , , , , , , , , , , , </u>	
(1) Federal income taxes		,,		
(2) CREDIT CARD PAYABLE		55,479.		
(3) ESCROW TAXES PAYABLE		17,777.		
(4)				
(5)				
<u> </u>				
(6)				
(6)	l			
(7)				
(7) (8)				
(7)		73,256.		

732053 10-09-17

#### **SCHEDULE G**

Department of the Treasury

(Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Inspection

Internal Revenue Service **Employer identification number** Name of the organization 26-3516121 PURPLE HEART HOMES, INC. Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990-EZ filers are not Part I required to complete this part 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply Solicitation of non-government grants Mail solicitations Solicitation of government grants Internet and email solicitations h Special fundraising events Phone solicitations C In-person solicitations d l ·2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes \_\_ No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser have custody (v) Amount paid (vi) Amount paid (i) Name and address of individual (IV) Gross receipts to (or retained by) to (or retained by) (ii) Activity fundraiser from activity or entity (fundraiser) organization listed in col (i) contributions' Yes Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

732081 09-13-17

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2017

Schedule G (Form 990 or 990-EZ) 2017

b If "Yes," explain

732082 09-13-17

Sch	nedule G (Form 990 or 990 EZ) 2017 PURPLE HEART HOMES, INC.	<u> 26-3</u>	<u>516121</u>	Page 3
11			Yes	☐ No
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?		Yes	☐ No
13	Indicate the percentage of gaming activity conducted in			
	a The organization's facility	ļ	13a	<u>%</u>
	b An outside facility	ļ	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records	3		
•	Zina (ilo ilaino ano addicoso or tro person) into prepareo into eigeniativo de gamento gamento ano ano ano ano			
	Name			
	Address >			
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
ı	b If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount	unt		•
	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			
	Name			
	Gaming manager compensation > \$			
	Description of services provided		<del></del>	
	Λ			
	Director/officer Employee Independent contractor			
17	• • • • • • • • • • • • • • • • • • • •			
•	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		Yes	No
	retain the state gaming license?	tha	res	NO
	<ul> <li>Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in organization's own exempt activities during the tax year</li> </ul>	trie		•
Pá	art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and P.	art III, lin	es 9, 9b, 10	b, 15b,
	15c, 16, and 17b, as applicable Also provide any additional information. See instructions			
				•
_		-		<del></del>
_				
_				
•				

732083 09-13-17

Schedule 6	6 (Form 990 or 990-EZ)	PURPLE HEART	HOMES, INC.	26-3516121 Page 4
Part IV	(Form 990 or 990 EZ) Supplemental Infor	mation (continued)		
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## **SCHEDULE M** (Form 990)

# **Noncash Contributions**

OMB No 1545-0047

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

	PURPLE HEART	HOMES	, INC.			26-3	<u>516</u>	121	
Par									
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	ng r	(d) Method of de oncash contribu		-	s
1	Art - Works of art	·							
2	Art - Historical treasures		<b> </b>						
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles	X	1	6,350	.FAI	R MARKET	VA:	LUE	
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	X	1	5,480	FAI	R MARKET	<b>VA</b> :	LUE	
10	Securities - Closely held stock								
11	Securities · Partnership, LLC, or								
	trust interests								
12	Securities · Miscellaneous								
13	Qualified conservation contribution -		1		1				
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential	X	7	379,874	. FAI	R MARKET	_ <b>VA</b> :	LUE	
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other (MATERIALS)	X	1	183,694	L. COS	T			
26	Other								
27	Other • ()								
28	Other (								
29	Number of Forms 8283 received by the organia	zation during	the tax year for co	ontributions					
	for which the organization completed Form 82	83, Part IV, 1	Donee Acknowledg	gement 29					
								Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 thro	ough 28,	that it			
	must hold for at least three years from the date	e of the initia	al contribution, and	which isn't required to be	used fo	•			
	exempt purposes for the entire holding period'	7					30a		Х
b	b If "Yes," describe the arrangement in Part II								
Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?						31	X		
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell nonca	sh				
	contributions?						32a		X
b	If "Yes," describe in Part II								
33	If the organization didn't report an amount in c	olumn (c) for	r a type of property	for which column (a) is c	necked,				
	describe in Part II								

732141 09-07-17

LHA

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

Schedule M (Form 990) 2017

732142 09-07-17

Schedule M (Form 990) 2017

### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

2017
Open to Public Inspection

Name of the organization

PURPLE HEART HOMES, INC.

WELCOME HOME THE FIGHTING MEN AND WOMEN OF AMERICA.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

VETERANS THAT IS SUBSTANTIAL IN FUNCTION, DESIGN, AND QUALITY, FIT TO

Employer identification number 26-3516121

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

OPERATION VETERAN HOME RENOVATION (OVHR), A CAMPAIGN THAT WORKS IN

TANDEM WITH NATIONAL LEAGUE OF CITIES AND CREDIT UNIONS AROUND THE

COUNTRY, PROCEEDED WITH ITS SECOND YEAR IN 2017. THE PURPLE HEART

HOMES, INC. MISSION WAS ABLE TO REACH EVEN MORE VETERANS ACROSS THE

NATION WITH COORDINATED EFFORTS FROM COMMUNITY PARTNERS. THE OVHR

CAMPAIGN SPREAD AWARENESS AND SOLUTIONS TO VETERANS IN REGIONS THAT

WERE UNTOUCHED BY PURPLE HEART HOMES, INC. IN THE PAST. BY THE END OF

2017, THE OVHR CAMPAIGN COMPLETED 14 PROJECTS IN 8 STATES.

THE PURPLE HEART HOMES, INC. VETERANS HOMEOWNERSHIP PROGRAM (VHOP)

PLACED 3 FINANCIALLY QUALIFIED VETERANS IN 3 SEPARATE HOUSES. THE HOMES

SOLD THROUGH VHOP HAVE BEEN SOLD WITH OWNER OCCUPIED DEED RESTRICTIONS

TO ENFORCE THAT THE HOME IS OWNER OCCUPIED. A "SOFT" SECOND NON-PAYMENT

BEARING MORTGAGE IS PLACED ON THE HOMES. THE "SOFT" SECOND IS SET TO

DIMINISH IN EQUAL INCREMENTS OVER A 5-YEAR PERIOD, WHICH PRESERVES THE

MISSION OF THE PROGRAM BY PREVENTING WINDFALL SALE, REFINANCING, OR A

FORECLOSURE AS PURPLE HEART HOMES, INC. IS LISTED AS THE MORTGAGE

HOLDER OF RECORD. HOMEOWNERS THAT COMPLETE A 5-YEAR PERIOD OF MAKING

ALL FIRST MORTGAGE PAYMENTS IN AGREEMENT WITH THE LENDER AND MAINTAIN

OWNER OCCUPANCY HAVE THEIR "SOFT" SECOND MORTGAGE RELEASED AFTER 5

YEARS. THIS 5-YEAR PERIOD EXCEEDS THE "DURATION OF CONCERN" THAT THE

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2017)

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Page 2 Schedule O (Form 990 or 990-EZ) (2017) Employer identification number Name of the organization PURPLE HEART HOMES, INC. 26-3516121 AFFORDABLE HOUSING INDUSTRY HAS DETERMINED THE GREATEST RISK FOR NEW HOMEBUYERS. IN ORDER FOR VHOP TO WORK, PURPLE HEART HOMES, INC. RECEIVES HOMES AS A DONATION FROM MULTIPLE SOURCES. UPON RECEIPT, THESE GIFTS-IN-KIND WERE RECORDED AT THE HOME'S ESTIMATED FAIR MARKET VALUE AS A CONTRIBUTION AND AS AN ASSET. THE 2017 TOTAL FOR REAL ESTATE GIFTS-IN-KIND IS \$379,874, ESTIMATED AT FAIR VALUE AT THE TIME OF DONATION. THAT AMOUNT HAS BEEN INCLUDED IN THE AMOUNT REPORTED ON PART VIII, LINE 1F. UPON THE SALE OF A PROPERTY TO A VETERAN, THERE IS A FIRST MORTGAGE BY THE VETERAN FOR 50% OF THE VALUE. THE REMAINING 50% IS A "SOFT" SECOND MORTGAGE HELD BY PURPLE HEART HOMES, INC. AND IS AMORTIZED OVER A 60-MONTH PERIOD. VHOP SOLD 3 HOUSES TO INVESTORS IN 2017. SOME DONATED PROPERTIES ARE SOLD TO NON-VETERAN OWNER OCCUPANTS AND INVESTORS AFTER PURPLE HEART HOMES, INC. HAS HELD THEM FOR A MINIMUM PERIOD AND HAS NOT BEEN ABLE TO PLACE A VETERAN IN THESE PROPERTIES. THESE SALES ARE REFLECTED ON PART VIII, LINE 7A, AND RESULTED IN \$88,000. THE AMOUNT ON PART VIII, LINE 7C OF \$(177,534) IS BASED ON THE SALES PRICE MINUS THE AMOUNT RECORDED AT THE TIME OF DONATION (FAIR MARKET VALUE). SECOND ACCOMPLISHMENT: PURPLE HEART HOMES, INC. IS ALWAYS LOOKING TO ENGAGE STUDENTS AND VOLUNTEERS OF ALL AGES. IN 2017, PURPLE HEART HOMES, INC. HAD OPPORTUNITIES TO INCREASE GENERAL AWARENESS AND VOLUNTEER ACTIVITIES

VIA SOCIAL AND DIGITAL MEDIA, SPEAKING EVENTS, JROTC/ROTC PROGRAMS, EVENTS, AND CELEBRATIONS. PURPLE HEART HOMES, INC. REACHED

APPROXIMATELY 3.7 MILLION PEOPLE DIGITALLY THROUGH WEBSITE ACTIVITY AND

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PURPLE HEART HOMES, INC.

Employer identification number 26-3516121

SOCIAL MEDIA ACCOUNTS. A GIRL SCOUT AT LINCOLN CHARTER SCHOOL IN

LINCOLNTON, NORTH CAROLINA, ESTABLISHED AN ENDOWED SCHOLARSHIP OF

\$50,000 TO BENEFIT A CHILD OR GRANDCHILD OF A PURPLE HEART HOMES, INC.

VETERAN, AS PART OF HER GOLD AWARD PROJECT. THE IRIS FOUNDATION, WHICH

IS COMPRISED OF YOUNG PROFESSIONALS IN THE NASHVILLE, TN, AREA,

SELECTED PURPLE HEART HOMES, INC. AS THE BENEFITING CHARITY OF THE 2017

IRIS BALL BLACK TIE FUNDRAISER. \$64,000 WAS RAISED AT THE EVENT, WHICH

WAS DONATED TO PURPLE HEART HOMES, INC. TO HELP FUND 3 HOUSING

RENOVATIONS FOR VETERANS IN THE STATE OF TENNESSEE. BY THE END OF 2017,

APPROXIMATELY 1,200 VOLUNTEERS FROM CORPORATIONS, CHURCHES, SCHOOL

CLUBS, AND A VARIETY OF OTHER ORGANIZATIONS CONTRIBUTED APPROXIMATELY

9,000 VOLUNTEER HOURS.

#### THIRD ACCOMPLISHMENT:

AN OVERALL GROWTH IN DONATIONS, VOLUNTEERS, AND EVENTS WAS EXPERIENCED,

AND BY THE END OF 2017, PURPLE HEART HOMES, INC. HAD 10 OFFICIAL

CHAPTERS IN 8 STATES: NC (2), SC, NY (2), CO, GA, OH, TN, AND MI. ALL

OF THE PURPLE HEART HOMES, INC. CHAPTERS COMBINED COMPLETED 41 HOME

RENOVATION PROJECTS FOR DISABLED AND AGING VETERANS IN THEIR LOCAL

AREAS. ADDITIONALLY, THE CHAPTERS RAISED \$102,226.68 AND CREATED

OPPORTUNITIES FOR 358 VOLUNTEERS TO WORK APPROXIMATELY 4,100 HOURS ON

HOME RENOVATION PROJECTS AND FUNDRAISING EVENTS. THE VISION OF PURPLE

HEART HOMES, INC. CHAPTERS IS TO HAVE A CONSISTENT PURPLE HEART HOMES,

INC. PRESENCE IN REGIONS THROUGHOUT THE UNITED STATES. AS MORE PURPLE

HEART HOMES, INC. CHAPTERS ARE ESTABLISHED, THE REACH OF PURPLE HEART

HOMES, INC.'S ASSISTANCE IS EXTENDED TO EVEN MORE DISABLED AND AGING

VETERANS. THE TOTAL PURPLE HEART HOMES BRAND IMPACT IN 2017 RESULTED

Schedule O (Form 990 or 990-EZ) (2017)

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Name of the organization PURPLE HEART HOMES, INC.	Employer identification number 26-3516121
IN 143 HOMES RENOVATED OR SOLD TO VETERANS WITH 144 VETERA	NS IN THOSE
HOMES.	
FORM 990, PART VI, SECTION B, LINE 11B:	
EACH BOARD MEMBER IS PROVIDED A COPY OF THE COMPLETED FORM	990 AND AUDITED
FINANCIAL STATEMENTS TO REVIEW FOR ACCURACY AND RESOLUTION	S OF QUESTIONS
BEFORE FILING FORM 990.	
FORM 990, PART VI, SECTION B, LINE 12C:	
OFFICERS AND DIRECTORS HAVE BEEN PROVIDED TRAINING BY LEGA	L COUNSEL FOR
COMPLIANCE. OFFICERS AND DIRECTORS ARE REQUIRED TO COMPLET	E AND SUBMIT A
CONFLICT OF INTEREST DISCLOSURE STATEMENT ON AN ANNUAL BAS	IS.
FORM 990, PART VI, SECTION B, LINE 15:	
COMPENSATION PAID TO THE CEO, ALL OFFICERS AND KEY EMPLOYE	ES IS REVIEWED
AND APPROVED BY INDEPENDENT PERSONS IN RELIANCE ON APPROPR	IATE
COMPARABILITY DATA, AND THE ENTIRE PROCESS IS DOCUMENTED I	N MINUTES.
COMPENSATION PAID TO THE OFFICERS AND KEY EMPLOYEES IS REV	IEWED AND
APPROVED BY INDEPENDENT PERSONS IN RELIANCE ON APPROPRIATE	COMPARABILITY
DATA, AND THE ENTIRE PROCESS IS DOCUMENTED IN MINUTES.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTERE	ST POLICY, AND
FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
BOOK / TAX DEPRECIATION DIFFERENCE	20,561.