

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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.

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2023 calendar year, or tax year beginning 01-01-2023, and ending 12-31-2023

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: HIRE HEROES USA INC, % CRYSTAL PEREZ, Doing business as, Number and street (or P.O. box if mail is not delivered to street address): 13010 morris road ste 175, Room/suite, City or town, state or province, country, and ZIP or foreign postal code: ALPHARETTA, GA 30004

D Employer identification number: 43-1562688, E Telephone number: (844) 634-1520, G Gross receipts \$ 16,199,609

F Name and address of principal officer: ANDREW SANDOE CEO, 13010 morris road ste 175, ALPHARETTA, GA 30004

H(a) Is this a group return for subordinates? Yes No, H(b) Are all subordinates included? Yes No, H(c) Group exemption number

I Tax-exempt status: 501(c)(3), 501(c) () (insert no.), 4947(a)(1) or 527

J Website: WWW.HIREHEROESUSA.ORG

K Form of organization: Corporation, Trust, Association, Other

L Year of formation: 1990, M State of legal domicile: GA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: HIRE HEROES USA EMPOWERS U.S. MILIARY MEMBERS, VETERANS AND MILITARY SPOUSES TO SUCCEED IN THE CIVILIAN WORKFORCE.

Table with 2 columns: Description (3-7b) and Amount (12-0). Includes rows for voting members, independent members, employees, volunteers, and revenue.

Table with 3 columns: Description (8-12), Prior Year, Current Year. Includes rows for contributions, program service revenue, investment income, other revenue, and total revenue.

Table with 3 columns: Description (13-19), Prior Year, Current Year. Includes rows for grants paid, benefits, salaries, fundraising fees, other expenses, and total expenses.

Table with 3 columns: Description (20-22), Beginning of Current Year, End of Year. Includes rows for total assets, total liabilities, and net assets.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer ROSS DICKMAN CEO		Date 2024-11-15		
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date 2024-11-15	Check <input type="checkbox"/> if self-employed	PTIN P01372980
	Firm's name SMITH & HOWARD ADVISORY LLC			Firm's EIN	
	Firm's address 271 17TH STREET NW SUITE 1600 ATLANTA, GA 30363			Phone no. (404) 874-6244	

May the IRS discuss this return with the preparer shown above? See Instructions. Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form **990** (2023)

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
 HIRE HEROES USA EMPOWERS U.S. MILITARY MEMBERS, VETERANS AND MILITARY SPOUSES TO SUCCEED IN THE CIVILIAN WORKFORCE. AS A 501(C)(3) NONPROFIT ORGANIZATION, HIRE HEROES USA'S SERVICES ARE PROVIDED AT NO COST TO THE CLIENT.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
 If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
 If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 10,604,007 including grants of \$ 29,711) (Revenue \$)
 PARTNERED CAREER TRANSITION (PACT) IS OUR HALLMARK PROGRAM WHERE CLIENTS ARE PAIRED WITH TRANSITION SPECIALISTS TO CREATE PROFESSIONAL RESUMES AND LEARN EFFECTIVE JOB SEARCH TECHNIQUES. CLIENTS WHO REGISTER FOR OUR PACT PROGRAM ARE INDIVIDUALLY-PARTNERED WITH A TRANSITION SPECIALIST ON OUR TEAM WHO HELPS THEM UNDERSTAND TRANSFERABLE SKILLS AND COMMUNICATE THEIR VALUE TO EMPLOYERS. SCHEDULE O FOR FURTHER DETAILS.

4b (Code:) (Expenses \$ 943,375 including grants of \$) (Revenue \$ 550,681)
 CORPORATE PARTNERSHIPS: (formerly EPO - Employment Partnerships and Opportunities) TEAM ACCOMPLISHMENTS FOR THE YEAR: - OVER 339K JOBS POSTED ON THE JOB BOARD, 4,673 JOBSEEKER PROFILES, 271 EMPLOYER PROFILES - TALENT SOURCING RESULTED IN 1,023 INTERVIEW CONNECTIONS SEE SCHEDULE O FOR FURTHER DETAILS.

4c (Code:) (Expenses \$ 394,068 including grants of \$) (Revenue \$)
 SERVING SPOUSES PROGRAM SERVING SPOUSES IS HIRE HEROES USA'S CAREER ASSISTANCE PROGRAM FOR MILITARY SPOUSES. THE PROGRAM PROVIDES TAILORED PERSONALIZED IN-PERSON AND VIRTUAL CAREER SERVICES TO IDENTIFY AND SERVICE SOLUTIONS DEVELOPED TO OVERCOME THE UNIQUE EMPLOYMENT BARRIERS ENCOUNTERED AS A MILITARY SPOUSE. SEE SCHEDULE O FOR FURTHER DETAILS.

4d Other program services (Describe in Schedule O.)
 (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 11,941,450

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions.	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		No

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

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Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and</i>		

complete Schedule K. If "No," go to line 25a		24a		NO
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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 -0- if not applicable		
1b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
1a		23	
1b		0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes

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Part V **Statements Regarding Other IRS Filings and Tax Compliance (continued)**

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	173		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No	
b	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)?
- b If "Yes," enter the name of the foreign country: _____
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).
- 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?
- b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?
- c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?
- 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?
- b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
- 7 Organizations that may receive deductible contributions under section 170(c).**
 - a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?
 - b If "Yes," did the organization notify the donor of the value of the goods or services provided?
 - c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?
 - 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?
 - f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?
 - g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?
 - h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?
- 8 Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?
- 9 Sponsoring organizations maintaining donor advised funds.**
 - a Did the sponsoring organization make any taxable distributions under section 4966?
 - b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?
- 10 Section 501(c)(7) organizations.** Enter:
 - a Initiation fees and capital contributions included on Part VIII, line 12
 - b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities
- 11 Section 501(c)(12) organizations.** Enter:
 - a Gross income from members or shareholders
 - b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)
- 12a Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?
 - b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.
- 13 Section 501(c)(29) qualified nonprofit health insurance issuers.**
 - a 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.
 - b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans
 - c Enter the amount of reserves on hand
- 14a Did the organization receive any payments for indoor tanning services during the tax year?
- b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
- 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?
If "Yes," see the instructions and file Form 4720, Schedule N.
- 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?
If "Yes," complete Form 4720, Schedule O.
- 17 Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?
If "Yes," complete Form 6069.

4a		No
5a		No
5b		No
5c		
6a		No
6b		
7a	Yes	
7b	Yes	
7c		No
7d		
7e		No
7f		No
7g		
7h		
8		
9a		
9b		
10a		
10b		
11a		
11b		
12a		
12b		
13a		
13b		
13c		
14a		No
14b		
15		No
16		No
17		

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Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe on 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.; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done.; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.; 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.; 20 State the name, address, and telephone number of the person who possesses the organization's books and records: CRYSTAL PEREZ 13010 MORRIS ROAD SUITE 175 ALPHARETTA, GA 30004 (844) 634-1520

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 the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former			
(1) Andrew Sandoe Chief Executive Officer	40.0 0.0			X			407,176	0	19,667	
(2) Ross Dickman Chief Operating Officer	40.0 0.0			X			298,245	0	42,574	
(3) Nadine Bullock-Pottinga Chief Development Officer	40.0 0.0			X			250,360	0	10,072	
(4) Allison Herbst Director, Administration and Cu	40.0 0.0					X	144,601	0	40,956	
(5) Cheryl Ewell Director, Development	40.0 0.0					X	114,199	0	38,096	
(6) Johnathan Severs Director, Client Programs	40.0 0.0					X	118,640	0	33,303	
(7) Michele Wiesner Director, Capacity Building	40.0 0.0					X	124,263	0	24,086	
(8) Elizabeth Reyes Director, Corporate Partnershi	40.0 0.0					X	115,802	0	14,959	
(9) John Bardis Chairman	1.0 0.0	X					0	0	0	
(10) Brian Stann Vice Chairman	1.0 0.0	X					0	0	0	
(11) Jodie Clarke Board Member	1.0 0.0	X					0	0	0	
(12) Lauren Condoluci Board Member	1.0 0.0	X					0	0	0	
(13) Jeff Goldstern Board Member	1.0 0.0	X					0	0	0	

(14) Chuck Magill Board Member	1.0 0.0	X								0	0	0
(15) Carl Meyer Board Member	1.0 0.0	X								0	0	0
(16) Val Nicholas Board Member	1.0 0.0	X								0	0	0
(17) Joshua Weintraub Board Member	1.0 0.0	X								0	0	0

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former			
(18) Sheila Peluso Board Member	1.0 0.0	X						0	0	0
(19) Don Eberly Board Member	1.0 0.0	X						0	0	0
(20) Charles MacIntosh Board Member	1.0 0.0	X						0	0	0
(21) Rand Ballard Board Member	1.0 0.0	X						0	0	0

1b Sub-Total									
c Total from continuation sheets to Part VII, Section A									
d Total (add lines 1b and 1c)						1,573,286		0	223,713

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 3

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for		

services rendered to the organization? If "Yes," complete Schedule J for such person **5** No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
KELLER PARTNERS COMPANY, 3700 MASSACHUSETTS AVE NW STE L18 WASHINGTON, DC 20016	GRANT WRITING & educ	170,000
Media Cause Inc, 1436 U St NW Ste 400 WASHINGTON, DC 20009	Marketing	119,256
Pursuant, PO Box 120519 Dept 0519 DALLAS, TX 75312	Consultation	108,500

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **3**

Form **990** (2023)

Part VIII **Statement of Revenue**

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

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
1a Federated campaigns				
1b Contributions, Gifts, Grants, and Membership dues				
1c Other similar fundraising events	908,595			
1d Related organizations				
1e Government grants (contributions)	519,612			
1f All other contributions, gifts, grants, and similar amounts not included above	13,126,092			
1g Noncash contributions included in lines 1a - 1f:\$	178,018			
h Total. Add lines 1a-1f	14,554,299			

Program Service Revenue	2a	Business Code	(A)	(B)	(C)	(D)
	EPO					
			589,825	528,985	60,840	
f All other program service revenue.						
g Total. Add lines 2a-2f.			589,825			
3 Investment income (including dividends, interest, and other similar amounts)			287,717			287,717
4 Income from investment of tax-exempt bond proceeds			0			

5 Royalties			0			
6a Gross rents		(i) Real	(ii) Personal			
	6a					
	6b Less: rental expenses					
	6c Rental income or (loss)		0	0		
d Net rental income or (loss)			0			
7a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other			
	7a	60,841				
	7b Less: cost or other basis and sales expenses	18,805				
	7c Gain or (loss)	42,036				
d Net gain or (loss)			42,036			42,036
8a Gross income from fundraising events (not including \$ <u>908,595</u> of contributions reported on line 1c). See Part IV, line 18						
	8a		36,225			
	8b Less: direct expenses		313,244			
c Net income or (loss) from fundraising events			-277,019			-277,019
9a Gross income from gaming activities. See Part IV, line 19						
	9a		0			
b Less: direct expenses	9b		0			
c Net income or (loss) from gaming activities			0			
10a Gross sales of inventory, less returns and allowances						
	10a		3,860			
b Less: cost of goods sold	10b		1,494			
c Net income or (loss) from sales of inventory			2,366			2,366
11a KCC CLASS ACTION LAWSUIT INCOME	Business Code		645,146			645,146
b OTHER REVENUE			21,696	21,696		
c RevenueMiscAmt						
d All other revenue						
e Total. Add lines 11a-11d			666,842			
12 Total revenue. See instructions			15,866,066	550,681	60,840	700,246

Form 990 (2023)

Part IX **Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	29,711	29,711		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			

4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	1,042,966	813,513	125,156	104,297
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	9,501,147	7,410,894	1,140,138	950,115
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	216,616	168,960	25,994	21,662
9 Other employee benefits	1,414,412	1,103,242	169,729	141,441
10 Payroll taxes	800,049	624,038	96,006	80,005
11 Fees for services (non-employees):				
a Management	0			
b Legal	3,029		3,029	
c Accounting	30,925		30,925	
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	301,756			301,756
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	119,483	50,422	35,021	34,040
12 Advertising and promotion	60,075	51,293	4,243	4,539
13 Office expenses	401,636	332,443	31,668	37,525
14 Information technology	827,334	620,501	132,373	74,460
15 Royalties	0			
16 Occupancy	214,131	199,286	8,097	6,748
17 Travel	383,144	339,439	35,742	7,963
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	0			
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	0			
23 Insurance	13,774	11,401	1,086	1,287
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DEVELOPMENT	108,163	92,570	10,052	5,541
b PROFESSIONAL DEVELOPMENT	61,053	53,966	4,578	2,509
c OTHER PROGRAM EXPENSES	43,771	39,771		4,000
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	15,573,175	11,941,450	1,853,837	1,777,888
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X **Balance Sheet**

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

	(A) Beginning of year		(B) End of year
1 Cash-non-interest-bearing	6,542,076	1	4,986,801
2 Savings and temporary cash investments	0	2	0
3 Pledges and grants receivable, net	504,842	3	877,270

Assets	4	Accounts receivable, net	491,887	4	0	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0	
	7	Notes and loans receivable, net	0	7	0	
	8	Inventories for sale or use	3,324	8	19,409	
	9	Prepaid expenses and deferred charges	342,391	9	321,720	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	110,973			
	b	Less: accumulated depreciation	110,973	10c		
	11	Investments—publicly traded securities	10,168,464	11	11,129,957	
	12	Investments—other securities. See Part IV, line 11	0	12	0	
	13	Investments—program-related. See Part IV, line 11	0	13	0	
	14	Intangible assets	0	14	0	
	15	Other assets. See Part IV, line 11	704,079	15	797,224	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	18,757,063	16	18,132,381	
	Liabilities	17	Accounts payable and accrued expenses	1,656,024	17	1,186,852
		18	Grants payable	0	18	0
19		Deferred revenue	2,784,756	19	2,219,886	
20		Tax-exempt bond liabilities	0	20	0	
21		Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0	
22		Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	0	
23		Secured mortgages and notes payable to unrelated third parties	0	23	0	
24		Unsecured notes and loans payable to unrelated third parties	0	24	0	
25		Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	708,066	25	676,787	
26		Total liabilities. Add lines 17 through 25	5,148,846	26	4,083,525	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions	12,589,547	27	12,732,214	
	28	Net assets with donor restrictions	1,018,670	28	1,316,642	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds		29		
	30	Paid-in or capital surplus, or land, building or equipment fund		30		
	31	Retained earnings, endowment, accumulated income, or other funds		31		
	32	Total net assets or fund balances	13,608,217	32	14,048,856	
33	Total liabilities and net assets/fund balances	18,757,063	33	18,132,381		

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Part XI **Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	15,866,066
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,573,175
3	Revenue less expenses. Subtract line 2 from line 1	3	292,891
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	13,608,217
5	Net unrealized gains (losses) on investments	5	208,573
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-60,825
9	Other changes in net assets or fund balances (explain in Schedule O)	9	

10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) **10** 14,048,856

Part XII **Financial Statements and Reporting**

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

1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:

Separate basis Consolidated basis Both consolidated and separate basis

b Were the organization's financial statements audited by an independent accountant?
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

Separate basis Consolidated basis Both consolidated and separate basis

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Form 990 (2023)

Form 990 (2023)

Additional Data

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Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

SCHEDULE A (Form 990)

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

2023

Open to Public Inspection

Table with 2 columns: Name of the organization (HIRE HEROES USA INC) and Employer identification number (43-1562688)

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 12, 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).
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).
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).
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).
8 A community trust described in section 170(b)(1)(A)(vi).
9 An agricultural research organization described in 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture.
10 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...
11 An organization organized and operated exclusively to test for public safety.
12 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...
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 11285F Schedule A (Form 990) 2023

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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	7,970,301	8,931,790	12,859,659	12,151,798	14,554,299	56,467,847
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge.. . . .						0
4 Total. Add lines 1 through 3	7,970,301	8,931,790	12,859,659	12,151,798	14,554,299	56,467,847
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)						17,656,187
6 Public support. Subtract line 5 from line 4.						38,811,660

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4.	7,970,301	8,931,790	12,859,659	12,151,798	14,554,299	56,467,847
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	14,559	4,144	638	34,679	287,717	341,737
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	9,521	17,430	911	107,262	666,842	801,966
11 Total support. Add lines 7 through 10						57,611,550
12 Gross receipts from related activities, etc. (see instructions)					12	3,387,380
13 First 5 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

14 Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f))	14	67.368 %
15 Public support percentage for 2022 Schedule A, Part II, line 14	15	71.873 %
16a 33 1/3% support test—2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test—2022. 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 stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2023. 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 stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2022. 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 stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. 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) 2023

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 received 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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 on 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 VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 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 2023 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	

- 19a** **33 1/3% support tests-2023.** 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 ▶
- b** **33 1/3% support tests-2022.** 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 ▶
- 20** **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Schedule A (Form 990) 2023

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		

- c** 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 box 12a or 12b in Part I, answer lines 4b and 4c below.*
- 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.*
- c** 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.*
- 5a** Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c 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).*
- b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- 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) .*
- 8** Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- 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 on 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 on 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 line 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).*

3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Schedule A (Form 990) 2023

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to 11a, 11b, or 11c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
--	-----	----

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	1		
---	----------	--	--

Section D. All Type III Supporting Organizations

		Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2		
3 By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**):

a The organization satisfied the Activities Test. Complete **line 2** below.

b The organization is the parent of each of its supported organizations. Complete **line 3** below.

c The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test. **Answer lines 2a and 2b below.**

		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	2a		
b Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b		

3 Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in **Part VI***). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		

e Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):			
2 Acquisition indebtedness applicable to non-exempt use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)			

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year	
1 Amounts paid to supported organizations to accomplish exempt purposes	1		
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2		
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3		
4 Amounts paid to acquire exempt-use assets	4		
5 Qualified set-aside amounts (<i>prior IRS approval required - provide details in Part VI</i>)	5		
6 Other distributions (<i>describe in Part VI</i>). See instructions	6		
7 Total annual distributions. Add lines 1 through 6.	7		
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions	8		
9 Distributable amount for 2023 from Section C, line 6	9		
10 Line 8 amount divided by Line 9 amount	10		
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required-- <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023:			
a From 2018.			
b From 2019.			
c From 2020.			
d From 2021.			
e From 2022.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			

b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019.			
b Excess from 2020.			
c Excess from 2021.			
d Excess from 2022.			
e Excess from 2023.			

Schedule A (Form 990) (2023)

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
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Schedule A (Form 990) 2023

Additional Data

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Software ID:
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Schedule B

Schedule of Contributors

OMB No. 1545-0047

(Form 990) Department of the Treasury Internal Revenue Service

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

2023

Table with 2 columns: Name of the organization (HIRE HEROES USA INC) and Employer identification number (43-1562688)

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

- 501(c)() (enter number) organization
4947(a)(1) nonexempt charitable trust not treated as a private foundation
527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
4947(a)(1) nonexempt charitable trust treated as a private foundation
501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Cat. No. 30613X

Schedule B (Form 990) (2023)

Part I

Contributors

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED		\$ RESTRICTED	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Page 3

Name of organization HIRE HEROES USA INC	Employer identification number 43-1562688
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
------------------------	--	--	----------------------

-	_____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____	_____ \$	_____

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Page 4

Name of organization HIRE HEROES USA INC	Employer identification number 43-1562688
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	

Schedule B (Form 990) (2023)

Additional Data

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Software ID:
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Table with 2 columns: Name of the organization (HIRE HEROES USA INC) and Employer identification number (43-1562688)

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question number, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question number, description, and Yes/No options. Includes questions 1-9 regarding conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question number, description, and Yes/No options. Includes questions 1a-2b regarding collections of art and historical treasures.

Schedule D (Form 990) 2022

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange programs
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Table with columns: Amount, 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment
b Permanent endowment
c Term endowment 100.000 %
The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

Table with 2 columns: Yes, No. Rows: 3a(i) Unrelated organizations, 3a(ii) Related organizations, 3b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Table with 4 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2022

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	

DISCLAIMER: THE ORGANIZATION DOES NOT BELIEVE IT HAS ANY UNCERTAIN TAX POSITIONS AS OF DECEMBER 31, 2023. NOTE THE ORGANIZATION IS A NOT-FOR-PROFIT ORGANIZATION WHICH IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS REFLECTED IN THE ACCOMPANYING FINANCIAL STATEMENTS. IN THE NORMAL COURSE OF BUSINESS, THE ORGANIZATION IS SUBJECT TO EXAMINATION BY THE FEDERAL AND STATE TAXING AUTHORITIES. IN GENERAL, THE ORGANIZATION IS NO LONGER SUBJECT TO TAX EXAMINATIONS FOR TAX YEARS ENDING BEFORE DECEMBER 31, 2020.

SCHEDULE D, PART XI, LINE 2D	- 313,244 FUNDRAISING EVENT EXPENSES - 1,494 COGS FROM INVENTORY SALES ----- - 314,738 TOTAL
SCHEDULE D, PART XII, LINE 2D	- 313,244 FUNDRAISING EVENT EXPENSES - 1,494 COGS FROM INVENTORY SALES ----- - 314,738 TOTAL

Schedule D (Form 990) 2022

Additional Data

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SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047 2023 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization HIRE HEROES USA INC

Employer identification number 43-1562688

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations e Solicitation of non-government grants f Solicitation of government grants g Special fundraising events

2a Did the organization have a written or oral agreement with any individual... Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col. (i), (vi) Amount paid to (or retained by) organization. Includes rows for Dallas, TX and Washington, DC fundraisers.

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.

AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, MO, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, TX, UT, VA, WA, WV, WI

Schedule G (Form 990) 2023

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>NY Dinner</u> (event type)	<u>Gala</u> (event type)	<u>1</u> (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	753,660	174,836	16,325	944,821
	2 Less: Contributions	753,660	138,611	16,325	908,596
	3 Gross income (line 1 minus line 2)		36,225		36,225
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs		4,000	38,164	42,164
	7 Food and beverages	20,784	24,131	32,269	77,184
	8 Entertainment	43,768	29,325		73,093
	9 Other direct expenses	23,232	70,684	26,887	120,803
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				313,244
11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-277,019	

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col.(c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

Schedule G (Form 990) 2023

- 11 Does the organization conduct gaming activities with nonmembers? 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	13a	%
b	An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ -----

Address ▶ -----

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ -----

Address ▶ -----

16 Gaming manager information:

Name ▶ -----

Gaming manager compensation ▶ \$ -----

Description of services provided ▶ -----

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
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Additional Data

[Return to Form](#)

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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization HIRE HEROES USA INC

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

Employer identification number 43-1562688

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3 Enter total number of other organizations listed in the line 1 table.

Schedule I (Form 990) 2023

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

Table with 6 columns: (a) Type of grant or assistance, (b) Number of recipients, (c) Amount of cash grant, (d) Amount of noncash assistance, (e) Method of valuation (book, FMV, appraisal, other), (f) Description of noncash assistance. Row 1: CAREER FUND READINESS RECIPIENTS, 100, 29,711.

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Table with 2 columns: Return Reference, Explanation. Row 1: Schedule I, part III, The Career readiness fund is a designated fund aimed at helping clients overcome some of the following acute needs: -Being unable to pay for transportation to a job interview -Being unable to afford required work tools for training programs or apprenticeships -Being unable to buy the correct professional clothing for an interview or to start work -a lack of technical equipment needed to effectively search for employment or start a career -Being unable to afford the cost of testing for a needed certification -Childcare during the job search, or to be able to go to an interview or during a new hire or onboarding process -the need for temporary utility/shelter payment to prevent significant hardship Requests for funds are evaluated on a case by case basis to determine the appropriate amount of funds required to help the client overcome each individual barrier to employment or the amount of funds the program will contribute. Some needs (i.e., cost for professional clothing and technical equipment) are established rates based on the historical usage of the program. For approval of funds, the client must demonstrate, through a preponderance of the evidence, or to a reasonable degree, that the funds distributed will have a significant impact on the client's success in finding employment.

Additional Data

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Schedule J (Form 990)

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Table with 2 columns: Name of the organization (HIRE HEROES USA INC) and Employer identification number (43-1562688)

Part I Questions Regarding Compensation

Table with 3 columns: Question (1a-9), Yes, No. Contains questions about compensation reporting, travel, housing, and other benefits.

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50053T Schedule J (Form 990) 2023

Schedule J (Form 990) 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Table with 8 columns: (A) Name and Title, (B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC, (C) Retirement and other deferred compensation, (D) Nontaxable benefits, (E) Total of columns (B)(i)-(D), (F) Compensation in column (B) reported as deferred on prior Form 990. Lists 5 individuals including Andrew Sandoe, Ross Dickman, Nadine Bullock-Pottinga, Allison Herbst, and Johnathan Severs.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2023

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization HIRE HEROES USA INC

Employer identification number 43-1562688

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of contributions or items contributed, (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g, (d) Method of determining noncash contribution amounts. Rows include Art, Books, Cars, Securities, Real estate, etc.

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29

Table with 3 columns: Question (30a, 31, 32a, 33), Yes, No. Contains questions about contribution reporting and policies.

Schedule M (Form 990) (2023)

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
SCHEDULE M, PART I, COLUMN B	COLUMN B DETERMINED BY THE NUMBER OF CONTRIBUTIONS RECEIVED NOT THE NUMBER OF ITEMS RECEIVED.
SCHEDULE M, PART I, LINE 32B	ALL STOCK CONTRIBUTIONS ARE HELD UPON RECEIPT AND EVALUATED FOR SALE OR TRANSFER QUARTERLY.

Schedule M (Form 990) (2023)

Additional Data

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Software Version:

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SCHEDULE O
(Form 990)

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.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization
HIRE HEROES USA INC

Employer identification number

43-1562688

Return Reference	Explanation
FORM 990, PART III, LINE 2	<p>THE ORGANIZATION HAS LAUNCHED A NEW SUPPORTING PROGRAM TO THE PACT PROGRAM IN 2023. THE NEW SUPPORTING PROGRAM IS AS FOLLOWS: DIRECT PLACEMENT PROGRAM THE DIRECT PLACEMENT PROGRAM OFFERED BY HIRE HEROES USA PROVIDES EMPLOYERS THE OPPORTUNITY TO OUTSOURCE THEIR RECRUITMENT EFFORTS. THIS PROGRAM DELIVERS PERSONALIZED RECRUITMENT SERVICES TAILORED TO EACH COMPANY'S NEEDS, ENSURING A SEAMLESS END-TO-END PROCESS. OUR TEAM OF RECRUITERS COLLABORATIVELY SOURCE, SCREEN, AND DELIVER VETERAN AND MILITARY SPOUSE CANDIDATES. THE PROGRAM OPERATES ON A SUCCESS FEE BASIS, PROVIDING EMPLOYERS WITH A 60-DAY RETENTION GUARANTEE BEFORE ANY FEE ASSESSMENT. ALTHOUGH CATEGORIZED AS UNRELATED BUSINESS INCOME, ALL REVENUE GENERATED SUPPORTS HIRE HEROES USA'S PROGRAMS AND JOB SEEKERS. IN 2023, WE INTRODUCED OUR DIRECT PLACEMENT OFFERING, PARTNERING WITH 8 ORGANIZATIONS, RESULTING IN \$60k IN REVENUE.</p>
FORM 990, PART III, LINE 4A	<p>PACT CLIENTS WHO REGISTER FOR OUR PACT PROGRAM ARE INDIVIDUALLY-PARTNERED WITH A TRANSITION SPECIALIST ON OUR TEAM WHO HELPS THEM UNDERSTAND TRANSFERABLE SKILLS AND COMMUNICATE THEIR VALUE TO EMPLOYERS. FROM RESUME WRITING, COVER LETTERS, NETWORKING TO INTERVIEWING, OUR TRANSITION SPECIALISTS STICK WITH CLIENTS UNTIL THEY NO LONGER NEED OUR SERVICES. - PROVIDED INITIAL ASSESSMENTS AND CAREER COUNSELING TO 20,989 CLIENTS - REVISED 20,561 RESUMES - TRAINED 4,361 CLIENTS AT 68 VIRTUAL EVENTS - CONFIRMED 13,909 CLIENTS HIRED CAPACITY BUILDING THE VOLUNTEER PROGRAM'S MISSION IS TO SUCCESSFULLY INTEGRATE THE TIME AND TALENT OF EXTERNAL STAKEHOLDERS INTO HIRE HEROES USA PROGRAMS AND SERVICES, THEREBY ADVANCING AND ENHANCING THE ORGANIZATION'S MISSION. MOST VOLUNTEERS CONTRIBUTE BY PARTICIPATING IN ONE-ON-ONE MENTORING SESSIONS WITH A MILITARY VETERAN OR SPOUSE TO PRACTICE A JOB SEARCH SKILL, LIKE INTERVIEWING OR SALARY NEGOTIATION, OR TO HELP THE JOB-SEEKER BETTER UNDERSTAND A SPECIFIC INDUSTRY, ROLE, OR ORGANIZATION. THESE ONE-TIME DISCUSSIONS ARE HIGH-IMPACT AND ALLOW THE JOB-SEEKER TO GET THEIR QUESTIONS ANSWERED IN A SAFE, SUPPORTIVE ENVIRONMENT. IN 2023, THERE WERE 1,317 UNIQUE VOLUNTEERS WHO SERVED 6,921 HOURS ON BEHALF OF HIRE HEROES USA. THE PROGRAM COMPLETED 5,403 REQUESTS FOR VOLUNTEER SUPPORT WITH APPROXIMATELY 97% OF THOSE BEING DIRECT CONNECTIONS BETWEEN VOLUNTEERS AND JOB-SEEKING VETERANS AND SPOUSES TO ENHANCE CAREER SUCCESS. ALUMNI PROGRAM THE ALUMNI PROGRAM'S MISSION IS TO CONTINUE EMPOWERING PAST CLIENTS OF HIRE HEROES USA THROUGH CAREER DEVELOPMENT AND PROFESSIONAL GROWTH. THE PROGRAM OFFERS REGULAR COMMUNICATIONS, EVENTS, AND ACTIVITIES FOCUSED ON GENERAL CAREER GROWTH, DEVELOPING SKILLS, AND FINDING THE RIGHT ORGANIZATION AND ROLE FOR LONG-TERM SUCCESS. MILITARY VETERANS AND SPOUSES WHO HAVE PARTICIPATED IN HIRE HEROES PROGRAMS ARE ELIGIBLE TO CONTINUE RECEIVING SERVICES AT ANY TIME. THE ALUMNI PROGRAM HELPS MAINTAIN THIS SUPPORT, WHILE ALSO STRENGTHENING CONNECTIONS WITH OUR ALUMNI POPULATION. OUR ALUMNI ARE IMPORTANT AMBASSADORS OF OUR MISSION AND SERVICES. IN 2023, THERE WERE 13,585 ALUMNI ADDED TO THE ALUMNI PROGRAM FOR A YEAR-END TOTAL OF 37,064. OF THAT POPULATION, 1,187 ALUMNI RECEIVED 1,880 SERVICES AFTER SECURING THEIR INITIAL EMPLOYMENT. THE PROGRAM OFFERED QUARTERLY WEBINARS AND SMALL-GROUP MENTORING EVENTS, PLUS MONTHLY NEWSLETTERS WITH RELEVANT CAREER DEVELOPMENT RESOURCES. THE ALUMNI ADVISORY TEAM CONTINUED ITS REGULAR MEETINGS TO HELP INFORM PROGRAM ACTIVITIES AND OFFER INSIGHT ON WHAT NEEDS EXIST AFTER GAINING EMPLOYMENT. WE CONTINUED OFFERING CAREER EVALUATIONS FOR ALUMNI 9 MONTHS AFTER THEIR EMPLOYMENT DATE. AS A NEW OFFERING, WE LAUNCHED A 3-MONTH MENTORING SERVICE FOR RECENT ALUMNI TO ASSIST WITH THE TRANSITION PERIOD AFTER SECURING EMPLOYMENT. FEDERAL SECTOR PROGRAM THE FEDERAL SECTOR PROGRAM IS A UNIQUE PROGRAM THAT SUPPORTS CLIENTS INTERESTED IN PURSUING FEDERAL EMPLOYMENT. OFFERING SERVICES ALONGSIDE THE TRANSITION SPECIALIST, THE FEDERAL SECTOR PROGRAM PROVIDES COMPREHENSIVE FEDERAL RESUME REVIEWS, FEEDBACK, AND SUPPORT TO CLIENTS NAVIGATING THE FEDERAL HIRING PROCESS. THE PROGRAM FOCUSES ON VIRTUAL WEBINARS AND ONE-ON-ONE SUPPORT TO CLARIFY FEDERAL HIRING PRACTICES AND DEVELOP STRATEGIES TO ACHIEVE JOB SEEKERS' FEDERAL HIRING GOALS. IN 2023, OUR FEDERAL SECTOR PROGRAM COMPLETED FEDERAL RESUME REVIEWS FOR 3,073 JOB SEEKERS. THE PROGRAM INCREASED OUR MONTHLY CAPACITY, AVERAGING MORE THAN 288 COMPLETED REQUESTS PER MONTH. THE FEDERAL PROGRAM ALSO HOSTED 7 VIRTUAL WORKSHOPS TO SUPPORT FEDERAL JOB SEEKERS; MORE THAN 1300 ATTENDED THESE SESSIONS. THIS PROGRAM POSITIVELY IMPACTED 1,961 HIRED CLIENTS, INCLUDING 489 FEDERAL HIRES. VIRTUAL PROGRAMS THE HIRE HEROES USA VIRTUAL SERVICES PROGRAM DELIVERS LIVE AND ON-DEMAND WEB-BASED LEARNING OPPORTUNITIES AS A SUPPLEMENT TO THE RELATIONSHIP BETWEEN A JOB SEEKER AND THEIR ASSIGNED TRANSITION SPECIALIST. THE OFFERINGS ARE AIMED AT ADDRESSING BARRIERS TO EMPLOYMENT AND PROVIDING OPPORTUNITIES FOR JOB SEEKERS TO NETWORK WITH EMPLOYERS INTERESTED IN HIRING THEM. IN 2023 HIRE HEROES USA'S VIRTUAL ENGAGEMENTS PRODUCED, MANAGED, AND SUPPORTED 74 INSTRUCTOR-LED WEBINARS, VIRTUAL WORKSHOPS, AND SMALL GROUP NETWORKING SESSIONS REACHING 8,261 PARTICIPANTS. ADDITIONALLY, 7 VIRTUAL CAREER FAIRS WERE CONDUCTED WITH 3,436 JOB SEEKERS PARTICIPATING. THE VIRTUAL SERVICES PROGRAM SIMULTANEOUSLY MANAGED A ROBUST RESOURCE LIBRARY OF OVER 62 ON-DEMAND TRAINING VIDEOS TO ASSIST CLIENTS WITH NAVIGATING THE JOB SEARCH PROCESS ON THEIR PATH TO ATTAINING GAINFUL EMPLOYMENT WITH OVER 13,459 VIEWS. REFERRAL & TRAINING PARTNERS PROGRAM THE REFERRAL & TRAINING PARTNERS PROGRAM'S MISSION IS TO ENHANCE THE CLIENT EXPERIENCE THROUGH RELATIONSHIPS WITH EXTERNAL ORGANIZATIONS THAT HAVE TRAINING OPPORTUNITIES OR ADDITIONAL RESOURCES FOR CLIENTS. MANY JOB-SEEKERS ENCOUNTER BARRIERS TO CAREER SUCCESS AND NEED TO BE CONNECTED TO PROVIDERS THAT CAN ADDRESS THESE BARRIERS. MOST JOB-SEEKERS REQUEST</p>

	<p>CONNECTIONS TO TRAINING PARTNERS FOR ADDITIONAL SKILLS BUILDING AND CREDENTIALING. OTHER JOB-SEEKERS NEED BROADER ASSISTANCE THAT STILL IMPACTS THEIR EMPLOYABILITY AND CAREER READINESS, LIKE TRANSPORTATION AND SAFE HOUSING. THIS PROGRAM ALSO OFFERS IN-HOUSE RESOURCE PROVISION TO HELP ADDRESS ACUTE FINANCIAL HARDSHIPS THAT DIRECTLY AFFECT THE CLIENT'S ABILITY TO SECURE OR KEEP A JOB. IN 2023, THE REFERRAL & TRAINING PARTNERS PROGRAM GREW OUR NETWORK OF AVAILABLE PARTNERS TO 155. THE PROGRAM ALSO COMPLETED 4,133 REQUESTS FOR CONNECTIONS TO OUR PARTNERS, PLUS ANOTHER 177 REQUESTS FOR IN-HOUSE RESOURCE CONNECTION. APPROXIMATELY 84% OF THE REFERRALS MADE TO EXTERNAL PARTNERS WERE FOR TRAINING NEEDS. JUNIOR ENLISTED PROGRAM THE JUNIOR ENLISTED PROGRAM IS A CAREER COACHING PROGRAM TAILORED SPECIFICALLY TO JUNIOR ENLISTED SERVICE MEMBERS AND VETERANS. THE PROGRAM IDENTIFIES UNIQUE TRANSITION AND EMPLOYMENT BARRIERS TO PROVIDE FOCUSED SOLUTIONS AND EMPLOYMENT OPTIONS TO EMPOWER JUNIOR ENLISTED (RANKS E1 THROUGH E4) ACTIVE DUTY, TRANSITIONING, AND RECENTLY TRANSITIONED SERVICE MEMBERS FROM ALL BRANCHES OF MILITARY SERVICE IN THEIR CAREER SEARCH. IN 2023, OUR JUNIOR ENLISTED PROGRAM HELPED 5,088 JUNIOR ENLISTED MILITARY MEMBERS AND CONFIRMED 2,990 HIRED JUNIOR ENLISTED VETERANS. 935 JUNIOR ENLISTED VETERANS AND SERVICE MEMBERS WERE MENTORED IN 2023. JUNIOR ENLISTED SERVICE MEMBERS AND VETERANS MADE UP 24.73% OF OUR REGISTRANTS IN 2023. JUNIOR ENLISTED SERVICE MEMBERS AND VETERANS THAT GO THROUGH THE HIRE HEROES USA JUNIOR ENLISTED PROGRAM ARE HIRED WITH AN AVERAGE STARTING SALARY OF \$56,037. IN 2023, HIRE HEROES USA HOSTED 11 VIRTUAL EVENTS FOCUSED ON JUNIOR ENLISTED SERVICE MEMBERS AND VETERANS. 655 JUNIOR ENLISTED SERVICE MEMBERS AND VETERANS ATTENDED OUR EVENTS IN 2023. ADDITIONALLY, THE JUNIOR ENLISTED PROGRAM HAS INCREASED PARTICIPANT ENGAGEMENTS THROUGH LINKEDIN COMMUNITY GROUPS WITH OVER 3,500 MEMBERS. WOMENS VETERANS PROGRAM THE WOMEN VETERANS PROGRAM WAS ESTABLISHED TO EMPOWER TRANSITIONING WOMEN SERVICE MEMBERS AND WOMEN VETERANS, ENABLING THEM TO OVERCOME UNIQUE CHALLENGES AND ATTAIN MEANINGFUL EMPLOYMENT. THE PROGRAM ENVISIONS ESTABLISHING A NATIONAL PRESENCE AND BECOMING THE PRIMARY RESOURCE FOR CAREER COACHING TAILORED SPECIFICALLY TO WOMEN VETERANS. IT IS DESIGNED TO BE UNDERSTANDING, INFORMATIVE, AND SENSITIVE IN ADDRESSING AND OVERCOMING INDIVIDUAL BARRIERS. IN 2023, HIRE HEROES USA HELPED 4,316 WOMEN SERVICE MEMBERS AND VETERANS, RESULTING IN 2,478 TOTAL HIRES. THE MAJORITY OF THOSE CLIENTS HIRED HAD EITHER A HIGH SCHOOL DIPLOMA OR A 4-YEAR DEGREE. THE AVERAGE SALARY OF CLIENTS THAT FOUND FULL-TIME EMPLOYMENT IN 2023 WAS \$64,755. THERE WAS ROUGHLY A 20% INCREASE INCLUDING VOLUNTEER, FEDERAL, AND REFERRAL/TRAINING SUPPORT. IN 2023, HIRE HEROES USA REACHED AN ALL-TIME MILESTONE OF ASSISTING OVER 14,000 WOMEN VETERANS WITH EMPLOYMENT SUPPORT RESOURCES. ADDITIONALLY, THE WOMEN VETERAN PROGRAM LAUNCHED A LINKEDIN GROUP ON JUNE 1, 2023 THAT HAS GROWN TO OVER 1,000 MEMBERS. HOMELESS VETERANS REINTEGRATION PROGRAM (HVRP) THE HOMELESS VETERANS REINTEGRATION PROGRAM (HVRP) IS AN EMPLOYMENT-FOCUSED COMPETITIVE GRANT PROGRAM OF THE DEPARTMENT OF LABOR, VETERANS' EMPLOYMENT, AND TRAINING SERVICE. IT IS THE ONLY FEDERAL GRANT TO FOCUS EXCLUSIVELY ON COMPETITIVE EMPLOYMENT FOR HOMELESS VETERANS. THE HVRP TEAM ASSISTS CLIENTS WHO ARE HOMELESS, ON THE VERGE OF HOMELESSNESS, IN TRANSITIONAL HOUSING OR EXPERIENCING EPISODIC HOMELESSNESS. THE TEAM CONDUCTS AN INITIAL ASSESSMENT AND PROVIDES RESUME SERVICES, JOB SOURCING, CAREER COACHING, AND ANY OTHER SERVICE HHUSA PROVIDES THAT WILL LEAD TO CLIENT EMPLOYMENT. IN 2023, THE HOMELESS VETERAN REINTEGRATION PROGRAM WITNESSED A NOTABLE SURGE, WITH 82 NEW PARTICIPANTS JOINING-A 203% INCREASE COMPARED TO THE PREVIOUS YEAR. IN ITS INAUGURAL FULL YEAR, THE PROGRAM SUCCESSFULLY FACILITATED THE TRANSITION OF 59 HOMELESS VETERANS INTO FULL-TIME EMPLOYMENT. NOTABLY, 81% OF THE</p>
<p>FORM 990, PART III, LINE 4B</p>	<p>CORPORATE PARTNERSHIPS THE CORPORATE PARTNERSHIPS DEPARTMENT IS DEDICATED TO FOSTERING COMPREHENSIVE RELATIONSHIPS WITH CORPORATIONS, EMPHASIZING BRAND AMPLIFICATION, EMPLOYEE ENGAGEMENT, AND INITIATIVES FOR HIRING VETERANS AND MILITARY SPOUSES. OUR APPROACH ENCOMPASSES DIVERSE CORPORATE GIVING OPPORTUNITIES SUCH AS FUNDRAISING EVENTS, MATCHING GIFTS, AND POINT-OF-SALE CAMPAIGNS, EMPOWERING COMPANIES TO ENGAGE THEIR EMPLOYEES AND CUSTOMERS IN MAKING A MEANINGFUL IMPACT ON THE LIVES OF THE VETERANS AND MILITARY SPOUSES WE SERVE. IN 2023, CORPORATE PARTNERSHIPS GENERATED \$3M IN REVENUE, MARKING A 34% INCREASE FROM THE PREVIOUS YEAR. CORPORATE GIVING ACCOUNTED FOR 82% OF OUR REVENUE, WHILE EARNED REVENUE COMPRISED APPROXIMATELY 16%, AND DIRECT PLACEMENT CONTRIBUTED TO APPROXIMATELY 2% TO OUR TOTAL REVENUE. CORPORATE PARTNER SUCCESS CORPORATE PARTNER SUCCESS OVERSEES THE ADMINISTRATION AND MANAGEMENT OF CORPORATE PARTNER CONTRACTUAL RECRUITING PRODUCTS AND SERVICES, INCLUDING THE JOB BOARD, EMPLOYER TRAINING, TARGETED EMAIL CAMPAIGNS, VIRTUAL CAREER FAIRS, AND EMPLOYER SPOTLIGHTS. ADDITIONALLY, IT SUPPORTS THE CORPORATE PARTNERSHIP TEAM WITH PARTNER OBLIGATIONS SUCH AS IMPACT REPORTS AND QUARTERLY BUSINESS REVIEWS. IN 2023, OUR JOB BOARD FACILITATED THE PUBLICATION OF 339K NEW JOBS, ATTRACTED 4,673 NEW JOB SEEKER PROFILES, AND WELCOMED 271 NEW EMPLOYER ACCOUNTS. OUR VIRTUAL CAREER FAIRS BOASTED AN AVERAGE OF 1,023 JOB SEEKER REGISTRANTS, WITH AN ATTENDANCE RATE AVERAGING 61%, SURPASSING THE INDUSTRY STANDARD OF 51%. NOTABLY, OUR CANDIDATE QUALITY RATING STOOD AT 82%, NOTABLY HIGHER THAN BRAZEN'S BENCHMARK OF 63%. THE VIRTUAL CAREER FAIR EVENTS ACHIEVED A NET REVENUE OF \$52k, MARKING A SIGNIFICANT 13% INCREASE FROM THE PREVIOUS YEAR. TARGET EMAIL CAMPAIGNS YIELDED PROMISING RESULTS, GENERATING \$41k IN REVENUE FROM 162 EMAILS SENT, REFLECTING A NOTABLE 31% INCREASE FROM THE PREVIOUS YEAR. THROUGHOUT 2023, WE HOSTED 23 EMPLOYER SPOTLIGHT EVENTS, GARNERING AN AVERAGE REGISTRATION OF 147 JOB SEEKERS PER EVENT AND MAINTAINING AN AVERAGE ATTENDANCE RATE OF 47%. DESPITE A SLIGHT DECREASE FROM THE PREVIOUS YEAR, THESE EVENTS GENERATED \$31k IN REVENUE. THE CPS TEAM CONDUCTED 5 EMPLOYER TRAINING EVENTS IN 2023, RESULTING IN A SUBSTANTIAL REVENUE OF \$23k, MARKING AN IMPRESSIVE 362% INCREASE FROM THE PREVIOUS YEAR.</p>
<p>FORM 990, PART III, LINE 4C</p>	<p>SERVING SPOUSES SERVING SPOUSES IS HIRE HEROES USA'S CAREER ASSISTANCE PROGRAM FOR MILITARY SPOUSES. THE PROGRAM PROVIDES TAILORED PERSONALIZED IN-PERSON AND VIRTUAL CAREER SERVICES TO IDENTIFY AND SERVICE SOLUTIONS DEVELOPED TO OVERCOME THE UNIQUE EMPLOYMENT BARRIERS ENCOUNTERED AS A MILITARY SPOUSE. EACH SPOUSE CLIENT IS PAIRED WITH A TRANSITION SPECIALIST WHO GUIDES THEM THROUGH THEIR JOB SEARCH FROM START TO FINISH, STAYING IN TOUCH ALONG THE WAY TO COACH, LISTEN AND ENCOURAGE. EACH SERVING SPOUSES TRANSITION SPECIALIST IS A MILITARY SPOUSE AND THEY UNDERSTAND THE UNIQUE CHALLENGES MILITARY SPOUSES FACE WHILE SEARCHING FOR EMPLOYMENT. SINCE THE INCEPTION OF THE PROGRAM, MORE THAN 7,000 MILITARY SPOUSES HAVE FOUND JOBS UTILIZING THE RESOURCES THE PROGRAM OFFERS. THE SERVING SPOUSES PROGRAM SERVES ALL MILITARY SPOUSES INCLUDING ACTIVE-DUTY SPOUSES, RESERVE SPOUSES, GOLD STAR SPOUSES, AND THOSE SPOUSES WHOSE PARTNER HAVE RETIRED</p>

	OR SEPARATED FROM THE MILITARY. IN 2023, OUR SERVING SPOUSES PROGRAM HELPED 1,530 MILITARY SPOUSES AND CONFIRMED 1,032 HIRES. HIRE HEROES USA'S SERVING SPOUSES PROGRAM HOSTED 15 VIRTUAL EVENTS INCLUDING NETWORKING EVENTS AND WEBINARS ON THE TOPIC OF MILITARY SPOUSE EMPLOYMENT. 860 MILITARY SPOUSES ATTENDED OUR SPOUSE EVENTS. MILITARY SPOUSES MADE UP 7.44% OF REGISTRATION IN 2023. MILITARY SPOUSES THAT GO THROUGH THE HIRE HEROES USA'S SERVING SPOUSES PROGRAM ARE HIRED WITH AN AVERAGE STARTING SALARY OF \$54,932. ADDITIONALLY, THE SERVING SPOUSES PROGRAM HAS INCREASED PARTICIPANT ENGAGEMENT THROUGH BOTH LINKEDIN AND FACEBOOK COMMUNITY GROUPS. LINKEDIN GROUP MEMBERSHIP INCLUDES 4,428 MEMBERS, AND FACEBOOK GROUP MEMBERSHIP IS 3,273. GROUP MEMBERSHIP IS 2,774.
FORM 990, PART VI, LINE 11B	THE CEO, COO AND DIRECTOR OF FINANCE REVIEW THE 990 FOR COMPLETENESS AND ACCURACY OF INFORMATION. ONCE THEIR REVIEW IS COMPLETE, IT IS PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL.
FORM 990, PART VI, LINE 12C	EACH INTERESTED PERSON SHALL ANNUALLY SIGN A STATEMENT WHICH AFFIRMS THAT SUCH PERSON: HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, HAS READ AND UNDERSTANDS THE CONFLICT OF INTEREST POLICY, HAS AGREED TO COMPLY WITH THE CONFLICT OF INTEREST POLICY, AND UNDERSTANDS THE CORPORATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES. IN ADDITION, ON SUCH STATEMENT, EACH INTERESTED PERSON SHALL DISCLOSE OR UPDATE HIS OR HER INTERESTS THAT COULD GIVE RISE TO CONFLICT OF INTEREST. TO ENSURE THE CORPORATION OPERATES IN A MANNER CONSISTENT WITH CHARITABLE PURPOSES AND DOES NOT ENGAGE IN ACTIVITIES THAT COULD JEOPARDIZE ITS TAX-EXEMPT STATUS, REGULAR AND CONSISTENT REVIEWS (AT LEAST ANNUALLY) SHALL BE CONDUCTED. THE REVIEWS SHALL AT A MINIMUM, INCLUDE THE FOLLOWING SUBJECTS: WHETHER COMPENSATION ARRANGEMENTS AND BENEFITS ARE REASONABLE, BASED ON COMPETENT SURVEY INFORMATION, AND THE RESULT OF ARM'S-LENGTH BARGAINING. WHETHER PARTNERSHIPS, JOINT VENTURES, AND ARRANGEMENTS WITH MANAGEMENT ORGANIZATIONS CONFORM TO THE CORPORATION'S WRITTEN POLICIES, ARE PROPERLY RECORDED, REFLECT REASONABLE INVESTMENTS FOR PAYMENTS FOR GOODS AND SERVICES, FURTHER CHARITABLE PURPOSES AND DO NOT RESULT IN INUREMENT, IMPERMISSIBLE PRIVATE BENEFIT OR IN AN EXCESS BENEFIT TRANSACTION. WHETHER THE GOVERNING BOARD AND ALL COMMITTEES WITH BOARD DELEGATED POWERS ARE PROPERLY IMPLEMENTING THIS CONFLICT OF INTEREST POLICY.
FORM 990, PART VI, LINE 15A	ANNUALLY, THE ORGANIZATION RESEARCHES AND PROVIDES COMPARABILITY DATA ON NONPROFIT EXECUTIVE COMPENSATION, USING DATA COLLECTED FROM CANDID/GUIDESTAR AND OTHER AVAILABLE SOURCES ON NEAR-PEER ORGANIZATIONS AND SALARY LEVELS. THIS DATA, COUPLED WITH THE ESTABLISHED PERFORMANCE TARGETS AND ORGANIZATIONAL GROWTH STRATEGIES, HELP THE EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS DETERMINE THE APPROPRIATE CEO COMPENSATION LEVELS. THE CEO CONFERS WITH THE EXECUTIVE COMPENSATION COMMITTEE FOR THE APPROPRIATE SALARY LEVELS FOR THE OTHER EXECUTIVE ROLES, APPLYING THE SAME MARKET ANALYSIS FRAMEWORK AND PERFORMANCE TARGETS, AND THE BOARD COMMITTEE ALONG WITH THE CHAIRMAN OF THE BOARD APPROVES THE FINAL DETERMINATION.
FORM 990, PART VI, LINE 15B	KEY EMPLOYEE COMPENSATION IS DETERMINED BY THE FOLLOWING COMPARABILITY DATA POINTS: HIRE HEROES USA'S BUDGET; INTERNAL EQUITY (AGAINST EMPLOYEES WORKING IN THE COMPANY AT THE SAME JOB); EXTERNAL EQUITY (AGAINST THE MARKETPLACE); AND RELEVANT EDUCATION, EXPERIENCE, AND SKILLS. THIS INFORMATION IS THEN THOROUGHLY REVIEWED BY HUMAN RESOURCES AND THE CEO AND COO FOR SUBSTANTIATION AND THEN DECIDED UPON FOR IMPLEMENTATION OF KEY EMPLOYEE COMPENSATION.
FORM 990, PART VI, LINE 19	THE ORGANIZATION'S ACCOUNTANT PROVIDES A COPY OF FORM 990 SPECIFICALLY FOR PUBLIC INSPECTION. THE ORGANIZATION POSTS A COPY OF THIS FORM 990 ON ITS WEBSITE AND IT IS ALSO AVAILABLE UPON REQUEST.

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

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Schedule O (Form 990) 2023

Additional Data

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