Form **990**

Department of the Treasury Internal Revenue Service A E ... 0040 .

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation)

OMB No. 1545-0047

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

Open to Public Inspection

A	ror un	ie 2012 calendar year, or tax year beginning U	OL I, ZUIZ and	enaing U	JUN 30, 2013)
В	Check if applicat	C Name of organization			D Employer identif	ication number
	Addr	ess SOS INTERNATIONAL, INC				
	Name chan	e			27-2	624272
	Initial return		livered to street address)	Room/suite	E Telephone number	er
	Term ated	1300 IMMINGION INVENTED		·	502-	·736–6360
	Amer return	Oity, town, or post office, state, and ZIP cod			G Gross receipts \$	1,948,637.
L	Appli tion pend				H(a) Is this a group r	
	pena	F Name and address of principal officer: MLL			for affiliates?	Yes X No
		1500 ARLINGTON AVENUE,			H(b) Are all affiliates in	
			(insert no.) 4947(a)(1)	or 527	7	list. (see instructions)
		ite: > WWW.SUPPLIESOVERSEAS.O		T	H(c) Group exemption	
	art I	forganization: X Corporation Trust As Summary	ssociation Other	L Year	of formation: 2010	M State of legal domicile: KY
ø	1	Briefly describe the organization's mission or most				
Activities & Governance		ENVIRONMENTAL STEWARDSHIP				
leru	2	Check this box if the organization disco			F	i
Ĝ		Number of voting members of the governing body			3	5 5
ං ජ	4	Number of independent voting members of the go				11
<u>i</u>	5	Total number of individuals employed in calendar y				1300
ζįς	7 2	Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, co				0.
Ă		Net unrelated business taxable income from Form				0.
	 ~~	The commence seemed the comment of the comment	000 1, 11110 0 7		Prior Year	Current Year
0	8	Contributions and grants (Part VIII, line 1h)			1,639,411.	1,847,167.
n n	9	Program service revenue (Part VIII, line 2g)			0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4			20,568.	21,107.
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c	, 9c, 10c, and 11e)		26,870.	10,327.
		Total revenue - add lines 8 through 11 (must equal			1,686,849.	1,878,601.
	13	Grants and similar amounts paid (Part IX, column (0.	1,382,290.
	14	Benefits paid to or for members (Part IX, column (A			0.	0.
Ses	15	Salaries, other compensation, employee benefits (200,412.	206,013.
Expenses	16a	Professional fundraising fees (Part IX, column (A), I		10	0.	0.
Ä	17	Total fundraising expenses (Part IX, column (D), lin Other expenses (Part IX, column (A), lines 11a-11d	· · · · · · · · · · · · · · · · · · ·		1,177,469.	369,153.
		Total expenses. Add lines 13-17 (must equal Part I			1,377,881.	1,957,456.
		Revenue less expenses. Subtract line 18 from line			308,968.	-78,855 .
Net Assets or Fund Balances		The rest of the state of the st	The state of the s		ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)			1,940,925.	1,891,092.
t As	21	Total liabilities (Part X, line 26)			19,518.	22,712.
2,5	22	Net assets or fund balances. Subtract line 21 from	line 20		1,921,407.	1,868,380.
-	art II	Signature Block				
		alties of perjury, I declare that I have examined this return,				y knowledge and belief, it is
true	, correc	ct, and complete. Declaration of preparer (other than office	er) is based on all information of wh	nich preparer	has any knowledge.	
ei		Signature of officer		· · · · · · · · · · · · · · · · · · ·	Date	14-2014
Sig Hei		MELISSA MERSHON, PRESI	DENT & CEO			
	•	Type or print name and title				
	~	Print/Type preparer's name	Preparer's signature	D	ate Check	PTIN
Paid	i	WILLIAM J. JESSEE	· · · · · · · · · · · · · · · · · · ·		if self-employe	P01302666
Pre	parer		E & COMPANY PLLO	3	Firm's EIN ▶	31-1490913
Use	Only	Firm's address 304 WHITTINGTON				
		LOUISVILLE, KY 4			Phone no. (502)425-4800
		RS discuss this return with the preparer shown abo				X Yes No
2320	01 12-1	0-12 LHA For Paperwork Reduction Act Notic	e, see the separate instruction	ns.		Form 990 (2012)

Form **8868**

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 1-2013)

_	ou are filing for an Automatic 3-Month Extension, comple					▶ 🗓						
-	 If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). 											
	Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.											
	Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation											
•	ed to file Form 990-T), or an additional (not automatic) 3-mo											
	e to file any of the forms listed in Part I or Part II with the ex	-										
	nal Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details of	on the ele	ctronic filing of	this form,						
100000000000	ww.irs.gov/efile and click on e-file for Charities & Nonprofits		submit original (no conice no	odod)								
Par												
	poration required to file Form 990-T and requesting an autor											
Part I	•											
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or												
Type print	or Name of exempt organization or other filer, see instru	ctions.		Employe	r identification	number (EIN) or						
File by	SOS INTERNATIONAL, INC.				27-262							
due dat	of in Number, street, and room or suite no. If a P.O. box, so 1500 ARLINGTON AVENUE	ee instruc	tions.	Social se	curity number	(SSN)						
	return. See Instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOUISVILLE, KY 40206-3177											
Enter	Enter the Return code for the return that this application is for (file a separate application for each return)											
Appli	ation	Return	Application			Return						
Is For		Code	Is For			Code						
	990 or Form 990-EZ	01	Form 990-T (corporation)			07						
	990-BL	02	Form 1041-A			08						
	1720 (individual)	03	Form 4720			09						
	990-PF	04	Form 5227			10						
Form	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11						
Form	990-T (trust other than above)	06	Form 8870			12						
	SOS INTERNATION											
	books are in the care of \triangleright 1500 ARLINGTON	AVENU	JE - LOUISVILLE, K	Y 402	<u>06-3177</u>							
Te	ephone No. ► 502-649-9478		FAX No. ►									
	ne organization does not have an office or place of business					▶ 🔲						
• If t	nis is for a Group Return, enter the organization's four digit											
box 1	· · · · · · · · · · · · · · · · · · ·				ers the extens	ion is for.						
1	request an automatic 3-month (6 months for a corporation FEBRUARY 15, 2014 , to file the exempt				The extension							
	s for the organization's return for:											
	calendar year or											
	► X tax year beginning JUL 1, 2012	, an	d ending JUN 30, 2013		_ ·							
2	f the tax year entered in line 1 is for less than 12 months, cl	heck reaso	on: Initial return	Final retur	n 							
	f this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, er	nter the tentative tax, less any			^						
	nonrefundable credits. See instructions.			3a	\$	0.						
	f this application is for Form 990-PF, 990-T, 4720, or 6069,	-			_	^						
	estimated tax payments made. Include any prior year overp			3b	\$	0.						
	Balance due. Subtract line 3b from line 3a. Include your pa				*	0.						
	by using EFTPS (Electronic Federal Tax Payment System). Son, If you are going to make an electronic fund withdrawal w			3c	\$							

LHA

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

	rt IV Checklist of Required Schedules	42/2	<u>.</u> P	age 3
	Checklist of Required Schedules		T.v	Τ.,
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
•	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		X	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effection		 	23
•	during the tax year? If "Yes," complete Schedule C, Part II	1		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		21
Ū	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		- 11
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	"		21
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
Ü	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	•		Λ
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV			Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	10	21	
• •	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		********	
_	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	110	- 11	
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
Ť	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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	110		
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	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,	1.70		
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		
-	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	x	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	l	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
			1	

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

complete Schedule G, Part III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

18

19

20b

18

19

Form 990 (2012) SOS INTERNATIONAL, Part IV Checklist of Required Schedules (continued)

21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, continum (A), line 17 if "Yes," complete Schedule (Part I and if) 22 X X X X X X X X X				Yes	No
22 Did the organization report more than \$5.000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2 /f I*Ves, "complete Schoelube I. Parts I and III and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schoelube J. 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the isal day of the year, that was issued after December 31, 2002? If "Yes," reserver fines 24b through 24d and complete Schoelube I. If "No, go to line 25 Schoelube I. If "Yes, complete Schoelube I. If "Yes, complete Schoelube I. If "Yes, to line 25 Schoelube I. If "Yes, complete Schoelube I. If "Yes, line 25 Schoel	21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
column (A), line 27 if "Yes," complete Schedule I, Parts I and III 22 X 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? if "Yes," complete Schedule I and the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I, in the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24a X 25b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 25c Did the organization amentain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 25d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 25d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction area to any of the organization with a disqualified person in a prior year, and that the transaction have the tax in expension of the complete Schedule L, Part II 25b X 26a Was a loan to or by a current or former officer, director, trustee, key employee, bighest compensated employee, or disqualified person outstanding as of the end of the organization is tax year? If "Yes," complete Schedule L, Part II 27d Was a loan to or by a current or former officer, director, trustee, key employee, substantial contributor or employee thereof, a grant assectance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant assectance to an officer, director, trustee, or director, trustee,			21		X
and former officers, directors, trustees, key employees, and highest compensated employees? # "Yes," complete Schedule J. 23	22	· · · · · · · · · · · · · · · · · · ·	22		Х
Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 5. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 6. Did the organization maintain an escrow account other than a refunding escrow at any time during the year of the organization maintain an escrow account other than a refunding escrow at any time during the year of the organization at as an "on behalf of" issuer for bonds outstanding at any time during the year of "Yes," 24d 25a Section 601(e)(3) and 501(e)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule J. Part I 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 with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction ware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction and the transaction ware formation organization related to a prior officer, director, trustee, key employee, highest compensated employee, or disqualified person unit prior officer, director, trustee, key employee, if If yes, "complete Schedul	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No"; go to line 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
sast day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 b) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d) Did the organization act as an "on behalf of" issuer for bonds outstanding as of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization prior Forms 990 or 990-E27 if "yes," complete Schedule person outstanding as of the end of the organization risk year? If "yes," complete Schedule L, Part II and the person outstanding as of the end of the organization with one of the following parties (see Schedule L, Part IV instructions for applicable fining hresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "yes," complete Schedule L, Part IV A nentity of which a current or former officer, director, trustee, or key employee? If "yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "yes," complete Schedule L, Part IV Did the organization liquidate, terminate, or dissolve and cas		Schedule J	23		Х
Schedule K. If "No", por to line 25 b) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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? d) Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(p)(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 25b 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-E27 If "Yes," complete Schedule L, Part II 26b Was a ban to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 28 Was the organization and to fine organization and exceptions; 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 Schedule L, Part IV b) A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule M. 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Did the organization inquidate, terminate, or dissolve and cease operations? 18 Yes," complete Schedule M. Part I III	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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? d) Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d Did the organization act as an 'on behalf of' issuer for bonds outstanding as any time during the year? 24d Did 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 II 25b X Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part III 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 28a X Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV 28a X A current or former officer, director, trustee, or key employee for a family member thereof) was an officer, director, trustee, or key employee for a family member thereof) was an officer, director, trustee, or key employee for a family member thereof) was an officer, director, trustee, or day employee for a family member thereof) was an officer, director, trustee, or day employee for a family mem		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
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? 24d 25e 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? 25 Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? 25 Is the organization aware that it engaged in an excess benefit transaction with a disqualified person of the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I 26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 27 Did the organization approved a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 29 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 Chart of the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part II 29 Did the organization liquidate, terminate, or dissolve and cease operations? 29 If "Yes," complete Schedule N, Part I 29 Did the organization liquidate, terminate, or		Schedule K. If "No", go to line 25	24a		Х
any tax-exempt bonds? d Did the organization act as an 'on behalf of" issuer for bonds outstanding at any time during the year? 25a 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 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 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26b X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee hiereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule II, Part IV, III, III, or IV, and Part V, III or IV,	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
d bit the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 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 25a X 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 II 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 A nentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 A nentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II, Part IV 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II, III, o	С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
25a Section 601(c)(3) and 601(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 25b		any tax-exempt bonds?	24c		
disqualified person during the year? If "Yes," complete Schedule L, Part I	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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-E27 If "Yes," complete Schedule L, Part II 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 29 Did the organization in eceive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Use the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 31 X 32 Was the organization load, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 Did the organization load, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 X 34 Was	25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant assistance to an officer, director, trustee, key employee, on the following parties (see Schedule L, Part IV 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 A current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Sc		disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 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 Schedule L, Part IV 28 X 29 X 29 X 20 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 30 Did the organization liquidate, terminate, or dissolve and cease operations? 16 "Yes," complete Schedule N, Part I 31 X 32 X 33 X 34 X 35 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 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 36 Section 501(c)(3) organizations. 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, Iine 2 37 Section 501(c)(b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X b A family member of a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule II, Part II 31 X 30 Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule II, Part II, III, or IV, and Part V, Iine 1 32 X 31 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 32 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 34 X 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes,		that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26			25b		X
Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III winstructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X C An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X 29b Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30b Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 X 30b Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 31 X 32b Did the organization sell, exchange, dispose of, or transfer more than \$25% of its net assets? If "Yes," complete Schedule N, Part II 32 X 32b 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 32b Did 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 32b Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organ	26				
contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 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 Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 Did the organization on 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 II 31 A X 32 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 35 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, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exemp			26		Х
of any of these persons? If "Yes," complete Schedule L, Part III 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, clirector, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 X b A family member of a current or former officer, clirector, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 X c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 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 II, III, or IV, and Part V, Iine 1 32 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 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, Iine 2 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, Iine 2 37 Did the organization comp	27				
Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions): 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 Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28b X 28b X 28c X 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 Schedule N, Part II 32 Was 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 32 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iline 1 33 A X 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iline 2 35 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, Iline 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Pa					
instructions for applicable filing thresholds, conditions, and exceptions): 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 Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 29 Lid the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 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 32 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 33 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 34 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, Iine 2 35 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, Iine 2 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, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to			27		X
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28b X 28b X 28b X 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 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 32 X 33 X 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, Iine 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 35 Section 501(b)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 36 Section 501(b)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 36 X 37 X 38 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 purpose	28				
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or inclinect owner? If "Yes," complete Schedule L, Part IV. 28b X 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 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 X 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 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 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 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for					
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 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 Did 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 X 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 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 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 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. lines 11b and 19?			28a		
director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part III, III, or IV, and Part V, Iine 1 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 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, Iine 2 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, Iine 2 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			28b		<u> X</u>
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 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 X 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 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 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 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	С				
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 X 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 X 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 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 35a X 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 X 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 Ines 1 10 and 19?					<u>X</u>
contributions? If "Yes," complete Schedule M. Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 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. Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part III, III, or IV, and Part V, line 1 34			29	Х	
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 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 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 related organization? If "Yes," complete Schedule R, Part V, line 2 Told 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 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	30	•			
If "Yes," complete Schedule N, Part I 31			30		<u>X</u>
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 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 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 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 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 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 lines 11b and 19?	31				
Schedule N, Part II 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 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 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 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 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 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 as A X X X X X X X X X X X X X X X X X X	00		31		<u> </u>
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 X X 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 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 35b 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 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 X X Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	32	·			v
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 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 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 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 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 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	22		32		
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 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 35b	33				v
Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 35b	3/		33		
Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	U -T		24	İ	v
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 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	35a	Did the organization have a controlled entity within the meaning of section 512/b/(13)2			
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 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			SSa		
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 X 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	~		35h		
If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	36		330		
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 X 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			36		x
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		- 00		
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			37		x
	38	I	~	-	
			38	x	

SOS	INTERNATIONAL,	INC.
_		•
	gard	SOS INTERNATIONAL, egarding Other IRS Filings ar

	Check if Schedule O contains a response to any question in this Part V					X
		1		, postorono	Yes	No
1a		1a	2			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	<u> </u>	4		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and r	•				
	(gambling) winnings to prize winners?	 I	1	1c	<u> </u>	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		1 1			
	filed for the calendar year ending with or within the year covered by this return	2a] 11	- p		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions				1	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	X	177
				3b		X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other					v
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X
D	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					v
5a	• • • • • • • • • • • • • • • • • • • •			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction flor form 9996 T2			5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the state of the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross recei			5c		
va	any contributions that were not tax deductible as charitable contributions?	_		6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contribute			Ua		- 22
~	were not tax deductible?	.10113 C	n gires	6b		
7	Organizations that may receive deductible contributions under section 170(c).		•••••••••••••••••••••••••••••••••••••••			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices ı	provided to the payor?	7a	0000000000	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					
	to file Form 8282?	· · · · · · · · · · · · · · · · · · ·		7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontra	ot?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control			7f		ļ
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		•	7g	 	ļ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Di		- · ·			
^	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any-tin	ne during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?					
a	Did the organization make a distribution to a donor, donor advisor, or related person?			9a 9b		
10	Section 501(c)(7) organizations. Enter:			ap		
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10417	?	12a		
. , ,b,	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
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	ı				
	organization is licensed to issue qualified health plans	13b				
		13c				
	• • • • • • • • • • • • • • • • • • • •			14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	<i>∪</i>		14b	990 (0040
				Form	uui /	2012

Form 990 (2012)

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

	Check if Schedule O contains a response to any question in this Part VI						X
Sec	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		5			
	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.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with	any other				
	officer, director, trustee, or key employee?			. [2		X
3	Did the organization delegate control over management duties customarily performed by or under th	e dired	t supervision	Γ			
	of officers, directors, or trustees, or key employees to a management company or other person?			.	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	. Г	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?	******	. Г	5		X
6	Did the organization have members or stockholders?			. Г	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or				
	more members of the governing body?			.	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s			Γ			
	persons other than the governing body?				7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by th	e following:				
а	The governing body?			. [8a	Х	
b	Each committee with authority to act on behalf of the governing body?				8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			.	9		X
Sec ⁻	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)				
						Yes	No
10a	Did the organization have local chapters, branches, or affiliates?				10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	s, affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		• • • • • • • • • • • • • • • • • • • •	_1	ю		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ befo	e filing the form?	1	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		• • • • • • • • • • • • • • • • • • • •	1	2a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	licts?	1	2b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes	es," de	escribe				
	in Schedule O how this was done			1	2c	X	
13	Did the organization have a written whistleblower policy?			Ŀ	13	X	
14	Did the organization have a written document retention and destruction policy?			Ŀ	14	X	************
15	Did the process for determining compensation of the following persons include a review and approva	l by in	dependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			8			
	The organization's CEO, Executive Director, or top management official			1	5a	X	
b	Other officers or key employees of the organization			1	5b		X
	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	ient w	ith a				
	taxable entity during the year?			1	6a		X
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat		•				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ						
	exempt status with respect to such arrangements?			1	6b		
	ion C. Disclosure						
	List the states with which a copy of this Form 990 is required to be filed ►KY, IN						
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Section	on 501(c)(3)s only)	ava	ailable	€	
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website X Another's website X Upon request Cher (explain)		•				
	Describe in Schedule O whether (and if so, how), the organization made its governing documents, cor	nflict o	f interest policy, a	nd f	inanc	ial	
	statements available to the public during the tax year.						
	State the name, physical address, and telephone number of the person who possesses the books an SOS INTERNATIONAL, INCC $-\ 502-649-9478$	d reco	rds of the organiza	ation	n: 🟲		
	1500 ARLINGTON AVENUE, LOUISVILLE, KY 40206-3177		***************************************				

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.

(A)	(B)	organization compensat						(D)	(E)	(F)
Name and Title	Average hours per week	kod	Position (do not check more than one box, unless person is both an officer and a director/trustee)					Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) THOMAS REICHARD, MD	2.00									
CHAIR		X		X				0.	0.	0
(2) MARK CARTER	0.50									
VICE-CHAIR		Х		X				0.	0.	0
(3) LARRY CASHEN	2.00									
SECRETARY		X		X				0.	0.	0
(4) SUE DAVIS	0.50									
DIRECTOR		X						0.	0.	0
(5) STEVE DIAMOND	0.50									
DIRECTOR		Х						0.	0.	0
(6) ALLEN MONTGOMERY	40.00									
PRESIDENT & CEO				X				48,657.	0	
(7) KEVIN ORR	40.00									
PRESIDENT & CEO				Х				10,298.	0.	0 .
							•			
	-									

Page 8

Pai	TVII Section A. Officers, Directors, Trus	tees, Key Em	ploy	rees	, an	d Hi	ghe	st C	ompensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	tee or director (spo)	not c	(C) Position check more ess person nd a directo		than	one h an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	es (continued) (E) Reportab compensa from relat organizatio (W-2/1099-N	tion ed ons	com fr org	(F) stimate nount other pensa rom the anizat d relate	of ition e ion ed
c	Sub-total Total from continuation sheets to Part VI	I, Section A					>		58,955. 0.		0.			0.
3 4 5	Total (add lines 1b and 1c) Total number of individuals (including but n compensation from the organization Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for some for any individual listed on line 1a, is the sum and related organizations greater than \$150 did any person listed on line 1a receive or a rendered to the organization? If "Yes," complete Schedule J for some fine 1 and the sum of the su	ot limited to the director, or trust och individual of the open of	e co	e, ke	y en ensa ete S	nplo ation Sche	yee, and edule	or h	nighest compensated er ner compensation from t or such individual ed organization or indivi	mployee on the organization dual for service		3 4	Yes	No X
1	Complete this table for your five highest contine organization. Report compensation for (A) Name and business	the calendar ye	ear e		ng w					ear.		ation fr (C Compen)	
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz		ot lin	nited	d to	thos		ted	above) who received m	ore than				

20000000		Check if Schedule O cont	rains a respons	se to any question	in this Part VIII			
		Official In Confedure C Confe	airis a respons	se to any question	(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	1 a	Federated campaigns	1a		_			
Gra	Ł	Membership dues	1b					
ls, (c	Fundraising events	1c		_			
a	c	d Related organizations	1d					
J.S.	e	Government grants (contribut	ions) 1e					
tion s	f	All other contributions, gifts, gran	ts, and					
t pr		similar amounts not included abo	ve 1f 1	,847,167.	,			
d d	ç	Noncash contributions included in lines	1a-1f: \$ 1	,503,722.]			
မှု ငိ	h	Total. Add lines 1a-1f			1,847,167.			
				Business Code				
ø,	2 a	1						
ž	b							
Program Service Revenue	c			-				
E S	d		······································					
P	٥							
P	f	All other program service reve	mua					
		Total. Add lines 2a-2f		***************************************				
	3	Investment income (including						
	Ū	other similar amounts)		_	22,420.			22,420.
	4	Income from investment of tax			22,120.			22/120.
	5	Royalties	•	•				
	Ð	noyalites						
	•		(i) Real 4,000	(ii) Personal	-			
		Gross rents	4,000		-			
		Less: rental expenses	4,000		-			
		Rental income or (loss)	4,000		4 000	4 000		
					4,000.	4,000.		
	7 a	Gross amount from sales of	(i) Securities		_			
		assets other than inventory	68,723	•	-			
	b	Less: cost or other basis	70 000					
		and sales expenses	70,036	•	-			
		Gain or (loss)						
	d	Net gain or (loss)		<u></u>	-1,313.			-1,313.
e l	8 a	Gross income from fundraising	g events (not					
e l		including \$	of					
ě		contributions reported on line	1c). See					
Other Reven		Part IV, line 18		a				
抙	b	Less: direct expenses		b]			
	С	Net income or (loss) from fund	Iraising events	>				
	9 a	Gross income from gaming ac	tivities. See					
		Part IV, line 19		а				
	b	Less: direct expenses		b				
	С	Net income or (loss) from gam	ing activities				, , , , , , , , , , , , , , , , , , , ,	
	10 a	Gross sales of inventory, less	returns					
		and allowances		a 635.				
	b	Less: cost of goods sold		о.				
		Net income or (loss) from sales			635.	635.		******************
		Miscellaneous Revenue		Business Code	000000000000000000000000000000000000000			
	11 a	MATOO TATOONE		900099	5,692.	5,692.		
	b				,	,		
l	~	:						
l	ų	All other revenue						
	u _	Total. Add lines 11a-11d			5,692.			
	12	Total revenue. See instructions.			1,878,601.	10,327.	0.	21,107.
00000	15-	i diai idadiiadi ooc ilistiuctiolis.			-, -, -, -, -, -, -, -, -, -, -, -, -, -	T 7 7 2 2 7 8		21/10/0

Form 990 (2012) SOS INTERNATION Part IX Statement of Functional Expenses

Check if Schedule Contains a response to any Question in the Part X Programment and mines 60, 78, 89, 80, and 10th of Part VIII.	Sect	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).											
Total expenses Program service Program ser													
Comparization in the United States. See Part IV, line 22 Carants and other assistance to individuals in the United States. See Part IV, line 22 Carants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 1,382,290 . 1,382,290 .			(A) Total expenses	Program service	Management and	Fundraising							
2 Grants and other assistance to Individuals in the United States. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and Individuals outside the United States. See Part IV, line 15 and 15 4 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of united deal above, to disqualified persons (as defined under section 4858/ft(1)) and persons disaction at united above, to disqualified persons (as defined under section 4858/ft(1)) and persons disactioned and section 4858/ft(1) and persons disactioned in the deal above, to disqualified persons (as defined under section 4858/ft(1)) and persons disactioned assistance to the section 401(k) and 403(k) simpleyer contributions) 9 Other employee benefits 1, 382, 290. 1, 382, 290. 10, 698. 5, 035. 62, 932. 47, 199. 10, 698. 62, 932.	1	Grants and other assistance to governments and											
the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 15 Benefits pad to or for members Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of included above, to disqualified persons described in section 4958(n/13) and persons described in section 49		organizations in the United States. See Part IV, line 21											
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of intimided above, to disqualified persons (as defined under section 4985(ff(1)) and persons described in section 4985(ff(1)) and 408(9) amployer contributions (include section 4916(f) and 408(9) amployer contributions) 9 Other employee benefits 10 Peryot taxes 11 Fees for services (inn-imployees): 12 All Information Fees (inn-imployees): 13 Management 14 Legal (inner management flee) 15 Caccounting (inner flee) (inner fl	2	Grants and other assistance to individuals in											
organizations, and individuals outside the United States. See Part IV, line 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 458(f)(f)) and persons described in section 458(f)(f)(f) and persons described in section 401(f) and 403(f) employer certification for footness and contributions (include section 401(f) and 403(f) employer certification for footness and contributions (include section 401(f) and 403(f) employer certification footness and footness and footness footness and footness footn		the United States. See Part IV, line 22											
United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustases, and key employees Compensation of current officers, directors, trustases, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f(1)) and persons described in section 4958(f(1)) and persons	3	Grants and other assistance to governments,											
### A panelist paid to or for members													
Compensation of current officers, directors, trustees, and key employees		United States. See Part IV, lines 15 and 16	1,382,290.	1,382,290.									
Compensation not included above, to disqualified persons (as defined under section 4958(h(f)) and persons described in section 4958(h(f)) and persons de	4												
6 Compensation not included above, to disqualified persons (as defined under section 4958(r)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 12,882, 9,661, 2,190, 1,031. 11 Fees for services (non-employees): 10 All Management 11 Legal 12,882, 9,661, 2,190, 1,031. 11 Fees for services (non-employees): 12 Management 15 Legal 16 Accounting 17 Investment management fees 18 Column (A) amount, list line 11g expenses on Sch 0) 19 Avervitaing and promotion 10 Active services (Non-employees): 10 Column (A) amount, list line 11g expenses on Sch 0) 10 Coupancy 11 Investment tees 17,833, 5,637, 1,454, 742. 18 Royalties 19 Coupancy 10 Coupancy 11 Investment technology 15,826, 12,880, 1,768, 1,178. 19 Apyments of travel or entertainment expenses for any federal, state, or local public officials for any federal, state, or local public officials or line state of the state	5		50 000	45.100									
persons (as defined under section 4986(N(1)) and persons described in section 498(c)(3)(8) 7 Other selarines and weges 8 Peasien plan accruals and contributions (include section 401(k) and 403(0) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management b Legal c Accounting 11,050. 11,050. 11,050. 11,050. 11,050. 11,050. 6 Other (mile 1) a mount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schot 0) Advertising and permotion 7,833. 5,637. 1,454. 742. 10 Flore expenses 10 Coupancy 44,734. 40,260. 27,276. 17 Tave 18,037. 8,487. 8,			62,932.	47,199.	10,698.	5,035.							
persons described in section 4988(c)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Chris employee benefits 10 Payroll taxes 11 Fees for services (non-employees): 11 Fees for services (non-employees): 12 Management 15 Legal 16 Caccounting 1 Lobbying 17 Investment management fees 19 Other. (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 17 Advertising and promotion 18 Office expenses 19 Other. (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 19 Advertising and promotion 19 Office expenses 10 Payront to affiliates 10 Cocupancy 11 (10 Cocupancy 12 Advertising and promotion 19 Office expenses 10 Cocupancy 10 Cocupancy 11 (10 Cocupancy 12 (10 Cocupancy 13 (10 Cocupancy 14 (17 (18 (18 (18 (18 (18 (18 (18 (18 (18 (18	6												
106,096. 79,572. 18,037. 8,487.													
8 Pension plan accruals and contributions (include section 40 ((k) and 40(k) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): 11 Fees for services (non-employees): 12 Management 15 Legal 17 C Accounting 18 Lobbying 19 Professional fundraising services. See Part IV, line 17 Investment management fees 19 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, its line 11g expenses on Sch O.) 12 Advertising and promotion 13 Office expenses 17,833, 5,637, 1,454, 742, 16 Cocupancy 14 Information technology 15 Royalties 16 Occupancy 16 Coupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 18 Conferences, conventions, and meetings interest 29 Depreciation, depletion, and amortization 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. lemitae expenses on Scholetie O.) 25 Total functional expenses son Scholetie O. 26 Unit similar vaced 50 % of line 25, column (A) amount, its line 24e expenses on Scholetie O.) 26 Unit created 10 to			106.006	70 - 70	10 00=								
section 401(k) and 403(b) employer contributions) Other employee benefits 12,882. 9,661. 2,190. 1,031. Payroll taxes 12,882. 9,661. 2,190. 1,031. Pees for services (non-employees): a Management b Legal c Accounting 11,050. 11,050. d Lobbying e Professional fundraising services. See Part IV, line 17 for Investment management fees 0 Other, (Iffe 11g amount sexceets 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) Office expenses 7,833. 5,637. 1,454. 742. Information technology 2,746. 274. 2,060. 412. Royalites Occupancy 44,734. 40,260. 2,237. 2,237. Payrents of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Insurance Depreciation, depletion, and amortization Jordina state, or local public officials Depreciation, depletion, and amortization Jordina state, or local public officials Depreciation, depletion, and amortization Jordina state, or local public officials Depreciation, depletion, and amortization Jordina state, or local public officials Depreciation, depletion, and amortization Jordina state, or local public officials Depreciation, depletion, and amortization Jordina state, or local public officials Depreciation, depletion, and amortization Jordina state, or local public officials Depreciation, depletion, and amortization Jordina state, or local public officials Depreciation, depletion, and amortization Jordina state, or local public officials Depreciation, depletion, and amortization Jordina state, or local public officials Depreciation, depletion, and amortization Jordina state, or local public officials Depreciation, depletion, and meetings Jordina state, or local public officials Depreciation, depletion, and amortization amort		——————————————————————————————————————	106,096.	79,572.	18,037.	8,487.							
10 Payroll taxes	8	•											
11 Fees for services (non-employees): a Management b Legal c Accounting d Lobbying Professional fundraising services. See Part IV, line 17 f Investment management fees g Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 4 Advertising and promotion 12 Advertising and promotion 13 Office expenses 7,833, 5,637, 1,454, 742, 14 Information technology 2,746, 274, 2,060, 412, 15 Royattles 16 Occupancy 44,734, 40,260, 2,237, 2,237, 17 Travel 15,826, 12,880, 1,768, 1,178, 18 Payments of travel or entertainment expenses for any fedderal, state, or local public fricials 19 Conferences, conventions, and meetings 11 Interest 12 Payments to affiliates 20 Interest 12 Payments to affiliates 21 Percentation, depletion, and amortization 16,652, 14,986, 833, 833, 833, 833, 833, 833, 833, 8	9	Other employee benefits											
a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 13 Office expenses	10	Payroll taxes	12,882.	9,661.	2,190.	1,031.							
b Legal													
the control of the c	а	Management				-							
d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 2 Advertising and promotion 3 Office expenses 7,833. 5,637. 1,454. 742. 14 Information technology 7,833. 5,637. 1,454. 742. 15 Royalties 8 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 19 Payments to affiliates 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schoole (C) a SUPPLIES AND EQUIPMENT b LICENSES 1 1,146. 573. 573. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Chest here	b	Legal											
e Professional fundraising services. See Part IV, line 17 f Investment management fees. g Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 2 Advertising and promotion 3 Office expenses. 3 7, 833. 5, 637. 1, 454. 742. 3 Information technology 2, 746. 274. 2, 060. 412. 3 Royalties 4 Royalties 5 Royalties 6 Occupancy 44,734. 40,260. 2,237. 2,237. 7 Travel 15,826. 12,880. 1,768. 1,178. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 29 Experication, depletion, and amortization 16,652. 14,986. 833. 833. 22 Insurance 9,519. 5,235. 4,284. 4 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses on Schedule 0.) a SUPPLIES AND EQUIPMENT 166,618. 166,618. 573. 573. c d d E All other expenses 1 Total functional expenses. Add lines 1 through 24e 24e All other expenses 25 Total functional expenses in common (B) joint costs from a combined educational campalgn and fundraising solicitation. Check here	C	Accounting	11,050.		11,050.								
f Investment management fees g Other. (If fline 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 2 Advertising and promotion 3 Office expenses	d												
g Other. (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 2 Advertising and promotion 3 Office expenses 7,833. 5,637. 1,454. 742. 14 Information technology 2,746. 274. 2,060. 412. 15 Royalties Cocupancy 44,734. 40,260. 2,237. 2,237. 17 Travel 15,826. 12,880. 1,768. 1,178. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 16,652. 14,986. 833. 833. 23 Insurance 9,519. 5,235. 4,284. 24 Other expenses litemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses on Schedule 0.) a SUPPLIES AND EQUIPMENT b LICENSES 1,146. 573. 573. 1,957,456. 1,820,605. 75,541. 61,310. Company of the complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here Ifollowing SOP 98-2 (ASC 956-720)	е												
Column (A) amount, list line 11g expenses on Sch 0.) 93,029. 37,343. 16,259. 39,427.	f	——————————————————————————————————————											
12 Advertising and promotion 13 Office expenses. 7,833. 5,637. 1,454. 742. 14 Information technology 2,746. 274. 2,060. 412. 15 Royalties 16 Occupancy 44,734. 40,260. 2,237. 2,237. 17 Travel 15,826. 12,880. 1,768. 1,178. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 9,519. 5,235. 4,284. 23 Insurance 9,519. 5,235. 4,284. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0. 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundralsing solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)	g		02 020	27 242	16 050	20 40 7							
13 Office expenses			93,029.	37,343.	16,259.	39,427.							
14 Information technology 2,746. 274. 2,060. 412. 15 Royalties			7 022	F (27	1 454	740							
15 Royalties 16 Occupancy													
16 Occupancy 44,734. 40,260. 2,237. 2,237. 17 Travel 15,826. 12,880. 1,768. 1,178. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 16,652. 14,986. 833. 833. 1833. 23 Insurance 9,519. 5,235. 4,284. 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a SUPPLIES AND EQUIPMENT 166,618. 166,618. 573. 573. 573. 573. 573. 573. 573. 573			2,740.	2/4.	2,060.	412.							
17 Travel			11 721	10 260	2 227	2 227							
18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings													
for any federal, state, or local public officials Conferences, conventions, and meetings			13,020.	12,000.	1,700.	1,1/0.							
19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 25 SUPPLIES AND EQUIPMENT 26 All other expenses 27 Total functional expenses. Add lines 1 through 24e 28 All other expenses 29 Total functional expenses. Add lines 1 through 24e 29 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	18	·											
20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses on Schedule 0.) 25 SUPPLIES AND EQUIPMENT 26 LICENSES 27 Total functional expenses. Add lines 1 through 24e 28 All other expenses 29 Total functional expenses. Add lines 1 through 24e 29 All other expenses 20 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 16 16,652. 14,986. 833. 833. 833. 833. 833. 833. 833. 8	10												
21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 25 SUPPLIES AND EQUIPMENT 26 LICENSES 27 Total functional expenses. Add lines 1 through 24e 28 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 166,618. 16													
22 Depreciation, depletion, and amortization													
23 Insurance 9,519. 5,235. 4,284. 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a SUPPLIES AND EQUIPMENT b LICENSES 1,146. 573. 573. c d		•	16,652.	14,986.	833.	833.							
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a SUPPLIES AND EQUIPMENT b LICENSES 1,146. 573. 573. c d e All other expenses Total functional expenses. Add lines 1 through 24e 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 Lift following SOP 98-2 (ASC 958-720)			9,519.	5,235									
above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a SUPPLIES AND EQUIPMENT b LICENSES 1,146. 573. 573. C d e All other expenses Total functional expenses. Add lines 1 through 24e 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)			-,	- 7,200	2,2018								
amount, list line 24e expenses on Schedule 0.) a SUPPLIES AND EQUIPMENT b LICENSES 1,146. 573. 573. c d e All other expenses Total functional expenses. Add lines 1 through 24e 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)	1	above. (List miscellaneous expenses in line 24e. If line											
a SUPPLIES AND EQUIPMENT b LICENSES 1,146. 573. 573. c d e All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)		amount, list line 24e expenses on Schedule O.)											
b LICENSES 1,146. 573. 573. c d e All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)	а		166,618.	166,618.									
d e All other expenses 25 Total functional expenses. Add lines 1 through 24e 1,957,456. 1,820,605. 75,541. 61,310. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	b	LICENSES	1,146.		573.								
e All other expenses 25 Total functional expenses. Add lines 1 through 24e 1,957,456. 1,820,605. 75,541. 61,310. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	c												
Total functional expenses. Add lines 1 through 24e 1,957,456. 1,820,605. 75,541. 61,310. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	d												
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	е	•											
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	25	Total functional expenses. Add lines 1 through 24e	1,957,456.	1,820,605.	75,541.	61,310.							
educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	26	Joint costs. Complete this line only if the organization											
Check here ▶ if following SOP 98-2 (ASC 958-720)													
		educational campaign and fundraising solicitation.											
		Check here if following SOP 98-2 (ASC 958-720)				F 000 (0046)							

Form 990 (2012)
Part X Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response to an	y ques	tion in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			105,102.	1	101,070.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			42,109.	3	11,492.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensations	ated er	nployees. Complete			
		Part II of Schedule L				5	***************************************
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sec	tion 50	1(c)(9) voluntary			
		employees' beneficiary organizations (see instr).		6			
Assets	7	Notes and loans receivable, net		7			
Ass	8	Inventories for sale or use			1,173,755.	8	1,126,394.
-	9			***************************************	13,146.	9	11,621.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	63,872.			
	b				35,600.	10c	31,660.
	11	Investments - publicly traded securities			571,213.	11	608,855.
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal	1,940,925.	16	1,891,092.		
	17	Accounts payable and accrued expenses	17,518.	17	1,891,092. 22,712.		
	18	Grants payable		18			
	19	Deferred revenue			2,000.	19	
	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability. Complete I				21	
Liabilities	22	Loans and other payables to current and former	officer	s, directors, trustees,			
ia dei		key employees, highest compensated employee		•			
_		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, page					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of			
	20	Schedule D			10 510	25	22 712
	26	Total liabilities. Add lines 17 through 25		Part North Control of the Control of	19,518.	26	22,712.
/ 0		Organizations that follow SFAS 117 (ASC 958)		k here 🕨 🔛 and			
ĕ	27	complete lines 27 through 29, and lines 33 and				~-	
lan	27	Unrestricted net assets Temporarily restricted net assets				27	
Be	28 29					28	***************************************
nuc	29	Organizations that do not follow SFAS 117 (A)) check have NY		29	
r F							
ts o	30			0.	20	Λ	
sse	31	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or eq		0.	30	0.	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated inc			1,921,407.	31	1,868,380.
Š	33	Total net assets or fund balances			1,921,407.	33	1,868,380.
	34	Total liabilities and net assets/fund balances			1,940,925.	33	1,891,092.
	U4	Total liabilities and het assets/fulld balances			1,770,723.	54	1,091,092.

Forn	n 990 (2012) SOS INTERNATIONAL, INC.	27-26	24272	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,878	3,601.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,95	7,456.
3	Revenue less expenses. Subtract line 2 from line 1	3	-78	8,855.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,92	L,407.
5	Net unrealized gains (losses) on investments	5	29	9,583.
6	Donated services and use of facilities	6		
7	Investment expenses	7		3,755.
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	1,868	3,380.
Pa	rt XIII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			🔲
				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			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l 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?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,		
	consolidated basis, or both:			
	X 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			
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	gle Audit		
	Act and OMB Circular A-133?		. 3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	**********	. 3b	

Form **990** (2012)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public Inspection

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.

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

Name of the organization

Employer identification number

			TERNATIONAL,						2	7-262	4272	2
Part I	Reason	for Public Cha	rity Status (All organi	izations m	ust comple	ete this pa	art.) See in:	structions	•			
The organ	nization is not	a private foundation	because it is: (For lines	1 through	11, check	only one	box.)					
1 🖳	A church, c	onvention of churche	es, or association of chu	rches des	cribed in s	ection 17	70(b)(1)(A)	(i).				
2 🖳	A school de	scribed in section 1	70(b)(1)(A)(ii). (Attach S	chedule E	.)							
3 🖳	A hospital o	r a cooperative hosp	oital service organization	described	d in sectio	n 170(b)(1	1)(A)(iii).					
4	A medical re	esearch organization	operated in conjunction	n with a ho	spital desc	cribed in s	section 17	0(b)(1)(A)	(iii). Enter	the hospita	al's nai	me,
***************************************	city, and sta											
5 🔲	section 17	0(b)(1)(A)(iv). (Comp	· ·					nmental ur	nit describ	oed in		
6 L X			nent or governmental un									
7 <u>X</u>			ceives a substantial part	of its sup	port from a	a governn	nental unit	or from th	e general	public des	cribed	in
• 🗀		(b)(1)(A)(vi). (Comple	,	(0 1-1	D							
8 <u> </u>			section 170(b)(1)(A)(vi).									
9			ceives: (1) more than 33									
			nctions - subject to cert									
				tion 511 t	ax) from bi	usinesses	acquired I	by the org	anization	after June	30, 19	75.
10			•		. 15	0						
11												
	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purpose more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the bedscribes the type of supporting organization and complete lines 11e through 11h. a						or					
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box describes the type of supporting organization and complete lines 11e through 11h. a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally						x tnat					
			***************************************		_		d	- T.	III NI-		11	
			= =					u iyi	oe III - Noi	n-tunctional	ily inte	grated
<u> </u>												
f									9(a)(1) 01	Section 50s	9(a)(2).	
-												
g										***************************************		. L
3			directly controls, either a								Yes	No
			upported organization?								163	140
			n described in (i) above?								1	
			person described in (i)								1	
h			about the supported or				***************************************	• • • • • • • • • • • • • • • • • • • •		[119(111)	!]	<u></u>
			about the supported of	gamzanon	1(0).							
	of supported anization	(ii) EIN	(described on lines 1-9 above or IRC section	in col. (i) li	organization isted in your document?	organiza	ou notify the ition in col. ir support?	(vi) la organizati (i) organiz U.S	on in col. zed in the	(vii) Amount sup	t of mo	netary
			(see instructions))	Yes	No	Yes	No	Yes	No			
-												
												-
												-
	······································									······································		
Total							1					

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.)

Se	ction A. Public Support						
Cale	endar 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.")			2780191.	1639526.	1998857.	6418574.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3			2780191.	1639526.	1998857.	6418574.
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)						
	Public support. Subtract line 5 from line 4.						<u>6418574.</u>
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010 2780191.	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4			2/80191.	1639526.	1998857.	6418574.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties			25 002	1 202	AC 576	72 041
	and income from similar sources			25,983.	1,282.	46,576.	73,841.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on		***************************************				
10	Other income. Do not include gain						
	or loss from the sale of capital			20 262	26 755	10 607	E7 004
44	assets (Explain in Part IV.) Total support. Add lines 7 through 10			20,302.	26,755.	10,007.	6550210
	Gross receipts from related activities,	oto (oco instructio					0330219.
	First five years. If the Form 990 is for					12	W
	organization, check this box and stop				•	. , . ,	> X
Sec	tion C. Computation of Publ	ic Support Per	rcentage			***************************************	P A
	Public support percentage for 2012 (olumn (fl)		14	%
	Public support percentage from 2011					15	
	33 1/3% support test - 2012. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2011. If the c						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the						
	organization meets the "facts-and-circ						
	Private foundation. If the organizatio						
						lule A (Form 990	

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.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that			***************************************			
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to the organization without charge						
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						
alendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(-) 0010	40 T-1-1
9 Amounts from line 6	(u) 2000	(6) 2009	(0) 2010	(0) 2011	(e) 2012	(f) Total
Oa Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income		- 4				
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
3 Total support. (Add lines 9, 10c, 11, and 12.)						
4 First five years. If the Form 990 is for the	ne organization's	s first, second, third	, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiza	ation,
check this box and stop here				-		
ection C. Computation of Public				4		
5 Public support percentage for 2012 (line	e 8, column (f) di	ivided by line 13, co	olumn (f))		15	Ç
6 Public support percentage from 2011 S					16	
ection D. Computation of Invest						
7 Investment income percentage for 2012	2 (line 10c, colun	nn (f) divided by line	13, column (f))		17	(
8 Investment income percentage from 20					18	
9a 33 1/3% support tests - 2012. If the or					<u> </u>	
more than 33 1/3%, check this box and						
b 33 1/3% support tests - 2011. If the or	rganization did n	ot check a box on	ine 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	nd
line 18 is not more than 33 1/3%, check					-	P
Private foundation. If the organization of	aid not check a !	oox on line 14. 19a	. or TMD, check fi	us nox and see ins	TRUCTIONS	- 1

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

INC.

OMB No. 1545-0047

2012

Name of the organization

SOS INTERNATIONAL,

Employer identification number

27-2624272

Organization type (check one): Section: Filers of: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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** [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Employer identification number

SOS INTERNATIONAL, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NORTON HEALTHCARE 200 EAST CHESTNUT STREET LOUISVILLE, KY 40202	\$ 37,524.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	KENTUCKY ONE HEALTHCARE 539 S. 4TH ST. LOUISVILLE, KY 40202	\$ <u>127,512.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	BAPTIST HEALTHCARE SYSTEM 4000 KRESGE WAY LOUISVILLE, KY 40207	\$18,369.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	HARDIN MEMORIAL HOSPITAL 913 WEST DIXIE AVENUE ELIZABETHTOWN, KY 42701	\$5,700.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	BROWN-FORMAN CORPORATION 850 DIXIE HIGHWAY LOUISVILLE, KY 40210	\$12,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	GHEENS FOUNDATION 401 W. MAIN ST. STE. 705 LOUISVILLE, KY 40202	\$35,000.	Person X Payroll

Employer identification number

SOS INTERNATIONAL, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4 F. THOMAS CONWAY 239 S. FIFTH ST., STE. 1800 LOUISVILLE, KY 40202	Total contributions \$ 22,440.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8	MERCY FOUNDATION 8820 BANKERS ST	\$ 20,000.	Person X Payroll Noncash
	FLORENCE, KY 41042	\$	(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	MARY ZAPPONE 1920 STANLEY GAULT PKWY STE 100 LOUISVILLE, KY 40223	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	SISTERS OF CHARITY OF NAZARETH P.O. BOX 172 NAZARETH, KY 40048	\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	DAVID JONES 471 W. MAIN STREET STE 203 LOUISVILLE, KY 40202	\$10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	HIGHLAND BAPTIST CHURCH 1101 CHEROKEE RD LOUISVILLE, KY 40204	\$5,500.	Person X Payroll
223452 12-21	1-12	Schedule B (Form 9	90, 990-EZ, or 990-PF) (2012)

Employer identification number

SOS INTERNATIONAL, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a)	(b)	(c)	(d)
No. 13	Name, address, and ZIP + 4 CATHOLIC HEALTH INITIATIVES PO BOX 636000 LITTLETON, CO 80163	\$ 83,200.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	FOOD FOR THE POOR 6401 LYONS RD COCONUT CREEK, FL 33073	\$ 12,500.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	KINDRED HEALTH 5017 S 110TH ST MILWAUKEE, WI 53228	\$18,490.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	UPS FOUNDATION 55 GLENLAKE PARKWAY NE ATLANTA, GA 30328	\$35,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17	OWENSBORO MEDICAL HEALTH PO BOX 20007 OWENSBORO, KY 42304	\$17,800.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18	RABIH SABA 14121 BEACH RD CHESTERFIELD , VA 23838	\$10,000.	Person X Payroll

Employer identification number

	SOS	INTE	CRNA	CIONAL	, INC.
--	-----	------	------	--------	--------

Part I	Contributors (see instructions). Use duplicate copies of Part I is	f additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	LAMB PO BOX 15663 FORT WAYNE, IN 46885	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

SOS INTERNATIONAL, INC.

	Noncash Property (see instructions). Use duplicate copies of P		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	MEDICAL SUPPLIES AND EQUIPMENT		
$\frac{1}{}$			
		\$\\$\\$\	01/01/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Parti	MEDICAL SUPPLIES AND EQUIPMENT		
2			
		\$\$.	01/01/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	MEDICAL SUPPLIES AND EQUIPMENT		
3			
		\$18,369.	01/01/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	MEDICAL SUPPLIES AND EQUIPMENT		
<u>15</u>			
		\$18,490.	01/01/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a)		(c)	
No. rom	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(see instructions)	
		 \$	

Employer identification number

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

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

➤ 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. OMB No. 1545-0047
2012
Open to Public Inspection

Name of the organization

SOS INTERNATIONAL, INC.

Employer identification number 27-2624272

Pa	rt I Organizations Maintaining Donor Advised Fun		Accounts Complete if the
E00000000	organization answered "Yes" to Form 990, Part IV, line 6.		Transfer of implote it the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	A		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing t	hat the assets held in donor advised fu	ınds
	are the organization's property, subject to the organization's exclusive		
6	Did the organization inform all grantees, donors, and donor advisors		
	for charitable purposes and not for the benefit of the donor or donor		
*******	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the organization	on answered "Yes" to Form 990, Part IV	/, line 7.
1	Purpose(s) of conservation easements held by the organization (chec	ck all that apply).	
	Preservation of land for public use (e.g., recreation or educatio	n) Preservation of an historica	ally important land area
	Protection of natural habitat	Preservation of a certified h	nistoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified cons	servation contribution in the form of a c	conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic structure in		2c
d	Number of conservation easements included in (c) acquired after 8/1		
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, e	extinguished, or terminated by the orga	nization during the tax
	year -		
4	Number of states where property subject to conservation easement i		
5	Does the organization have a written policy regarding the periodic mo	• •	
6	violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enfo	***************************************	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing		
8	Does each conservation easement reported on line 2(d) above satisfy		
·	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation easer	ments in its revenue and expense state	Yes No
•	include, if applicable, the text of the footnote to the organization's final		
	conservation easements.	ancial statements that describes the or	ganization's accounting for
Pai	t III Organizations Maintaining Collections of Art, F	listorical Treasures, or Other	Similar Assets
	Complete if the organization answered "Yes" to Form 990, Par		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958),		nd halance sheet works of art
	historical treasures, or other similar assets held for public exhibition, e		
	the text of the footnote to its financial statements that describes thes		provides, provides, in a drawing
b	If the organization elected, as permitted under SFAS 116 (ASC 958),		palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education,		
	relating to these items:		, provide the following amounts
	(i) Revenues included in Form 990, Part VIII, line 1		. ▶ \$
2	If the organization received or held works of art, historical treasures, or		
	the following amounts required to be reported under SFAS 116 (ASC		•
а	Revenues included in Form 990, Part VIII, line 1		. > \$
b	Assets included in Form 990, Part X		

		ERNATIONAL					2	<u> 7–26</u>	52427	2 F	age 2
Pa	rt III Organizations Maintaining C										
3	Using the organization's acquisition, access	ion, and other record	s, check any of the	following th	nat are a	signi	ficant u	se of its	collection	on iter	ns
	(check all that apply):										
а	Public exhibition	d	Loan or exc	hange prog	rams						
b	Scholarly research	е		- , -							
С	Preservation for future generations								***************************************		
4	Provide a description of the organization's co	ollections and explain	n how they further t	he organiza	tion's ex	empi	purpos	se in Pa	t XIII.		
5	During the year, did the organization solicit of								.,		
	to be sold to raise funds rather than to be ma							Г	Yes	Г	No
Pai	t IV Escrow and Custodial Arran									<u></u>	
10500000	reported an amount on Form 990, Pa		no n mo organizacio		. ,	0 1 011	11 000,	i aitiv,	iii 10 3, 0i		
1a	Is the organization an agent, trustee, custod		lary for contribution	s or other s	eeete na	at incl	uded				
	on Form 990, Part X?								Yes	Г	☐ No
b	If "Yes," explain the arrangement in Part XIII						*********		165	L	140
	17 100, explain the arrangement in Fart Am	and complete the for	lowing table.			Γ			Λ	.+	
С	Beginning balance					-	4.		Amoun	IL	
ų	Additions during the year						1c				
u ^							1d				
e	Distributions during the year						1e				
f	Ending balance						1f		7,,		٦
	Did the organization include an amount on Fo								Yes	느	_ No
	if "Yes," explain the arrangement in Part XIII. TV Endowment Funds. Complete in										
i.c.i	TV Endowment Funds. Complete in					T			I		
		(a) Current year	(b) Prior year	(c) Two ye	ars back	(d)	hree yea	ars back	(e) Fou	r years	back
1a	Beginning of year balance	571,213.	642,618.			ļ					
b	Contributions	31,078.	2,313.		1,734.						
С	Net investment earnings, gains, and losses	50,319.	4,801.	2	27,896.	ļ					
d	Grants or scholarships					<u> </u>					
е	Other expenditures for facilities										
	and programs	40,000.	75,000.	3	5,097.						
f	Administrative expenses	3,755.	3,519.		1,915.						
g	End of year balance	608,855.	571,213.	64	2,618.						
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column (a)) held as:							
а	Board designated or quasi-endowment	100.00	_%								
b	Permanent endowment	%									
С	Temporarily restricted endowment ▶	%									
	The percentages in lines 2a, 2b, and 2c shou	ld equal 100%.									
3a	Are there endowment funds not in the posses	ssion of the organizat	tion that are held ar	nd administ	ered for t	the o	aanizat	tion			
	by:	-					J		ſ	Yes	No
	(i) unrelated organizations								3a(i)	X	
	(ii) related organizations								3a(ii)		X
b	If "Yes" to 3a(ii), are the related organizations								3b		
4	Describe in Part XIII the intended uses of the						• • • • • • • • • • • • • • • • • • • •		00	I	
Par											
10000000000	Description of property	(a) Cost or oth		or other	(a) A		nulated		(d) Dool	د برماید د	
	Boothplion of property	basis (investme	1			preci			(d) Book	\ value	.
12	Land	<u>`</u>	, 54515 (Ge	J. 301	.	<u> </u>			
	Buildings							****			
	Leasehold improvements										
			6	3,872.		2 2	,212	5	2.1		<u> </u>
	Equipment		0.	0,012.		32	, 21	4 •	3.	L,60	00.
	Other								~ ~	66	

Schedule D (Form 990) 2012

SOS INTERNATIONAL, INC.

27-2624272 Page 3

Schedule D (Form 990) 2012

	dule D (Form 990) 2012 SOS INTERNATIONAL, INC.			27-	2624272	Page 4
Par	IXI Reconciliation of Revenue per Audited Financial Stateme	ents Witl	n Revenue per F	?etur i	า	
1	Total revenue, gains, and other support per audited financial statements			1	2,056	,120.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a	29,585.			
b	Donated services and use of facilities		151,689.			
С	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)			-		
	Add lines 2a through 2d			2e	181	274.
3	Subtract line 2e from line 1			3	1,874,	846
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	•••••	***************************************		1,011,	010.
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	3,755.			
b	Other (Describe in Part XIII.)		3,733.	-		
-	Add lines 4a and 4b				2	755.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			4c	1,878,	601
**********	IXII Reconciliation of Expenses per Audited Financial Stateme			5 Dot:	1,0/0,	001.
				T		1 4 5
1	Total expenses and losses per audited financial statements			1	2,109,	145.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 . 1	151 600			
a	Donated services and use of facilities		151,689.			
b	Prior year adjustments					
С	Other losses					
d	Other (Describe in Part XIII.)					
е	Add lines 2a through 2d			2e	151,	689.
3	Subtract line 2e from line 1			3	1,957,	<u>456.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b					
b	Other (Describe in Part XIII.)	4b				
	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		************	5	1,957,	456.
Par	XIII Supplemental Information					
X, line	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	provide an	y additional informati	on.	D; Part V, line 4	; Part
				Schedi	ule D (Form 99	0) 2012

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990. Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization **Employer identification number** SOS INTERNATIONAL, INC. 27-2624272 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes X No 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (a) Region (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total employees, agents, and independent expenditures offices (by type) (e.g., fundraising, program is a program service, in the region for and services, investments, grants to describe specific type investments contractors recipients located in the region) of service(s) in region in region in region DELIVERED RECYCLED MEDICAL SUPPLIES AND CENTRAL AMERICA AND EOUIPMENT TO HOSPITALS THE CARIBBEAN PROGRAM SERVICES AND CLINCS. 427,483. DELIVERED RECYCLED MEDICAL SUPPLIES AND EUROPE (INCLUDING EQUIPMENT TO HOSPITALS ICELAND & GREENLAND) 0 PROGRAM SERVICES AND CLINCS. 176,652. DELIVERED RECYCLED MEDICAL SUPPLIES AND MIDDLE EAST AND EQUIPMENT TO HOSPITALS NORTH AFRICA PROGRAM SERVICES AND CLINCS. 214,217. DELIVERED RECYCLED MEDICAL SUPPLIES AND EAST ASIA AND THE EQUIPMENT TO HOSPITALS PACIFIC PROGRAM SERVICES AND CLINCS. 106,673. DELIVERED RECYCLED MEDICAL SUPPLIES AND EQUIPMENT TO HOSPITALS SUB-SAHARAN AFRICA PROGRAM SERVICES AND CLINCS. 232,983. DELIVERED RECYCLED MEDICAL SUPPLIES AND EOUIPMENT TO HOSPITALS SOUTH AMERICA 0 PROGRAM SERVICES AND CLINCS. 224,282. 3 a Sub-total O 0 1,382,290. **b** Total from continuation sheets to Part I 0 0 c Totals (add lines 3a

1,382,290.

and 3b)

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Schedule F (Form 990) 2012

Part II Grants and Other

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA	MEDICAL SUPPLIES AND				MEDICAL SUPPLIES	ESTIMATED FMV AT
		AND THE CARIBBEAN	EQUIPMENT	0.0	N/A	427,483.	427,483.AND EQUIPMENT	DATE OF DONATION
		SUB-SAHARAN	MEDICAL SUPPLIES AND				MEDICAL SUPPLIES	ESTIMATED FMV AT
		AFRICA	equi pment	0.	N/A	232,983.	983. AND EQUIPMENT	DATE OF DONATION
		SOUTH AMERICA	MEDICAL SUPPLIES AND EQUIPMENT	C	W/ A	224 282	MEDICAL SUPPLIES	ESTIMATED FMV AT
			MEDICAL SUPPLIES AND				MEDICAL SUPPLIES	ESTIMATED FMV AT
		EUROPE - TURKEY	EQUI PMENT	0.	N/A	176,652.	176,652. AND EQUIPMENT	DATE OF DONATION
		MIDDLE EAST -	MEDICAL SUPPLIES AND	•	:		MEDICAL SUPPLIES	ESTIMATED FMV AT
		LEBANON	EQUI PMENT	0.0	0.N/A	214,217.	214,217. AND EQUIPMENT	DATE OF DONATION
		EAST ASIA -	MEDICAL SUPPLIES AND				MEDICAL SUPPLIES	ESTIMATED FMV AT
		PHILIPPINES	EQUIPMENT	. O	N/A	106,673.	106,673. AND EQUIPMENT	DATE OF DONATION

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Q

Schedule F (Form 990) 2012

Enter total number of other organizations or entities 3

Page 3

SOS INTERNATIONAL, INC.

Schedule F (Form 990) 2012 SOS INTERNATIONAL, INC. 27–2624272

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2012
						edule F (Fo
(g) Description of non-cash assistance						Sch
(f) Amount of non-cash assistance						
(e) Manner of cash disbursement						
(d) Amount of cash grant						
(c) Number of recipients						
(b) Region						
(a) Type of grant or assistance			-			
(a) Type c						

for Form 5713) Yes X No

"Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions

Schedule F (Form 990) 2012

SCHEDULE M (Form 990)

Department of the Treasury

Noncash Contributions

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

➤ Attach to Form 990.

2012

Open to Public

Internal Revenue Service

Name of the organization

SOS INTERNATIONAL, INC.

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

Employer identification number 27–2624272

Schedule M (Form 990) (2012)

Types of Property (a) (b) (c) (d) Check if Number of Noncash contribution Method of determining contributions or applicable amounts reported on noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art - Works of art 1 2 Art - Historical treasures Art - Fractional interests 3 Books and publications 4 5 Clothing and household goods Cars and other vehicles 6 7 Boats and planes Intellectual property 8 Securities - Publicly traded 9 Securities - Closely held stock 10 11 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures 14 Qualified conservation contribution - Other Real estate - Residential 15 16 Real estate · Commercial Real estate - Other 17 Collectibles 18 19 Food inventory X 1,503,722. ESTIMATE OF FMV 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens Archeological artifacts 24 25 Other > 26 Other > 27 Other > 28 Other 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 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Х **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions? 32a b If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, 33

LHA

Schedule IV	(Form 990) (2012) SOS INTERNATIONAL, INC.	21-2624212	Page 2
Part II	Supplemental Information. Complete this part to provide the information required by Part I, I the organization is reporting in Part I, column (b), the number of contributions, the number of items re Also complete this part for any additional information.	ines 30b, 32b, and 33, an ceived, or a combination	d whether of both.
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
•			
<u></u>			
<u></u>			
			······································

·	· · · · · · · · · · · · · · · · · · ·		

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

SOS INTERNATIONAL, INC.

Employer identification number 27-2624272

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: EFFICIENT RECOVERY, PROCESSING AND RESPONSIBLE REDISTRIBUTION OF SURPLUS MEDICAL SUPPLIES AND EQUIPMENT TO IMPROVE HEALTHCARE ACCESS FOR THE POOR AND UNDERSERVED AROUND THE WORLD.

FORM 990, PART V, LINE 3B: UNRELATED BUSINESS INCOME IS DERIVED FROM DIVIDEND, INTEREST INCOME AND CAPITAL GAINS INCLUDED IN INVESTMENT INCOME.

FORM 990, PART VI, SECTION B, LINE 11: THE 990 TAX RETURN IS PREPARED BY AN INDEPENDENT CPA FIRM BASED ON THE INFORMATION OBTAINED FROM THE AUDIT AND INQUIRIES FROM MANAGEMENT. BEFORE THE RETURN IS FILED, A DRAFT OF THE TAX RETURN IS REVIEWED BY THE BOARD OF SOS INTERNATIONAL. THE TAX RETURN IS THEN FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: ON AN ANNUAL BASIS EACH MEMBER OF THE BOARD OF DIRECTORS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST FORM. THE FORM INDICATES A POSSIBLE CONFLICT OF INTEREST, THE INCIDENT IS THOROUGHLY REVIEWED. IF THERE IS A PERCEIVED CONFLICT, THE MEMBER WILL NOT BE ABLE TO PARTICIPATE (INCLUDING SERVING ON A COMMITTEE) ON ANY DECISION RELATING TO THE CONFLICT. IF A SIGNIFICANT CONFLICT IS NOTED THE BOARD MEMBER WILL BE ASKED TO RESIGN. PERIODICALLY THROUGHOUT THE YEAR POSSIBLE CONFLICTS ARE REVIEWED AND RESOLVED AS NECESSARY.

FORM 990, PART VI, SECTION B, LINE 15A: THE SALARY FOR THE CEO WAS AGREED UPON BY THE BOARD AFTER A REVIEW OF SALARY DATA COMPARISONS. THERE ARE NO OTHER KEY EMPLOYEES.

Schedule O (Form 990 or 990-EZ) (2012) Name of the organization	Page 2
SOS INTERNATIONAL, INC.	27-2624272
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION M	AKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FIN	ANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST. THE BOARD RECEIVES	AND REVIEWS THE
MONTHLY INTERIM COMPILED FINANCIAL STATEMENTS AND THE ANN	UAL AUDITED
FINANCIAL STATEMENTS. ANY QUESTIONS ARE DIRECTED TO THE	CEO.