Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Inspection

Form **990** (2012)

	tile 201	2 calendar year, or tax year beginning , 2012	!, and ending		, 20				
B Chool:	if applicable:	C Name of organization		D Employer identi					
		SOUPMOBILE, INC		20-01549	35				
	ddress hange	Doing Business As							
Na	ame change	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numb	per				
In	nitial return	3017 COMMERCE ST		(214) 655-	6396				
Te	erminated	City, town or post office, state, and ZIP code							
	mended eturn	DALLAS, TX 75226		G Gross receipts \$	1,409,580				
Ap	pplication ending	F Name and address of principal officer: DAVID TIMOTHY		H(a) Is this a group re affiliates?	eturn for Yes X N				
	onung	3017 COMMERCE ST DALLAS, TX 75226		H(b) Are all affiliates i	included? Yes N				
Tax	-exempt st	atus: X 501(c)(3) 501(c)() ◀ (insert no.) 4947(a)(1)	or 527	If "No," attach a	list. (see instructions)				
J Wel	bsite:	WWW.SOUPMOBILE.ORG		H(c) Group exemption	number -				
S For	m of organ	ization: X Corporation Trust Association Other	L Year of	formation: 2003 M Sta					
Part I		mmary	1 = 100.00						
1		describe the organization's mission or most significant activities:							
'		PMOBILE, INC. IS A NON-PROFIT MOBILE SOUP KITC	HEN FEED	TNG					
8		CHING, AND CARING FOR THE NEEDY AND HOMELESS I							
Governance		PMOBILE ALSO PROVIDES HOUSING ASSISTANCE FOR Q							
Veri		·							
8 2		this box if the organization discontinued its operations or dispose		i	1				
∞ಶ∣ 3		er of voting members of the governing body (Part VI, line 1a)			_				
∯ 4		er of independent voting members of the governing body (Part VI, line 1b) \Box							
Activities 9 6	5 Total	number of individuals employed in calendar year 2012 (Part V, line 2a)		5					
P 6	Total :	number of volunteers (estimate if necessary)		6	3,100				
7	7a Total	unrelated business revenue from Part VIII, column (C), line 12		7a	1				
		nrelated business taxable income from Form 990-T, line 34							
				Prior Year	Current Year				
_m 8	3 Contri	butions and grants (Part VIII, line 1h)		1,234,370.	. 1,360,328				
an g		am service revenue (Part VIII, line 2g)			0				
9				31	. 8,186				
		ment income (Part VIII, column (A), lines 3, 4, and 7d)		-301					
11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,234,100.	<u> </u>					
12		revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .							
13		s and similar amounts paid (Part IX, column (A), lines 1-3)		805,509.	. 791,250				
14		its paid to or for members (Part IX, column (A), line 4)			0				
ဖ္မ 15	Salari	es, other compensation, employee benefits (Part IX, column (A), lines 5-10)		123,764	. 140,663				
Expenses 16	a Profes	ssional fundraising fees (Part IX, column (A), line 11e)	[(0				
xbe	b Total t	ssional fundraising fees (Part IX, column (A), line 11e) fundraising expenses (Part IX, column (D), line 25)	5.						
^ш 17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		182,135	. 248,060				
II.		expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,111,408.	. 1,179,973				
19		ue less expenses. Subtract line 18 from line 12		122,692.	. 168,610				
es o		100 1000 0.po.11000. Cubilitati in 10 11011 inito 12		Beginning of Current Year	· · · · · · · · · · · · · · · · · · ·				
Fund Balances 15 27) Total	accets (Part Y line 16)	-	330,826.					
Bal	Total	assets (Part X, line 16) iabilities (Part X, line 26)		43,697					
	Nete			287,129	<u> </u>				
		sets or fund balances. Subtract line 21 from line 20		201,123	, 400,742				
Part I		gnature Block							
Under p	penalties orrect and	of perjury, I declare that I have examined this return, including accompanying scheducomplete. Declaration of preparer (other than officer) is based on all information of whi	ules and stateme	ents, and to the best of my any knowledge	y knowledge and belief, it i				
-, -0	1,		, .,	<u> </u>					
				Date					
_		Signature of officer							
_		Signature of officer							
_		Signature of officer Type or print name and title							
_	•		Date	Check if	PTIN				
Sign Here Paid	•	Type or print name and title	Date	Check if self-employed					
Here	Print/	Type or print name and title Type preparer's name Preparer's signature Preparer's signature	Date	self-employed	PTIN P01424343				
Here Paid	Print/ er Firm's	Type or print name and title	Date	self-employed Firm's EIN ▶					

SOUPMOBILE, INC 20-0154935

Form 990 (2012) Page 2 Part III **Statement of Program Service Accomplishments** Briefly describe the organization's mission: SOUPMOBILE, INC. IS A NON-PROFIT MOBILE SOUP KITCHEN FEEDING, CLOTHING, AND CARING FOR THE NEEDY AND HOMELESS IN THE DALLAS AREA. SOUPMOBILE ALSO PROVIDES HOUSING ASSISTANCE FOR QUALIFING INDIVIDUALS. 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? 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 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 \$ 748,654. including grants of \$) (Revenue \$ FEEDING: THE SOUPMOBILE SERVES 200,000 MEALS PER YEAR TO THE HOMELESS AND HUNGRY. 4b (Code:) (Expenses \$ 129,244. including grants of \$ CHRISTMAS: THE SOUPMOBILE TAKES 500 HOMELESS PEOPLE TO A HIGH END HOTEL FOR CHRISTMAS. 4c (Code:) (Expenses \$ 78,717. including grants of \$) (Revenue \$ HOUSING: THE SOUPMOBILE HOUSES THE HOMELESS IN OUR GROUP HOMES. ATTACHMENT 1 **4d** Other program services (Describe in Schedule O.) (Expenses \$ 55,054. including grants of \$) (Revenue \$ 1,011,669. 4e Total program service expenses ▶

Form 990 (2012)

Part IV Checklist of Required Schedules

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Χ
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		3.7
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			v
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			Х
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
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>	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		71
11	VII, VIII, IX, or X as applicable.			
-	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes,"</i>			
-	complete Schedule D, Part VI	11a	Х	
r	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
~	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Χ
c	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Χ
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Χ
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Χ
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	146		Х
15	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		
15		15		Χ
16	organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	13		
. 0	to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		Χ
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? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
-	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Χ	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
-	If "Yes," complete Schedule G, Part III	19		Χ
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Part IV **Checklist of Required Schedules** (continued) No Did the organization report more than \$5,000 of grants and other assistance to any government or organization Χ 21 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 22 Χ on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated Χ 24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b Χ 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?..... Did the organization maintain an escrow account other than a refunding escrow at any time during the vear 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?..... 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Χ 25a 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? 25b Χ If "Yes," complete Schedule L, Part I 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or Χ disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II, Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled Χ 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): Χ a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) 28c Χ was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Χ conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Χ Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 Χ 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 Χ 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, Χ 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? Χ 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 related organization? If "Yes," complete Schedule R, Part V, line 2 36 Χ 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, Χ Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38 Χ

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Par				
	Check if Schedule O contains a response to any question in this Part V			
	Enter the number reported in Roy 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in Box 5 or 1 or 11 1050. Enter 10-11 not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1c	Х	
2.0	reportable gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	16	21	
Za	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 <i>a</i>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		37	
	and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.		Х
_	required to file Form 8282?	7с		Λ
	If "Yes," indicate the number of Forms 8282 filed during the year	70		Х
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		21
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 y 7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	/ !!		
Ü	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	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:			
а	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.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans Tatantha arrayant of records on lead			
C	Enter the amount of reserves on hand	14a		X
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		Λ
D	n res, has a nieu a i oni rzo to report these payments? Il ino, provide an explanation in schedule o	140		ı

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SOUPMOBILE, INC 20-0154935 Form 990 (2012) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI............... Section A. Governing Body and Management Yes 1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 Χ 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . Χ 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets?.... Χ 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint Χ b Are any governance decisions of the organization reserved to (or subject to approval by) members, Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X Χ Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached at X 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.) Nο Χ 10a **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done X 13 13 X 14 14 Did the organization have a written document retention and destruction policy?............. 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? Χ 15a The organization's CEO, Executive Director, or top management official If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement Χ 16a with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ▶
	Section 6104 requires an organization to make its Forms 1023 (or 1024 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. X Upon request Other (explain in Schedule O) Own website Another's website

Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶DAVID TIMOTHY 3017 COMMERCE ST DALLAS, TX 75226

Form **990** (2012)

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Check this box if neither the organization nor any related organization compensated any current officer, or								er, director, or trus	stee.	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unle	Pos heck ss pe	more rson	e than of is both with the is or/true Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
_(1) DAVID TIMOTHY PRESIDENT & TREASURER	60.00	X		Х				58,750.	0	10,344
(2) CYNTHIA LEFTRICK SECRETARY	5.00	Х		Х				C	0	
(3) MARGARET D BENSON VICE PRESIDENT	5.00	Х		Х				C	0	
<u>(4)</u>										
<u>(6)</u>										
<u>_(9)</u>										
(10)										
(11)										
(12)										
(13)										
(14)										

JSA

SOUPMOBILE, INC

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Part VII Section A. Officers, Directors, Tru	art 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	(C) Position (do not check more than box, unless person is bott officer and a director/trus				is both or/trust	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/1099-MISC)	n from	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-1	wisc)	organization and related organizations
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A						> > >	58,750. 0 58,750.		0 0	10,344.
Total number of individuals (including but not reportable compensation from the organization)	limited to t		iste				re	ceived more than	\$100,000 o	f	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu											Yes No
4 For any individual listed on line 1a, is the organization and related organizations graindividual	eater than	\$15	0,0	00?	lf.	"Yes	;"	complete Schedu	e J for s	uch	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "You											5 X
Complete this table for your five highest compensation from the organization. Report of year.											
(A)							(B) Description of se	rvices	C	(C) ompensation	
2 Total number of independent contractors (in	ncluding by	ıt not	lim	niter	d to	thos	e li	isted above) who	received		
more than \$100,000 in compensation from th						0					Farm 990 (0040)

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Part VIII Statement of Revenue

		Check if Schedule O contains a response to	any quest	ion 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, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns	44,629.				
	g h	Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f		1,360,328.			
Program Service Revenue	2a b c d		ess Code				
Prog	f g 3	All other program service revenue		0			
	4 5 6a b	other similar amounts). ATTACHMENT 2 Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) F Gross rents 11,611. Less: rental expenses		194. 0 0			194.
	c d 7a	Gross amount from sales of	Other 7,992.	11,611.			11,611
	b c	assets other than inventory Less: cost or other basis and sales expenses Gain or (loss)	7,992.				
Other Revenue	d 8a b	Net gain or (loss) Gross income from fundraising events (not including \$44,629. of contributions reported on line 1c). See Part IV, line 18		7,992.			7,992.
	С	Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19	H.4.▶	-9,557.			-9,557
		Net income or (loss) from gaming activities Gross sales of inventory, less		0			
	b c	returns and allowances a Less: cost of goods sold b Net income or (loss) from sales of inventory Miscellaneous Revenue Busin	26,095. 48,080.	-21,985.	-21,985.		
	11a b c d	All other revenue		0			
	12	Total revenue See instructions		1.348.583.	-21,985.		10,240

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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 resp				
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	43,752.	43,752.		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	747,498.	747,498.		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members	0			
4 5	Compensation of current officers, directors, trustees, and key employees	58,750.	25,948.	32,802.	
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 8	Other salaries and wages Pension plan accruals and contributions (include section	67,089.	17,181.	11,344.	38,564.
	401(k) and 403(b) employer contributions)	10,330.	4,563.	5,767.	
9 10	Other employee benefits	4,494.	1,985.	2,509.	
11	Fees for services (non-employees):				
	Management	0			
	Accounting	526.		526.	
	Lobbying	0			
	Professional fundraising services. See Part IV, line 17 Investment management fees	0			
g					
12	(A) amount, list line 11g expenses on Schedule O.). Advertising and promotion	799.		799.	
13	Office expenses	0			
14	Information technology	6,529.	1,217.	5,312.	
15 16	Royalties	79,027.	67,424.	11,603.	
17	Travel	0			
18	Payments of travel or entertainment expenses	0			
19	for any federal, state, or local public officials Conferences, conventions, and meetings	4,115.		4,115.	
20	Interest	5,357.	272.	5,085.	
21	Payments to affiliates	20,279.	17,795.	2,484.	
22 23	Depreciation, depletion, and amortization Insurance	15,423.	17,795.	15,423.	
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.)				
	AUTOMOBILE_EXPENSES	37,388.	23,288.	14,063.	37.
-	CELEBRATE JESUS EVENT SUPPLIES	35,741. 20,688.	35,741. 9,957.	10,731.	
-	DONATIONS TO OTHER CHARITIES	7,695.	7,695.	10,731.	
-	All other expenses	14,493.	7,353.	6,606.	534.
2 <u>5</u> 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs	1,179,973.	1,011,669.	129,169.	39,135.
JSA	from a combined educational campaign and fundraising solicitation. Check here ▶ if following SOP 98-2 (ASC 958-720)	0			5 000 (0040)

JSA 2E1052 1.000 20-0154935

Form 990 (2012) Part X **Balance Sheet**

Check if Schedule O contains a response to any question in this Part X Cash - non-interest-bearing 156,016. 1	(B) End of year 212, 926. 43, 973. 0
2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivables, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(c)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10 Less: accumulated depreciation 11 Investments - publicity traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - other securities. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 18 Grants payable 19 Ferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Secured mortgages and notes payable to unrelated third parties	
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13 Investments - program-related. See Part IV, line 11	0
14 Intangible assets 0 14 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 330,826. 16 17 Accounts payable and accrued expenses 43,697. 17 18 Grants payable 0 18 19 Deferred revenue 0 19 20 Tax-exempt bond liabilities 0 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 0 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 0 22 23 Secured mortgages and notes payable to unrelated third parties 0 23	0
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17 Accounts payable and accrued expenses 43,697. 17 18 Grants payable 9 0 18 19 Deferred revenue 0 19 20 Tax-exempt bond liabilities 0 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 0 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 0 22 23 Secured mortgages and notes payable to unrelated third parties 0 23	1,700.
18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties O 18 O 19 O 20 O 21 O 22 O 23	486,627.
19 Deferred revenue 0 19 20 Tax-exempt bond liabilities 0 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 0 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 0 22 23 Secured mortgages and notes payable to unrelated third parties 0 23	30,885.
Tax-exempt bond liabilities Tax-exempt bond	0
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22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties © 23	0
23 Secured mortgages and notes payable to unrelated third parties 0 23	0
23 Secured mortgages and notes payable to unrelated third parties 0 23	
23 Secured mortgages and notes payable to unrelated third parties 23	0
	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	0
26 Total liabilities. Add lines 17 through 25	30,885.
Organizations that follow SFAS 117 (ASC 958), check here ▶ and	
27 Unrestricted net assets 27	
28 Temporarily restricted net assets 28	
29 Permanently restricted net assets 29	
Organizations that do not follow SFAS 117 (ASC 958), check here	
287,129. 30 Capital stock or trust principal, or current funds	455,742.
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 34 287,129. 35 287,129. 36 287,129. 37 287,129.	0
32 Retained earnings, endowment, accumulated income, or other funds	0
33 Total net assets or fund balances 287,129. 33	455,742.
34 Total liabilities and net assets/fund balances	486,627.

Form **990** (2012)

Page **11**

SOUPMOBILE, INC 20-0154935

Form 990 (2012) Page **12 Reconciliation of Net Assets** Part XI X Check if Schedule O contains a response to any question in this Part XI 1,348,583. 1,179,973. 2 168,610. 3 287,129. 4 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 0 5 5 0 6 6 0 7 7 8 8 3. 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 10 455,742. 10 Part XII **Financial Statements and Reporting** Yes No 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Χ 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 Χ 2b 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 2c 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 3a Χ 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

Form **990** (2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization

Employer identification number

	_	BILE, INC									-013	4933		
Pa	rt I	Reason for Pub	lic Charity Statu	s (All organizations mu	st cor	nplete	this pa	art.) Se	e instri	uctions				
Γhe	orga	nization is not a priv	ate foundation be	cause it is: (For lines 1 th	rough	11, che	eck only	one bo	x.)					
1		A church, convention	on of churches, or	association of churches	describ	ed in s	section	170(b)(1)(A)(i)					
2		A school described	l in section 170(b)	(1)(A)(ii). (Attach Schedul	e E.)									
3		A hospital or a coo	perative hospital s	service organization descr	ibed in	sectio	n 170(b)(1)(A)	(iii).					
4		A medical researc	h organization op	erated in conjunction wi	th a h	nospita	al descr	ibed in	sectio	n 170(b)(1)(A	A)(iii). E	∃nter	the
		hospital's name, cit	y, and state:											
5		= :		nefit of a college or univ	ersity	owned	d or ope	erated b	oy a go	vernme	ntal u	nit des	cribe	d in
		section 170(b)(1)(A		•										
6	Щ		_	or governmental unit des										
7	X	_	-	es a substantial part of it	s supp	ort fro	om a go	vernme	ental un	it or fro	om the	e gener	al pu	Jblic
_				. (Complete Part II.)										
8	Ш	=		on 170(b)(1)(A)(vi). (Com	•							_		
9		-	=	es: (1) more than 331/3%							-		_	
		•		s exempt functions - sub			-							
				ome and unrelated busi				-		n 511	tax) f	rom bu	isines	sses
				ne 30, 1975. See section			-		-					
0	Щ		-	ated exclusively to test for	-	-								
11		•	•	rated exclusively for the								•		
				upported organizations de					-				sec	tion
				pes the type of supporting	_						-			
		a Type I	b Type II	c Type III-Function	-	-				I-Non-fu		•	•	
е		-	=	the organization is not			-		-	-				
		persons other than	foundation mana	agers and other than one	or mo	re pub	olicly su	pported	d organ	izations	desc	cribed in	n sec	tion
		509(a)(1) or section												
f		If the organization	received a writte	en determination from th	e IRS	that it	is a T	уре І, Т	Type II,	or Type	e III s	upporti	ng ့	
		organization, check	this box										l	
g		Since August 17, 2	006, has the orga	nization accepted any gif	or co	ntribut	ion from	any of	the					
		following persons?												
		(i) A person who	directly or indire	ectly controls, either alor	ne or t	ogethe	er with	person	s desc	ribed in	(ii)		Yes	No
		and (iii) below,	the governing bo	dy of the supported organ	ization	?						11g(i)		
		(ii) A family memb	oer of a person de	scribed in (i) above?								11g(ii)		
		(iii) A 35% controll	led entity of a pers	son described in (i) or (ii) a	bove?							11g(iii)		
h		Provide the following	ng information abo	out the supported organization	ation(s).								
		ame of supported	(ii) EIN	(iii) Type of organization	(iv)	Is the		ou notify		s the	(vii) A	mount of	f mone	atary
		organization		(described on lines 1-9 above or IRC section		zation in listed in	_	anization . (i) of	_	zation in rganized		suppo	rt	
				(see instructions))		overning ment?		upport?		U.S.?				
					Yes	No	Yes	No	Yes	No				
A)														
^,														
B)														
C)														
D)														
E)														
Tota	al													

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 Page **2**

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	271,633.	519,690.	735,202.	1,234,370.	1,360,328.	4,121,223.
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	271,633.	519,690.	735,202.	1,234,370.	1,360,328.	4,121,223.
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)						1,174,383.
6	Public support. Subtract line 5 from line 4.						2,946,840.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	271,633.	519,690.	735,202.	1,234,370.	1,360,328.	4,121,223.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			15,424.	7,678.	19,797.	42,899.
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 IV.)						0
11	Total support. Add lines 7 through 10						4,164,122.
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	29,575.
13	First five years. If the Form 990 is forganization, check this box and stop here						
Sec	tion C. Computation of Public Sup						
14	Public support percentage for 2012 (lin	. ,	•			14	70.77%
15	Public support percentage from 2011					15	99.28%
16a	331/3% support test - 2012. If the o						
	this box and stop here. The organization						
b	331/3% support test - 2011. If the o						
	check this box and stop here . The orga						
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization					-	-
	Part IV how the organization meets t			_	· ·		ipported
b	organization 10%-facts-and-circumstances test - 2 15 is 10% or more, and if the organization	2011. If the org	janization did no	ot check a box	on line 13, 16a	a, 16b, or 17a,	
	Explain in Part IV how the organization						-
18	supported organization Private foundation. If the organization						
	instructions						ightharpoonup
		· · · · · · · · ·					· · · · · · · · · · · · · · · · · · ·

Schedule A (Form 990 or 990-EZ) 2012 Page **3**

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

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

				, ,	•	,	
	tion A. Public Support	(-) 2000	(h) 2000	(=) 2010	(4) 2011	(a) 2012	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
_	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
L	received from disqualified persons						
D	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support		I	T	T		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6.						
10 a	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						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	the organization	n's first, second,	third, fourth, or	fifth tax year a	as a section 501	(c)(3)
	organization, check this box and stop here	<u> </u>					▶ 🔃
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2012 (line 8,	column (f) divide	ed by line 13, colu	mn (f))		15	%
16	Public support percentage from 2011 Sche	dule A, Part III, lir	ne 15			16	%
Sec	tion D. Computation of Investmer	nt Income Per	centage				
17	Investment income percentage for 2012 (lin	ne 10c, column ((f) divided by line	13, column (f))		17	%
18	Investment income percentage from 2011					18	%
19 a	331/3% support tests - 2012. If the org					re than 331/3 %, a	and line
	17 is not more than 331/3%, check this						
b	331/3% support tests - 2011. If the orga		_				
	line 18 is not more than 331/3 %, check						
20	Private foundation. If the organization		-	•			

Schedule A (Form 990 or 990-EZ) 2012

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

Page 4

SCHEDULE D (Form 990)

Supplemental Financial Statements

20

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

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

► Attach to Form 990. ► See separate instructions.

Employer identification number

SO	UPMOBILE, INC	20-0154935
Pa	Organizations Maintaining Donor Advised Funds or Other Similar Funds or organization answered "Yes" to Form 990, Part IV, line 6.	r Accounts. Complete if the
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in	n donor advised
	funds are the organization's property, subject to the organization's exclusive legal control? .	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fun	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any	
	conferring impermissible private benefit?	Yes No
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to F	orm 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
		of an historically important land area
		of a certified historic structure
2	☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in	n the form of a conservation
_	easement on the last day of the tax year.	in the form of a conservation
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	
С	Number of conservation easements on a certified historic structure included in (a)	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminate of conservation easements modified, transferred, released, extinguished, or terminate of conservation easements modified, transferred, released, extinguished, or terminate of conservation easements modified, transferred, released, extinguished, or terminate of conservation easements modified, transferred, released, extinguished, or terminate of conservation easements modified, transferred, released, extinguished, or terminate of conservation easements modified extinguished, exti	nated by the organization during the
	tax year ▶	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, have a written policy regarding the periodic monitoring, inspection, have a written policy regarding the periodic monitoring, inspection, have a written policy regarding the periodic monitoring.	-
_	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ear	sements during the year
7	► Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easeme	anta during the year
,	Should be expenses incurred in monitoring, inspecting, and emorcing conservation easements	this during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of s	ection 170(h)(4)(B)
•	(i) and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue an	id expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's finance	
	organization's accounting for conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Othe Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	er Similar Assets.
 1а		revenue statement and halance shee
Ia	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its works of art, historical treasures, or other similar assets held for public exhibition, edupublic service, provide, in Part XIII, the text of the footnote to its financial statements that decompositions.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its works of art, historical treasures, or other similar assets held for public exhibition, edupublic service, provide the following amounts relating to these items:	
	(i) Revenues included in Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar	<u> </u>
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these item	ns:
а	Revenues included in Form 990, Part VIII, line 1	 ▶ \$
b	Assets included in Form 990, Part X	> \$

Schedule D (Form 990) 2012 Page **2**

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 arbibition	Par	t III Organizations Maintaining Colle	ections of	Art,	Historical	Treasu	res,	or Ot	her Similar As	sets (con	tinued)
a Public exhibition during the year of the organization's collections and explain how they further the organization's exempt purpose in Part XII. 5 During the year, did 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 answered "Yes" to 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? 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? 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. line 21. 1b If Yes, "explain the arrangement in Part XIII and complete the following table: 1c Beginning balance	3		sion, and oth	ner re	cords, chec	k any o	f the	follow	ing that are a si	gnificant us	se of its
b Scholarly research e Other Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 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?	а			Ч	Loan	or eycha	ange	nrogran	ne		
c	_										
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?		<u> </u>		е	Other						
XIII.	4		a allo ations	and a	volcio bow	thou fur	thor	the ere	anization'a avam	nt nurnoco	in Dort
Beginning balance of the arrangement in Part XIII check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete if the explanation has been provided in Part XIII. Beginning of year balance (a) Current year (b) Prior years back (d) Three years back (d) Four years back (d) Three years back (d) Three years back (ii) related organization by: C No the revenation by: Beginning of year balance (b) Contributions (iii) related organizations during the estimated percentages in lines 2.2. band 2c should equal 100%. Sa Are there endowment funds not in the possession of the organization that are held and administered for the organization by: C Temporarily restricted endowment yes No No No No No No No N	4		collections a	and e	xpiairi now	liley iui	lilei	the org	janizations exem	ipi purpose	III Pail
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	_			4		! 1 4			Al ! !!		
Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to 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? b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year d Distributions during the year f Ending balance 1b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. 2a Did the organization include an amount on Form 990, Part X, line 21? 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" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships d Grants or scholarships c 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 % 7 Permanent endowment % Temporarily restricted endownent % Temporarily restricted endownent % Temporarily restricted endownent %	5										
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? □ If Yes, "explain the arrangement in Part XIII and complete the following table: □ Beginning balance											
included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table: Beginning balance Id Amount Amount Amount Amount Amount Amount Id Additions during the year Id Distributions during the year defined on Amount of Prove years back (Id) Three years	Par					ganızat	ion a	answer	ed "Yes" to Fo	rm 990, F	art IV,
included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table: Beginning balance Id Amount Amount Amount Amount Amount Amount Id Additions during the year Id Distributions during the year defined on Amount of Prove years back (Id) Three years											
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance	1a										
C Beginning balance		included on Form 990, Part X?								Yes	No
C Beginning balance 1c d d	b	If "Yes," explain the arrangement in Part XIII	and complet	e the	following tak	ole:					
d Additions during the year Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? 2b Did the organization include an amount on Form 990, Part X, line 21? 2c Did the organization include an amount on Form 990, Part X, line 21? Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 2 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 C Temporarily restricted endowment % The percentages in 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: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 2 Describe in Part XIII the intended uses of the organization's endowment funds. Part XII Land, Buildings, and Equipment. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds. Part XII Land, Buildings, and Equipment. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds. Part XII Land, Buildings, and Equipment. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds. Part XII Land, Buildings, and Equipment. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds. Part XII Land, Buildings, and Equipment. See Form 990, Part X, line 10. 12 Land, Buildings, and Equipment. See Form 990, Part X, line 10. 13 Land. 14 Land. 15 Land. 16 Land. 17 Land. See Roll 125, 043. 18 Land. 19 Land. See Roll 125, 043. 19 Land. See Roll									Amount		
e Distributions during the year 16 f Ending balance 17 2a Did the organization include an amount on Form 990, Part X, line 21? 18 b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.	С										
f Ending balance	d	Additions during the year					1d				
Did the organization include an amount on Form 990, Part X, line 217 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" to Form 990, Part IV, line 10. Regioning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back of Contributions (c) Net investment earnings, gains, and losses (d) Grants or scholarships (e) Grants	е										
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V	f										
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V	2a	Did the organization include an amount on F	orm 990, Pa	art X, I	line 21?					Yes	No
Calculation	b	If "Yes," explain the arrangement in Part XIII.	Check here	if the	explanation	has be	en pr	ovided i	n Part XIII		
1a Beginning of year balance	Par	t V Endowment Funds. Complete if	the organiz	ation	answered	"Yes" to	o Fo	rm 990	, Part IV, line 1).	
b Contributions		(a) Cur	rrent year	(b)	Prior year	(c) Tw	o year	s back	(d) Three years back	(e) Four y	ears back
c Net investment earnings, gains, and losses	1a	Beginning of year balance									
and losses	b	Contributions									
d Grants or scholarships	С	Net investment earnings, gains,									
e Other expenditures for facilities and programs		and losses									
and programs	d	Grants or scholarships									
g End of year balance	е	Other expenditures for facilities									
g End of year balance		and programs									
g End of year balance	f										
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶											
a Board designated or quasi-endowment ▶	_		rent vear end	hala	nce (line 1a	column	(a))	held as			
b Permanent endowment ►						, coldiiii	(ω))	noia ao.			
Temporarily restricted endowment ▶	b	Permanent endowment		, 0							
The percentages in 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: (i) unrelated organizations. (ii) related organizations. b If "Yes" to 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. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (c) Accumulated depreciation (d) Book value (d) Book value to Buildings c Leasehold improvements 6,705. 930. 5,775. d Equipment 105,317. 37,185. 68,132. e Other 12,366. 7,173. 5,193.	c		%								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations)%							
organization by: (i) unrelated organizations (ii) related organizations (iii)	3a				nization that	are held	d and	l admin	istered for the		
(i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 131,771 6,728 125,043 c Leasehold improvements 6,705 930 5,775 d Equipment 105,317 37,185 68,132 e Other 12,366 7,173 5,193		·		o.ga	inzacion chac	4.0 1.0.	u u			Υ	es No
(ii) related organizations b If "Yes" to 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. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value 1a Land b Buildings 131,771 6,728 125,043 c Leasehold improvements 6,705 930 5,775 d Equipment 105,317 37,185 68,132 e Other 12,366 7,173 5,193		=									- 110
b If "Yes" to 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. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 131,771 6,728 125,043 b Buildings 6,705 930 5,775 c Leasehold improvements 6,705 930 5,775 d Equipment 105,317 37,185 68,132 e Other 12,366 7,173 5,193	h	`,									
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 131,771 6,728 125,043 b Buildings 6,705 930 5,775 c Leasehold improvements 105,317 37,185 68,132 e Other 12,366 7,173 5,193	-			-						. 00	
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 131,771 6,728 125,043 b Buildings 6,705 930 5,775 c Leasehold improvements 105,317 37,185 68,132 e Other 12,366 7,173 5,193											
tall Land (investment) (other) depreciation b Buildings 131,771 6,728 125,043 c Leasehold improvements 6,705 930 5,775 d Equipment 105,317 37,185 68,132 e Other 12,366 7,173 5,193	rai						. T	(-) 1		(-I) D	
1a Land 131,771 6,728 125,043 b Buildings 6,705 930 5,775 c Leasehold improvements 6,705 930 5,775 d Equipment 105,317 37,185 68,132 e Other 12,366 7,173 5,193		Description of property					ISIS			(a) Book value	9
b Buildings 131,771. 6,728. 125,043. c Leasehold improvements 6,705. 930. 5,775. d Equipment 105,317. 37,185. 68,132. e Other 12,366. 7,173. 5,193.	10	Land	, 	-7	(- /					
c Leasehold improvements 6,705. 930. 5,775. d Equipment 105,317. 37,185. 68,132. e Other 12,366. 7,173. 5,193.	_				-	131 75	7 1		6 728	1 2	5 043
d Equipment 105,317. 37,185. 68,132. e Other 12,366. 7,173. 5,193.		5			-		_				
e Other	_										
	a	· ·					_	•			
	e Tab		anual Farmer	200 5	lant V astron			(a))	1,113.		

SOUPMOBILE, INC

Schedule D (Form 990) 2012 Page **3**

Part VII	Investments - Other Securities. See F	orm 990, Part X, Iin	ne 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mark	
(1) Financia	al derivatives			
	-held equity interests			
(3) Other				
(A)				
(B)				
<u>(C)</u>				
(D)				
<u>(E)</u> (F)				
(i_) (G)				
<u>\(\text{\text{G}}\)</u>				
<u>\(\frac{1}{2}\)</u>				
	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related. See F	orm 990, Part X, Iir	ne 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valua Cost or end-of-year mark	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X, li	ne 15.		
		Description		(b) Book value
(1)				
_(2)				
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(9)				
(10)				
	umn (b) must equal Form 990, Part X, col. (B) I	ine 15.)		
Part X	Other Liabilities. See Form 990, Part X			L
1.	(a) Description of liability	(b) Book valu	ue	
(1) Feder	ral income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
(8)				
_(9)				
(10)				
(11)				
	nn (b) must equal Form 990, Part X, col. (B) line 25.)			
2. FIN 48 (A	ASC 740) Footnote. In Part XIII, provide the text	of the footnote to the o	organization's financial statements that re	eports the organization's

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

SOUPMOBILE, INC 20-0154935

Schedule D (Form 990) 2012 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Part XI Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments 2a **b** Donated services and use of facilities Recoveries of prior year grants Other (Describe in Part XIII.) e Add lines 2a through 2d Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a b Prior year adjustments 2b c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII.) c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

 Schedule D (Form 990) 2012
 SOUPMOBILE, INC
 20-0154935
 Page 5

Part XIII Supplemental Information (continued)

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organiz	ation					Employer identification	on number
SOUPMOBILE,						20-0154935	
2.4	n <mark>draising Activities.</mark> Con rm 990-EZ filers are not				"Yes" to Form 9	90, Part IV, line	17.
1 Indicate v	hether the organization rai	sed funds through	any of the	following	activities. Check a	all that apply.	
a Mail	solicitations	e			non-government g		
	net and email solicitations	f			government grant	S	
	e solicitations	9	j	cial fundra	ising events		
	rson solicitations						
	ganization have a written on aployees listed in Form 990						Yes No
	st the ten highest paid ind ated at least \$5,000 by the		s (fundraise	ers) pursua	int to agreements	under which the	fundraiser is to be
	and address of individual entity (fundraiser)	(ii) Activity	custody o	draiser have or control of outions?	(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
			Yes	No		COI. (I)	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total				▶			
3 List all sta	ates in which the organiza on or licensing.	ition is registered	or licensed	d to solicit	contributions or	has been notified	it is exempt from
		-		_	-		

 Schedule G (Form 990 or 990-EZ) 2012
 Page 2

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

		gross receipts greater than \$5,0	00.			
			(a) Event #1 GOLF TOURNAMENT	(b) Event #2 SOUPER100	(c) Other events	(d) Total events (add col. (a) through
4			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	27,025.	20,964.		47,989.
œ		Less: Contributions Gross income (line 1 minus	23,665.	20,964.		44,629.
	3	line 2)	3,360.			3,360.
	4	Cash prizes				
	5	Noncash prizes				
sesuec	6	Rent/facility costs	5,084.	7,833.		12,917.
Direct Expenses	7	Food and beverages				
Dire	8	Entertainment				
	9	Other direct expenses				
	10 11	Direct expense summary. Add lines 4 Net income summary. Combine line 3				(12,917.) -9,557.
Pa	rt I	Gaming. Complete if the orga	anization answered "Y			rted more
		than \$15,000 on Form 990-E	:Z, line ba.	4) 5		(d) Total gaming (add
une			(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				
ses		Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes% No	Yes% No	Yes% No	
	7	Direct expense summary. Add lines 2	through 5 in column (d)		>	()
	8	Net gaming income summary. Comb	ine line 1, column d, and	l line 7		
9 a k	ı Is	nter the state(s) in which the organizate the organization licensed to operate g	ion operates gaming actigation activities in each	of these states?		Yes No
		/ere any of the organization's gaming l "Yes," explain:	icenses revoked, suspe			• — —

20-0154935

SOUPMOBILE, INC 20-0154935

Sched	Tule G (Form 990 or 990-EZ) 2012
11	Does the organization operate 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?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ▶
	Address ►
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
b	revenue?
D	amount of gaming revenue retained by the third party > \$
С	If "Yes," enter name and address of the third party:
·	in 100, Onto hame and address of the time party.
	Name ▶
	Address ►
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶ \$
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year 🕨 \$
Par	Supplemental Information. Complete this part to provide the explanation 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 complete this part to provide any additional information (see instructions).

SCHEDULEI (Form 990)

SOUPMOBILE, INC

Name of the organization Internal Revenue Service

Department of the Treasury

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

OMB No. 1545-0047 Open to Public

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

adem	Employer identification number
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20-0154935

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	pu			
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 Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part II can be duplicated if additional space is needed.

1 (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 non-cash assistance	(h) Purpose of grant or assistance
(1) AIDS RESOURCE CENTER PO BOX 190869 DALLAS, TX 75219	75-1892059	501(C)(3)		16,208.	FWV	FOOD	FEEDING THE HUNGRY
(2) DALLAS INTERNATIONAL STREET CHURCH 2706 SOUTH 2ND AVE. DALLAS, TX 75210-2070	75-2736730	501(C)(3)		5,096	FMV	FOOD	FEEDING THE HUNGRY
(3) CITYSQUARE 511 N. AKARD STREET, STE 302	75-2332948	501(C)(3)		21,373.	FMV	FOOD	THE
(6)							
(1 <u>0</u>)							
(11)							
(1 <u>2</u>)							
2 Enter total number of section 501(c)(3) and government org 3 Enter total number of other organizations listed in the line 1	government or	ganiza	janizations listed in the line 1 table table				() () () () () () () () () ()

11:55:33 AM 10/23/2013

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

Schedule I (Form 990) (2012)

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Schedule I (Form 990) (2012)

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

_					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 FOOD & CLOTHING FOR HOMELESS	5,000.		648,696.	648,696. COST & FMV	FOOD & CLOTH
2 CHRISTMAS EVE EVENT	500.		81,793.	COST	ROOMGBANQUET
3 HOMES FOR HOWELESS	25.		17,008.	COST	HOME TO STAY
4					
2					
9					
7					
Part IV Supplemental Information. Complete this part to		vide the informa	tion required in	Part I, line 2, Part III,	provide the information required in Part I, line 2, Part III, column (b), and any other additional

information.

THE ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

SCHEDULE I, PART I, LINE 2:

NO GRANTS WERE GIVEN WITH STIPULATIONS TO FUND USE.

10/23/2013 11:55:33 AM

SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No. 1545-0047 Open To Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number

Name of the organization SOUPMOBILE, INC 20-0154935 Part I Types of Property

	, , , ,	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash cont			
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
•	goods	X		242,422.	FMV			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
• •	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
13	contribution - Historic							
	structures							
14	Qualified conservation							
14	contribution - Other							
15	Real estate - Residential							
16								
17	Real estate - Commercial Real estate - Other							
18	Collectibles	X		584,297.	FMV			
19	Food inventory			301/237.	1117			
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►()							
26	Other ►()							
27	Other ►()							
28	Other ►()							
29	Number of Forms 8283 received		•		20			
	which the organization completed I	-orm 8283,	Part IV, Donee Acknowledg	ement	29		V	
20.0	During the year, did the organization	tion receive	by contribution any propo	rty reported in Dort I line	00 1 20 that		Yes	No
30 a				•				
	it must hold for at least three yea							v
	used for exempt purposes for the e	nure notaing	period?			30a		X
	If "Yes," describe the arrangement in		landa markara Abada manadaa	- 46				
31	Does the organization have a			=			3.7	
00 -	contributions?					31	Х	
32 a	Does the organization hire or use	e third parti	es or related organizations	s to solicit, process, or s	sell noncash			3.7
_	contributions?					32a		X
	If "Yes," describe in Part II.		a a luma ma (a) faur a faur a a f	mante fan och bet a den et e) in about 1			
33	If the organization did not report ar describe in Part II.	amount in	column (c) for a type of pro	perty for which column (a) is checked,			

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Schedule M (Form 990) (2012)

SOUPMOBILE, INC 20-0154935

Schedule M (Form 990) (2012) Page **2**

Part II Supplement

Supplemental Information. Complete this part to 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.

Schedule M (Form 990) (2012)

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

SOUPMOBILE, INC

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.

Attach to Form 990 or 990-EZ.

| Inspection | Employer identification number | 20-0154935

RETURN REVIEW PROCESS

FORM 990, PART VI, LINE 11B:

FORM 990 IS DISTRIBUTED TO EACH BOARD MEMBER PRIOR TO THE BOARD MEETING.

DURING THE MEETING, ANY QUESTIONS OR CONCERNS ARE DISCUSSED AND RESOLVED.

THE FORM 990 IS THEN APPROVED BY THE EXECUTIVE DIRECTOR.

CONFLICT OF INTEREST POLICY ENFORCEMENT AND MONITORING

FORM 990, PART VI, LINE 12C:

AT BOARD MEETINGS, THE BOARD DISCUSSES ANY ACTIVITIES THAT MIGHT HAVE

EVEN A REMOTE POSSIBILITY OF CAUSING A CONFLICT OF INTEREST.

PROCESS FOR DETERMINING COMPENSATION

FORM 990, PART VI, LINES 15A:

THE ORGANIZATION COMPARES THE SALARY OF THE EXECUTIVE DIRECTOR WITH OTHER

COMPARABLE ORGANIZATIONS TO MAKE SURE IT IS IN LINE WITH THOSE

ORGANIZATIONS. FURTHERMORE THE SOUPMOBILE ADVISORY BOARD MONITORS AND

ADVISES ON SALARY FIGURES TO VERIFY THAT THEY ARE BASED ON FAIR

COMPENSATION VALUES IN THE MARKETPLACE. TYPICALLY COMPENSATON FOR THE

EXECUTIVE DIRECTOR OF THE SOUPMOBILE AVERAGES SUBSTANTIALLY LESS THAN

OTHER COMPARABLE NON-PROFITS SO THAT THE SOUPMOBILE'S PRIMARY FINANCIAL

FOCUS IS ON ITS MISSION.

PUBLIC DISCLOSURE

FORM 990, PART VI, LINE 19:

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL

Name of the organization

SOUPMOBILE, INC

Employer identification number
20-0154935

STATEMENTS ARE AVAILABLE FOR REVIEW UPON REQUEST.

NEW SIGNIFICANT PROGRAM SERVICES

PART III, LINE 2:

WE OPENED A THRIFTSTORE TO EMPLOY AND TRAIN THE NEEDY TO BETTER EQUIP

THEM WITH JOB SKILLS.

OTHER CHANGES IN NET ASSETS

PART XI, LINE 9:

ROUNDING : \$3

ATTACHMENT 1

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

DESCRIPTION GRANTS EXPENSES REVENUE

THRIFTSTORE: EMPLOY AND TRAIN THE NEEDY IN

55,054.

TOTALS

55,054.

			ATTACHMENT 2	
FORM 990, PART VIII - INVESTMENT INCOME	<u>i</u>			
DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
MISC INTEREST INCOME	19	4.		194.
TOTALS	19	<u>14.</u>	_	194.

ATTACHMENT 3

Name of the organization	Employer identification number
SOUPMOBILE, INC	20-0154935
	VALUE CAMENIA 3 (CONTAID)

FORM 990, PART VIII - EXCLUDED CONTRIBUTIONS

DESCRIPTION	AMOUNT	
SOUPER 100	20,964.	
GOLF TOURNAMENT	23,665.	
TOTAL	44,629.	

ATTACHMENT 4

FORM 990, PART VIII - FUNDRAISING EVENTS

DESCRIPTION	GROSS INCOME	DIRECT EXPENSES	NET INCOME
SOUPER 100		7,833.	-7,833.
GOLF TOURNAMENT	3,360.	5,084.	-1,724.
TOTALS	3,360.	12,917.	-9,557.