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75-2805544

**SCHEDULE A**  
**(Form 990 or 990-EZ)****Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0047

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Open to Public Inspection

Name of the organization

Employer identification number

COMPASSION HERITAGE FOUNDATION DBA. HOPE HERITAGE FOUNDATION

75-2805544

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I    b ☐ Type II    c ☐ Type III—Functionally integrated    d ☐ Type III—Non-functionally integrated
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2) or section 509(a)(3).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box \_\_\_\_\_
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? \_\_\_\_\_
- (ii) A family member of a person described in (i) above? \_\_\_\_\_
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? \_\_\_\_\_
- h Provide the following information about the supported organization(s).

|          | Yes | No |
|----------|-----|----|
| 11g(i)   |     |    |
| 11g(ii)  |     |    |
| 11g(iii) |     |    |

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | (iv) Is the organization in col. (i) listed in your governing document? |    | (v) Did you notify the organization in col. (i) of your support? |    | (vi) Is the organization in col. (i) organized in the U.S.? |    | (vii) Amount of monetary support |
|------------------------------------|----------|---------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|----|------------------------------------------------------------------|----|-------------------------------------------------------------|----|----------------------------------|
|                                    |          |                                                                                             | Yes                                                                     | No | Yes                                                              | No | Yes                                                         | No |                                  |
| (A)                                |          |                                                                                             |                                                                         |    |                                                                  |    |                                                             |    |                                  |
| (B)                                |          |                                                                                             |                                                                         |    |                                                                  |    |                                                             |    |                                  |
| (C)                                |          |                                                                                             |                                                                         |    |                                                                  |    |                                                             |    |                                  |
| (D)                                |          |                                                                                             |                                                                         |    |                                                                  |    |                                                             |    |                                  |
| (E)                                |          |                                                                                             |                                                                         |    |                                                                  |    |                                                             |    |                                  |
| <b>Total</b>                       |          |                                                                                             |                                                                         |    |                                                                  |    |                                                             |    |                                  |

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2012  
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Schedule A (Form 990 or 990-E) 2012

**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**

| Calendar year (or fiscal year beginning in) ►                                                                                                                                                                   | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .                                                                                                  | 158,744  | 374,298  | 924,493  | 558,163  | 382,596  | 1918,556  |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .                                                                                                     | 0        | 0        | 0        | 0        | 0        | 0         |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .                                                                                             | 0        | 0        | 0        | 0        | 0        | 0         |
| 4 <b>Total.</b> Add lines 1 through 3 . . . . .                                                                                                                                                                 | 158,744  | 374,298  | 924,493  | 558,163  | 382,596  | 1918,556  |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . . |          |          |          |          |          |           |
| 6 <b>Public support.</b> Subtract line 5 from line 4 . . . . .                                                                                                                                                  |          |          |          |          |          | 1918,556  |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ►                                                                                                                                                            | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| 7 Amounts from line 4 . . . . .                                                                                                                                                                          | 158,744  | 374,298  | 924,493  | 558,163  | 382,596  | 1918,556  |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .                                                               | 0        | 0        | 0        | 0        | 0        | 0         |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .                                                                                           | 0        | 0        | 0        | 0        | 0        | 0         |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .                                                                                             | 0        | 0        | 0        | 0        | 0        | 0         |
| 11 <b>Total support.</b> Add lines 7 through 10 . . . . .                                                                                                                                                |          |          |          |          |          | 1918,556  |
| 12 Gross receipts from related activities, etc. (see instructions) . . . . .                                                                                                                             |          |          |          |          |          | 12        |
| 13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . |          |          |          |          |          |           |

**Section C. Computation of Public Support Percentage**

|                                                                                                                                                                                                                                                                                                                                                                                                                      |    |                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--------------------------|
| 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) . . . . .                                                                                                                                                                                                                                                                                                                  | 14 |                          |
| 15 Public support percentage from 2011 Schedule A, Part II, line 14 . . . . .                                                                                                                                                                                                                                                                                                                                        | 15 | %                        |
| 16a <b>33 1/3% support test—2012.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .                                                                                                                                                                           |    | <input type="checkbox"/> |
| b <b>33 1/3% support test—2011.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .                                                                                                                                                                        |    | <input type="checkbox"/> |
| 17a <b>10%-facts-and-circumstances test—2012.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .    |    | <input type="checkbox"/> |
| b <b>10%-facts-and-circumstances test—2011.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . |    | <input type="checkbox"/> |
| 18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .                                                                                                                                                                                                                                                               |    | <input type="checkbox"/> |

Schedule A (Form 990 or 990-EZ) 2012

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2012

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

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

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) ▶                                                                                                                              | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (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 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                                                                             |          |          |          |          |          |           |
| 4 Tax revenues levied for the 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 the organization without charge                                                                  |          |          |          |          |          |           |
| 6 Total. Add lines 1 through 5                                                                                                                                             |          |          |          |          |          |           |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified 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           |          |          |          |          |          |           |
| c Add lines 7a and 7b                                                                                                                                                      |          |          |          |          |          |           |
| 8 Public support (Subtract line 7c from line 6.)                                                                                                                           |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ▶                                                                                                                                                               | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| 9 Amounts from line 6                                                                                                                                                                                       |          |          |          |          |          |           |
| 10a 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                                                                                                   |          |          |          |          |          |           |
| c Add lines 10a and 10b                                                                                                                                                                                     |          |          |          |          |          |           |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on                                                                              |          |          |          |          |          |           |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)                                                                                                          |          |          |          |          |          |           |
| 13 Total support. (Add lines 9, 10c, 11, and 12)                                                                                                                                                            |          |          |          |          |          |           |
| 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/> |          |          |          |          |          |           |

**Section C. Computation of Public Support Percentage**

|                                                                                           |    |  |
|-------------------------------------------------------------------------------------------|----|--|
| 15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) | 15 |  |
| 16 Public support percentage from 2011 Schedule A, Part III, line 15                      | 16 |  |

**Section D. Computation of Investment Income Percentage**

|                                                                                                                                                                                                                                                                                                |    |   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---|
| 17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))                                                                                                                                                                                                 | 17 | % |
| 18 Investment income percentage from 2011 Schedule A, Part III, line 17                                                                                                                                                                                                                        | 18 | % |
| 19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>         |    |   |
| b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/> |    |   |
| 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ <input type="checkbox"/>                                                                                                                                         |    |   |

Schedule A (Form 990 or 990-EZ) 2012

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2013

**Part IV**

**Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

THE REVENUES REPORTED INCLUDE THE MONETARY VALUES FOR SUPPLIES FURNISHED BY OUR EUROPEAN PARTNERS FOR

HUMANITARIAN WORKS IN AFRICA, HAITI, INDIA, GUATEMALA AND ROMANIA RESPECTIVELY. SOME OF THESE SUPPLIES INCLUDE

MEDICAL EQUIPMENTS, FOOD, CLOTHINGS, HYGIENE SUPPLIES AND WATER TREATMENT AND PIPES TO CONNECT WATER

SUPPLIES TO REMOTE AREAS. WE USUALLY REPORT THE MONETARY VALUE OF THESE ITEMS

0425874

Apr. 03, 2013 LTR 2694C

75-2805544 201012 67

000241

COMPASSION HERITAGE FOUNDATION  
HOPE HERITAGE FOUNDATION  
PO BOX 54242  
JACKSONVILLE FL 32245



## DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

  
\_\_\_\_\_  
Signature of officer or trustee4/29/13  
\_\_\_\_\_  
Date  
\_\_\_\_\_  
Title

75-2805544

**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.

OMB No. 1545-0047

2011

Open to Public  
Inspection

Name of the organization

COMPASSION HERITAGE FOUNDATION DBA. HOPE HERITAGE FOUNDATION

Employer identification number

75-2805544

**PART III**

**MISSION :** Responding to the needs of disaster and human catastrophe victims in North America and throughout the world by offering immediate assistance and providing sustainable solutions through empowerment projects that lead to human progress in education, nutrition, health, housing and relief programs.

**PART VI Line 11:** Copies of the completed 990 are first sent to the organization's governing Board Members for review and to constructively come up with any questions and concerns they may have from reading the document. Then a physical or video conference meeting is scheduled so that those questions and concerns are addressed to the satisfaction of each member and until an acceptable justification of each question or concern is reached by the members. Then a vote is scheduled to ensure that each item is approved by the majority. All unresolved matters are returned to the managers to provide additional information or to address the questions raised. After all matters on Form 990 is produced and circulated to governing body before it is filed with the Internal Revenue Service.

**PART VI LINE 19:** The governing documents, Conflict of Interest Policy, and the Financial Statements of Compassion Heritage Foundation are available to the public upon request and through our website. Any member of the public can make a request for these documents and will receive it free of charge either by electronic mail or by a posted mail.

**PART VII : COMPENSATION OF OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES, INDEPENDENT CONTRACTOR:**

Compassion Heritage Foundation is a 100% member volunteer organization. No salaries are paid to its officers, Directors, Trustees to contribute their services to the organization. We are powered by the strength of our professional volunteers worldwide. Except in special cases where we use overseas agents and employees to accomplish our mission. Generally, Compassion Heritage Foundation pursues a 100% volunteer Management system using retirees, freelancers and professional volunteers to reaching our missions domestically and Overseas.

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2010

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Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization

COMPASSION HERITAGE FOUNDATION DBA: HOPE HERITAGE FOUNDATION

Employer identification number

75-2805544

## OTHER CLARIFICATIONS:

PART VI LINE 12C: ALL OUR OFFICERS, TRUSTEES, DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO FILE A QUARTERLY

DISCLOSURE OF ALL THEIR INTERESTS THAT MAY CONFLICT WITH THEIR POSITIONS WITH THE ORGANIZATION'S CONFLICT OF  
INTEREST POLICY.

## LINE 17: EXPENSES FOR PROFESSIONAL FUNDRAISER SERVICES:

Compassion Heritage Foundation has an established policy of paying fees not to exceed 10% of the total funds raised by independent  
agents, consultants, and professional fundraisers on behalf of the organization. The 10% limit includes expenses for such fundraisers.