Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047 Open to Public >>

A	For t	hø 2	001 calendar year, or tax year period beginning JUL 1, 2001 and er	nding JUN 30	0, 200	2
_	Check		C Name of organization			dentification number
-	applic	able		1	kinkei ii	
	Add	dress inge	I HADRI OF MODELE MENTS OF MOTERO THE		34-10	019610
F	Na	me	print or POBILE MEADS OF TOBBO, TNC. ype. Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone	
⊨		j ej sube	Specific 1946 N. 13TH STREET	480		255-7806
늗	—]nett ∏Fln		instruc-	1400		
누	—, <i>י</i> שו <i>י</i>	im Jim	tions City or town, state or country, and ZIP + 4	į.	F Accounting met	
늗	reti لِــــ		10HEDO, OR 43024		Crover (specify)	
┖	per	nding	must attach a completed Schedule A (Form 990 or 990-EZ)	Hand I are not applica		
				H(a) is this a group re		
<u>G</u>	Web	site	<u>N/A</u>	H(b) If "Yes," enter nu	_	
				H(c) Are all affiliates in		N/A Yes No
			tion type (check only one) \blacktriangleright X 501(c) (3) \blacktriangleleft (insert no) $\boxed{}$ 4947(a)(1) or $\boxed{}$ 527	(If "No," attach a l	ist)	
K	Chec	k he	re 🕨 📖 if the organization's gross receipts are normally not more than \$25,000. The	H(d) is this a separate	return filed by	y an or-
,	organ	iizat	ion need not file a return with the IRS, but if the organization received a Form 990 Package	ganization covere	id by a group	ruling? Yes X No
	n the	ma	il, it should file a return without financial data. Some states require a complete return	I Enter 4-digit GEN	_	
				M Check ▶ ☐ r	the organizat	ion is not required to attach
<u>L</u> 1	<u>Gross</u>	rec	eipts Add lines 6b, 8b, 9b, and 10b to line 12 \(\bigcirc \)	Sch B (Form 990	_	*
	art	_	Revenue, Expenses, and Changes in Net Assets or Fund Bala			
	1		Contributions, gifts, grants, and similar amounts received		1	
	`		Direct public support	53,19	97.	
	i	b	Indirect public support 1b	291,89		
		~	Government contributions (grants) 1c	117,93		
		4	Total (add lines 1a through 1c)		1000	
		u	(cash \$ 463,031 - noncash \$)		\`\	463,031.
	١,				1d	1,101,538.
	2		Program service revenue including government fees and contracts (from Part VII, line 93)		2	1,101,550.
	3		Membership dues and assessments		3	4 026
	4		Interest on savings and temporary cash investments		4	4,836.
	5		Dividends and interest from securities	1	5	19,822.
	6	а	Gross rents <u>6a</u>		— `	
	1	þ	Less rental expenses 6b		``	
•		C	Net rental income or (loss) (subtract line 6b from line 6a)		<u>6c</u>	
Revenue	7	'	Other Investment income (describe) 7	
Š	8	3	Gross amount from sale of assets other (A) Securities	(B) Other		
<u>ar</u>			than inventory 42,474. 8a		^ ^ }	
	1	b	Less cost or other basis and sales expenses 64,573.86		_	
	1	C	Gain or (loss) (attach schedule) <22,099.>8c			
		d	Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 1		8d	<22,099.>
2	9)	Special events and activities (attach schedule)		[","]	
S		а	Gross revenue (not including \$ of contributions		['.]	
(,		reported on line 1a)	130,57	79.	
0 3 2002		b	Less direct expenses other than fundraising expenses 9b	41,27		
ت	1			STATEMENT 2		89,304.
DEC	10					
	``	b	Gross sales of groods sold 10a 10b		─ [
α			Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line	102)	─ } ,,,	
Ш	۱.,	٠	Other evenue (from Part 2412 103)	104)	100	1,793.
2	11				11	1,658,225.
쇕	12		Total revenue (add lines 1d, 2, 3 4, \$66, 7, 8d, 9c, 10c, and 11)		12	
ω	13		Program (10 (24 (1) the 44 optumn (B))		13	1,253,903.
Expense ANNED	14		Management and general (from line 44, ebiumn (C))		14	184,669.
ē	15		Fundraising (from line 44, column (D))		15	14,364.
Ω̈́	16	i	Payments to affiliates (attach schedule)		16	- 1 1 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	17		Total expenses (add lines 16 and 44, column (A))		17	1,452,936.
	18	}	Excess or (deficit) for the year (subtract line 17 from line 12)		18	205,289.
탏	19)	Net assets or fund balances at beginning of year (from line 73, column (A))		19	1,721,988.
Net Assets	20)	Other changes in net assets or fund balances (attach explanation) SEE	STATEMENT 3	3 20	<108,141.>
	21		Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21	1,819,136.
1230 01-0	001 4-02	ī	LHA For Paperwork Reduction Act Notice, see the separate instructions			Form 990 (2001)

STMT

Organizations that follow SFAS 117, check here

Organizations that do not follow SFAS 117, check here

Total assets (add lines 45 through 58) (must equal line 74)

Loans from officers, directors, trustees, and key employees

b Less accumulated depreciation

Accounts payable and accrued expenses

Other assets (describe

Grants payable

Deferred revenue

a Tax-exempt bond liabilities

69 and lines 73 and 74

Temporarily restricted

Permanently restricted

Unrestricted

70 through 74

b Mortgages and other notes payable Other liabilities (describe

Total Habilities (add lines 60 through 65)

58

59

60

61

62

63

65

67

68

70

Liabilities

57b

Part IV Balance Sheets Note Where required, attached schedules and amounts within the description column Beginning of year End of year should be for end-of-year amounts only 45 Cash - non-interest-bearing 45 407,012 357,812. 48 46 Savings and temporary cash investments 118,176. 47 a Accounts receivable 47a 47b 99,536. 118,176. b Less allowance for doubtful accounts 47c 200 153,399 48 a Piedges receivable 48a 14,792. 153,399. b Less allowance for doubtful accounts 48b 48c 49 Grants receivable 50 Receivables from officers, directors, trustees, 50 and key employees 51a 51 a Other notes and loans receivable 51b b Less allowance for doubtful accounts 51c 12,688. 12,650. 52 inventories for sale or use 52 2,224. 2,225. 53 53 Prepaid expenses and deferred charges 227,277. STMT 7 Cost X FMV 229,866. Investments - securities STMT 6 54 54 55 a Investments - land, buildings, and 55a equipment basis b Less accumulated depreciation 55b 55c Investments - other 56 56 273,595 57a 57 a Land, buildings, and equipment basis

237,555

STMT 9

47,133.

82,341

6,333.

88,674.

71,925.

1,650,063.

1,810,662

57c

58

60

61

62

63

64a

64b

66

68

69

70

36,040.

86,594.

4,438.

91,032.

1,609,585.

142,458.

67,093.

1,910,168.

Net Assets or Fund Balances Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 71 72 72 Retained earnings, endowment, accumulated income, or other funds 73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, 1,721,988. 1,819,136. column (A) must equal line 19, column (B) must equal line 21) ,810,662. 1,910,168. Total liabilities and net assets / fund balances (add lines 66 and 73)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments

organizations, of which more than \$10,000 was provided by the related organizations? If "Yes " attach schedule 🕨

Form 990 (2001)

MOBILE MEALS OF TOLEDO,

INC

Form 990 (2001)

	990 (2001) MOBILE MEALS OF TOLEDO, INC. 34-1019	<u> 610</u>	_	Page 5
<u>Pa</u>	rt VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	ļ.—-	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77	ļ	X
	If "Yes," attach a conformed copy of the changes	v		100
78 a		78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year?	79		X
	If "Yes," attach a statement		1, 5	4
80 a	is the organization related (other than by association with a statewide or nationwide organization) through common membership,	ا رر ا	2	, ~~~
	governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization	ì		
	and check whether it is exempt OR nonexempt	~		
81 a	Enter direct or indirect political expenditures. See line 81 instructions.	1, 1	ŧ	. 3.
b	Did the organization file Form 1120-POL for this year?	81b	ĺ	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than			
	fair rental value?	82a	Х	
ь	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an			
_	expense in Part II (See instructions in Part III)			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	,
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	Х	
84 a		84a		X
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not		,	7.
	tax deductible?	84b	1 3	' ` `
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A	85a		\vdash
	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b		
U	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax	030		
	owed for the prior year		·	
	1 1 1 1 1 1 1 1 1		[5]	î
G	37/2	100		
đ	32/3			
е.	57.75		«	2
	27/2	05-		İ
9		85g	·	
n	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A			
	1 1 /-	85h		
86	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12 86a N/A	-		/~
	Gross receipts, included on line 12, for public use of club facilities 86b N/A	-		
87	501(c)(12) organizations Enter a Gross income from members or shareholders 87a N/A	-	[
þ	Gross income from other sources (Do not net amounts due or paid to other sources			1
	against amounts due or received from them) 876 N/A	-	.	, J
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,			
	or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-32			
	If "Yes," complete Part IX	88		X
89 a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under		-	,
	section 4911 ► 0 - , section 4912 ► 0 - , section 4955 ► 0 -			ĺ (
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			ĺ
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?			i
	If "Yes," attach a statement explaining each transaction	89b		X
C	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under			_
	sections 4912, 4955, and 4958			0.
d	Enter Amount of tax on line 89c, above, reimbursed by the organization			0.
90 a	List the states with which a copy of this return is filed OHIO			
b	Number of employees employed in the pay period that includes March 12, 2001			11
91	The books are in care of ► MAUREEN STEVENS Telephone no ► 419-25	5-7	806	
	Located at ➤ 1946 N. 13TH ST STE 480 TOLEDO, OHIO ZIP+4 ► 4	362	4	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here		▶[\supset
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/	<u> </u>	
12304		For	n 990	(2001)

Form 990 (2001)

Page 5

	II Analysis of Income- iter gross amounts unless other			ed business income		34) ed by section 512 513 or 514	
Indicate	_	<i>"</i> 138	(A)	(B)	(C)	(D)	(E) Related or exempt
	gram service revenue		Business code	Amount	Exclu-	Amount	function income
•	OBILE MEALS	Ì			eboo		919,078.
_	DBILE MARKET			<u> </u>	_		182,460.
6		 }			+ $+$		10271001
d	·	1					
<u> </u>					1		
f Med	lcare/Medicaid payments						
	and contracts from government ag	encias :			~		
-	nbership dues and assessments	1			+ +	·	
	est on savings and temporary	ļ					
	investments				14	4.836	
	lends and interest from securities	<u> </u>		<u> </u>	14	19.822	
	rental income or (loss) from real est	ate		m mby an anima	4220	4,836. 19,822.	22 12 1 1 2 2 2 1 1 2 2 2 2 2 2 2 2 2 2
	-financed property	1				· / · · · · · · · · · · · · · · · · · ·	
	lebt-financed property	Ì		<u></u> .	+ +	-	 _
	rental income or (loss) from person	al property					
	r investment income	ai property		-	+		
	or (loss) from sales of assets	}			- - 		<u>-</u>
	r than inventory	İ			0 1	<22.099	>
	ncome or (loss) from special event:	,			01	<22,099. 89,304.	<u> </u>
	s profit or (loss) from sales of inve				1 5 1		
102 Gibs		11019		 -	+ +		
	SCELLANEOUS				01	1,793.	
b				.	- • • 		
•							
<u> </u>				<u> </u>			
e					- 		 _
	otal (add columns (B), (D), and (E)		. ~			93,656.	1,101,538.
	l (add line 104, columns (B), (D), and (E),	_			• [× 00]	<u> </u>	1,195,194.
	e 105 plus line 1d, Part I, should		nt on lice 1	2 Part I		٠.	1/1/3/1/4.
Dart V	III Relationship of Acti	vities to the	Accompl	ishment of Exem	nt Purt	ooses (See Specific Instrue	ctions on page 32 \
Line No	Explain how each activity for wh			· · · · · · · · · · · · · · · · · · ·			
THIS NO	exempt purposes (other than by				eu mupuna	intry to the accompasionent u	i the ordanization 2
_ <u> </u>	SEE STATEMENT	· •	T OBOIT PUIPO				
	DEE CIRRETENI	1.0					
						· · · · · · · · · · · · · · · · · · ·	
••							······
Part D	Information Regard	ing Taxable S	Subsidiar	tes and Disregar	ded En	tities (See Specific Instruc	tions on page 33)
1 411 12	(A) address, and EIN of corporation,	(B)		(C)		(D) I	(E)
Name, a	address, and EIN of corporation, nership, or disregarded entity	Percentage of ownership interest	,[Nature of activities		Total income	End-of-year assets
part	nership, or distegatived entity		V6	<u></u>			233013
	N/A		%				
	N/A		%				
			%	 			
Part X	Information Regardi			tod with Domon	al Poss	fit Contracto /See See	rific Instructions on page 22)
							Yes X No
	the organization, during the year, in	_	•			IN DESIGNATION CONTINUES.	Yes X No
מוט נמ)	the organization, during the year, p	ay premiums, direc	uy or indirect	ay, un a personal benefit	COULTACE		LI 183 LALINO

impanying schedules and statements, and to the best of my knowledge and belief, it is true, ormation of which preparer has any knowledge.

11-02 Maureen Stevens, Exec Director

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ 2001

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

MOBILE MEALS OF TOLEDO, INC.

Employer Identification number 34 1019610

Part I	Compensation of the Five Highest Paid (See page 1 of the instructions. List each one. If there are no		None *)	icers, Directo	rs, and Trus	tees
	(a) Name and address of each employee paid more than \$50,000		(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and othe allowances
NONE_						
						
			•			
			 			
Total numbe over \$50 000 Part 11	Compensation of the Five Highest Paid				al Services	, ,,
	(See page 2 of the instructions List each one (whether indicate) (a) Name and address of each independent contractor page 2.			"None ") (b) Type of s	service	(c) Compensation
NONE _						
-						
						
	r of others receiving over professional services		0	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·

2CI	REQUIRE A (FORM 990 of 990-EZ) 2001 MOBILE MEALS OF TOLEDO, INC. 34-10196	.0	Page 2
P	Part III Statements About Activities (See page 2 of the instructions)	Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking		X
	Bird F must complete Dod VI D AND allowed a statement of the late to the late	. `	۰,
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors	1 32	1 6 3
-	trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such) , (1 3 3
	person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes,"	-	1 ^
	attach a detailed statement explaining the transactions)	1	1 %
8	Sale, exchange, or leasing of property?	1	х
b	Landing of money or other extension of credit?		X
C	Furnishing of goods, services, or facilities?		<u>x</u>
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
8	Transfer of any part of its income or assets?		<u> </u>
3	Does the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below)		X
4	Do you have a section 403(b) annuity plan for your employees?	X	
	e Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans mit in furtherance of its charitable programs "qualify" to receive payments	À	3 8
P	art IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)		
The	organization is not a private foundation because it is. (Please check only ONE applicable box.)		
5	A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)		
6	A school Section 170(b)(1)(A)(ii) (Also complete Part V)		
7	A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)		
8	= ····································		
9	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state.		
10	An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv)		
	(Also complete the Support Schedule in Part IV-A)		
11			
	Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)		
11	——————————————————————————————————————		
12			
	receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of		
	its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)		
	of the difference and and one care one carrier and all the combiners and anhibit actions in Last IA-W		
13	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)		
_	Provide the following information about the supported organizations (See page 5 of the instructions)		
	(b) Li	e numi	ber
		om abo	
_			
	Schadula A (Form 990 or	990-E	ረ) 2001

b Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either 34a or b, please explain using an attached statement

1975-2 C 8 587, covering racial nondiscrimination? If "No," attach an explanation

Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50,

Part V Private School Questionnaire (See page 7 of the instructions) N/A (To be completed ONLY by schools that checked the box on line 6 in Part IV) Yes No 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 29 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 30 31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 31 If "Yes," please describe, if "No," please explain (if you need more space, attach a separate statement) Does the organization maintain the following a Records indicating the racial composition of the student body, faculty, and administrative staff? 32a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 32b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 32c 32d d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (if you need more space, attach a separate statement) 33 Does the organization discriminate by race in any way with respect to 33a a Students' rights or privileges? b Admissions policies? 33b 33c c Employment of faculty or administrative staff? d Scholarships or other financial assistance? 33d 33e e Educational policies? 331 Use of facilities? f 33q g Athletic programs? h Other extracurricular activities? 33h If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) 34a 34 a Does the organization receive any financial aid or assistance from a governmental agency?

Schedule A (Form 990 or 990-EZ) 2001

34b

P		-	lecting Public Charantzation that filed Form 576		age 9 o	the instructio	ns)		N/	A
Che		ization belongs to an atfiliate			f you ch	ecked "a" and	"Imited (ontrol	provisions apply	
		imits on Lobbying				Affiliate	(a) ed group etals		(b) To be completed f	
	(The to	erm "expenditures" means an	nounts paid or incurred)		1				electing organiza	tions
	Tatal labburas averaged	h	(amanganta lahburan)			N/	A		i	
	Total lobbying expenditures	· · ·			36		-			
37		to influence a legislative boo	iy (airact ioooying)		37		_			
38 39		•			38					
39 40		nultures nditures (add lines 38 and 39	11		39 40		-			
41		nt. Enter the amount from the	•		40	7-0-63			;^, <u>,</u> , , , , , , , , , , , , , , , , ,	
71	If the amount on line 40 is		ing nontaxable amount is -		, ,	CONT.	الم يردد	· «		3.0° 2.00
	Not over \$500 000	•	amount on line 40	,	1 22.		·	, ,		€″,∢
	Over \$500,000 but not over \$1,0	•	us 15% of the excess over \$500,0	100	*			,		
	Over \$1 000 000 but not over \$1		us 10% of the excess over \$1 000		41)(M 20 00		~ ~~~	, , , , , , , , , , , , , , , , , , , ,	,, ,,
	Over \$1,500 000 but not over \$1	•	is 5% of the excess over \$1,500,0	· · · · · · · · · · · · · · · · · · ·		* <	, ' , '		mm 1387 _ 6	, ,
	Over \$17,000 000	\$1,000,000		J	Ĩ.			°o°o •o o		
42	Grassroots nontaxable amo	unt (enter 25% of line 41)			42					
43	Subtract line 42 from line 30	5 Enter -0- if line 42 is more	than line 36		43					
44	Subtract line 41 from line 38	8 Enter -0- if line 41 is more	than line 38		44					
					4.3			1000 1000	, , , ,	. w
	Caulion If there is an am	nount on either line 43 or i	ine 44, you must file Forn	n 4720	<u></u>	1 0 4 1 5 <u>1</u> 0	<u> 2 % </u>	*>	5 6 76 6	
			structions for lines 45 throu Lobbying Exp	enditures Duri					N/.	 A
						(d) 1998		(e) Total		
45	Lobbying nontaxable amount									0.
46	Lobbying ceiling amount (150% of line 45(e))				ر د د در			بەرق		0.
47	Total lobbying									
	expenditures									<u>o.</u>
48	Grassroots nontaxable			!						
	amount				, , , , , , , , , , , , , , , , , , , 			.,		0.
49	Grassroots ceiling amount			1 1 12 1				enisia Lagran	`1	•
	(150% of line 48(e))		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	()) , , , , , ,	···					0.
ου	Grassroots lobbying									0.
P	expenditures art VI-B Lobbying	Activity by Nonele	ting Public Chariti	es						
	(For reporting	only by organizations that di	d not complete Part VI-A) (S	ee page 12 of	the instr	uctions)			N/	<u> </u>
	ring the year, did the organiza	· · · · · · · · · · · · · · · · · · ·	=	n, including an	y attemp	t to	Yes	No	Amount	
	uence public opinion on a leg	islative matter or referendum	i, through the use of							
	Volunteers								33 0 1 Was	
D		nciude compensation in exp	enses reported on lines a thr	rougn n)			-	<u> </u>	at commun	. "
	Media advertisements	atam artha amhla					-			
0	Mailings to members, legisle									
•	Publications, or published of Grants to other organization									
9	=	• • •	officials, or a legislative body							
-	Railies, demonstrations, ser	· -							· · · · · · · · · · · · · · · · · · ·	
	Total lobbying expenditures	•	,,, er unj outer me						 	0.
		also attach a statement givir	g a detailed description of th	ne lobbying act	Ivities		<u> </u>		·	

	•						
		MOBILE MEALS OF			019610		Page 6
Part		-		d Relationships With Nonchar	itable	<u>-</u>	
		zations (See page 12 of the instri					
	· -	directly or indirectly engage in any of i section 501(c)(3) organizations) or in		-			
		ganization to a noncharitable exempt		mical Organizations?	Γ¥	es	No
	(i) Cash	gamento, to a partonario assempt			51a(i)		Х
	(ii) Other assets				a(ti)	7	X
	Other transactions						
	(I) Sales or exchanges of asse	ets with a noncharitable exempt organ	nization		b(i)	ļ	X
((il) Purchases of assets from a	a nonchantable exempt organization			p(n)		Х
(iii) Rental of facilities, equipme	ent, or other assets			b(iii)		X
(lv) Reimbursement arrangeme	ants			b(IV)	_	X
	(v) Loans or loan guarantees				b(v)		Х
		r membership or fundraising solicitati			b(vi)		X
	-	, mailing lists, other assets, or paid en			_ c		<u>X</u>
				lways show the fair market value of the			
		s given by the reporting organization nent, show in column (d) the value of			NT	/ A	
	T	T	the goods, onler assets, or			<u> </u>	
(a) Line no	(b) Amount involved	Name of nonchantable exe	empt organization	(d) Description of transfers, transactions, and	sharing arran	gem	ents
	 						
		-					
	 		<u> </u>		<u> </u>		
	<u> </u>				-		
						_	
			<u> </u>				
		<u> </u>					
				· · · · · · · · · · · · · · · · · · ·			
		ļ	_				
			<u> </u>			_	
						_	
						_	
2 a l	s the organization directly or in	durectly affiliated with or related to o	ne or more tax-exempt oro:	anizations described in section 501(c) of the		_	
	Code (other than section 501(c)		ile or there and exempt orga	→ □			No
	Yes," complete the following :						
	(a)		(b)	(c)			
	Name of org	ganization	Type of organization	Description of relations	hip		
	·			<u></u>			
							
						_	
		<u> </u>					_
					-		
						_	
	 						
						_	
			_				
		,		I			

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

Department of the Treasury Internal Revenue Service

Name of organization

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No 1545-0047

2001

Employer identification number

MOBILE MEALS OF TOLEDO, INC. 34-1019610 Organization type (check one) Filers of Section Form 990 or 990 EZ X 501(c)(3) (enter number) organization 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 box(es) for both the General rule and a Special rule-see instructions) General Rule-For organizations 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-X For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms (Complete Parts I and II) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests 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 Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate 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 Organizations that are not covered by the General rule and/or the Special rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form t	990 990-EZ, or 990-PF) (2001)			Page I to I of Part I
Name of organi	zation		Empl	oyer Identification number
MOBILE	MEALS OF TOLEDO, INC.		3	4-1019610
Part I C	Contributors (See Specific instructions)			
(a) No	(b) Name, address and ZIP + 4	Aggre	(c) egate contributions	(d) Type of contribution
1			10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No		Aggre	(c) egate contributions	(d) Type of contribution
2		\$	99,173.	Person X Payroll
(a) No		Aggre	(c) egate contributions	(d) Type of contribution
3		\$	22,618.	Person X Payroil Noncash (Complete Part II if there is a noncash contribution)
(a) No		Aggre	(c) egate contributions	(d) Type of contribution
4		s	148,533.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address and ZIP + 4	Aggre	(c)	(d) Type of contribution
- - -		 \$		Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address and ZIP + 4	Aggre	(c) egate contributions	(d) Type of contribution
 		\$		Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Mobile Meals of Toledo, Inc. 34-1019610 990 Schedule A page 3, Part IV-A

	Schedule A page 3, Part IV-A										
Cal	endar year (or fiscal year	(a) 2001	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total				
beg	inning in)	Short Year									
		1/1/01-6/30/01									
15	Gifts, grants, and contributions received,										
	(Do not include unusual grants. See line 28)	113,931	341,374	312,493	296,762	264,511	1,329,071				
16	Membership fees received										
17	Gross receipts from admissions,				· —	T					
	merchandise sold or services	1				,					
	performed, or furnishing of facilities	1			,						
	in any activity that is not a business	!									
	unrelated to the organization's										
	chantable, etc., purpose	505,682	1,052,233	1,033,388	923,377	818,238	4,332,918				
18	Gross income from interest,										
	dividends, amounts received from	1 1									
	payments on securities loans (sec-										
	tin 512(a)(5)), rents, royalties, and	1	1			1					
	unrelated business taxable income		ļ	}		İ					
	(less section 511 taxes) from		Į.								
	businesses acquired by the	1 1	į			j					
	organization after June 30, 1975	28,691	76,113	67,995	35,710	46,258	254,767				
19	Net income from unrelated business										
	activities not included in line 18			1	:	İ					
20	Tax revenues levied for the										
	organization's benefit and either										
	paid to it or expended on its behalf		1								
21	The value of services or facilities										
	furnished to the organization by a		[1						
	governmental unit without charge		ļ								
	Do not include the value of services		ŀ								
	or facilities generally furnished to			1							
	the public without charge	}		1							
22				-	See attached	l statement					
	Do not include gain or (loss)			ļ		1					
	from sale of capital assets		1,855	2,450	4,511	884	9,700				
23	Total of lines 15 through 22	648,304	1,471,575	1,416,326	1,260,360	1,129,891	5,926,456				
24	Line 23 minus line 17	142,622	419,342	382,938	336,983	311,653	1,593,538				
25	Enter 1% of line of 23	6,483	14,716	14,163	12,604	11,299					
26	Organizations described on lines 10 or 11	1		unt in column (e), lii	ne 24	26a	31,871				
1	Attach a list (which is not open to public inspection) showing the name of	and amount contri	outed by each							
	person (other than a governmental unit or publicly s	upported organization)) whose total gifts (or 1997 through							
	2000 exceeded the amount shown in line 26s. Enter		_	_		26ხ 🖁	0				
	Total support for section 509(a)(1) test: Enter line 2	4, column (e)				26c 🖺	1,593,538				
	1 Add Amounts from column (e) for lines	•	18	254,767 1	19	200 1,39					
	• • • • • • • • • • • • • • • • • • • •		22	9,700 2		26d 264,					
	Public support (line 26c minus line 26d total)			,		26e	1,329,071				
	f Public support percentage (line 26e (numerator)	divided by line 26c (denominatori)			26f	83 4038%				

DJN -	- 10/	/25/02	12:48	AM 99	0 PG 5

THE ORGANIZATION'S OPERATIONS ARE DEPENDENT ON VOLUNTEERS WHO HAVE CONTRIBUTED AN ESTIMATED 6,000 HOURS OF THEIR TIME PER MONTH TO ORGANIZE SPONSORED PROGRAMS.

990

FORM 990 PAGE 2

i 1	Des	Description	Date Acquired	Method	Life	Šž	Unadjusted Cost Or Basis	Bus % Excl	Basis - ITC, 179, Salvage	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
EHI QUI	1VEHICLES ZEQUIPMENT		VARIES	, , , , , , , , , , , , , , , , , , ,	000	16	167,618.	1		167,618.	163,474.	3 m 1/3	2,517
CRI EAN	3FURNITURE		VARIES		000.	9, 9	5,672.	5° 5 5	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	5,672.	4,997.	in the second	161
A LE	CAPITAL LEASES	es Page 2 depr	VARIES		0000	16	10,000.	Ţ.,	· 6	10,000,	4,167.		2,000
\$	· ·		1 1	7	(· · ·	3,							
	\$			\$	4	,		\$ %				£ **	
	· ,~ «		***		2				· ^ / / /	V 1) : V .
23			£ *	, ,		5.7		\$ 					
, ·			\$ ^ \$;	, «,»	-	, .			· · · · · · · · · · · · · · · · · · ·				4 1.00 4 2.00 3 2.00
(\$ \$4 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		``,	; m	**		х.	,	,	``.

LOSS) FR	OM PUB	LICLY TRA	DED SEC	URITIE	S	STATEMI	ENT	1
	GR							
			COST C	_	XPENSE F SALE		GAIN LOSS	
•	4:	2,474.	64,5	573.	0.	<:	22,09	 99.>
INE 8	4:	2,474.	64,5	573.	0.	<2	22,09	 19.>
SPECI.	AL EVE	NTS AND AC	TIVIT	ES		STATEM	ENT	2
								5
2	8,270.				14,94 11	2. 1 9.	1,32 1,20	28.
E 9 13	0,579.		13	579.	41,27	5. 8	39,30	4.
	IN NET	ASSETS OF	R FUND	BALANCI	ES :	AMOU	JNT	3
	E 20							
	ОТНІ	ER EXPENSI	S			STATEME	ENT	4
(A) TOT	•	(B) PROGRI SERVIO		(C) MANAGEI AND GEI		(I FUNDR <i>I</i>		IG
	6,387.	4 ,	790.		1,597.			
1	SPECIA GRORE 100 2 E 9 13 CHANGES ESTMENTS T I, LIN	GROSS RECEIPTS 100,981. 28,270. 1,328. 0. E 9 130,579. CHANGES IN NET ESTMENTS T I, LINE 20	GROSS CONTRIBUTE RECEIPTS INCLUDED 100,981. 28,270. 1,328. 0. E 9 130,579. CHANGES IN NET ASSETS OF ESTMENTS T I, LINE 20 OTHER EXPENSE (A) (B)	GROSS CONTRIBUT. GRECEIPTS INCLUDED REV 100,981. 10 28,270. 2 1,328. 0. E 9 130,579. 13 CHANGES IN NET ASSETS OR FUND OTHER EXPENSES	GROSS CONTRIBUT. GROSS RECEIPTS INCLUDED REVENUE 100,981. 100,981. 28,270. 1,328. 0. 1,328. E 9 130,579. 130,579. CHANGES IN NET ASSETS OR FUND BALANCE OTHER EXPENSES (A) (B) (C)	SPECIAL EVENTS AND ACTIVITIES GROSS CONTRIBUT. GROSS DIRECT RECEIPTS INCLUDED REVENUE EXPENS 100,981. 100,981. 25,66 28,270. 28,270. 14,94 1,328. 1,328. 11 0. 54 E 9 130,579. 130,579. 41,27 CHANGES IN NET ASSETS OR FUND BALANCES ESTMENTS T I, LINE 20 OTHER EXPENSES (A) (B) (C)	SPECIAL EVENTS AND ACTIVITIES GROSS CONTRIBUT. GROSS DIRECT RECEIPTS INCLUDED REVENUE EXPENSES IN 100,981. 100,981. 25,667. 28,270. 14,942. 17,328. 119. 0. 547. E 9 130,579. 130,579. 41,275. 8 CHANGES IN NET ASSETS OR FUND BALANCES STATEMENTS T I, LINE 20 CHANGES IN NET ASSETS OR FUND BALANCES STATEMENTS AMOUNT AMOU	SPECIAL EVENTS AND ACTIVITIES GROSS CONTRIBUT. GROSS DIRECT NET RECEIPTS INCLUDED REVENUE EXPENSES INCOME 100,981. 25,667. 75,31 28,270. 14,942. 13,32 1,328. 119. 1,20 0. 547. <54 E 9 130,579. 130,579. 41,275. 89,30 CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT AMOUNT AMOUNT CONTRIBUT. GROSS DIRECT NET STATEMENT AMOUNT CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT OTHER EXPENSES STATEMENT (A) (B) (C) (D)

MOBILE MEALS OF TOLEDO	, INC.				34-1019610	
DELIVERY LICENSES DUES ADVERTISING	6,076. 487. 1,749. 4,181.	6,076. 0. 0. 0.	0. 487. 1,749. 4,181.			
TOTAL TO FM 990, LN 43	980,592.	963,223.	17,369.			
FORM 990 STATEMEN	T OF PROGRAM	SERVICE ACCOMPLI	SHMENTS	STATEMENT	5	

DESCRIPTION OF PROGRAM SERVICE ONE

MOBILE MEALS PROVIDES FOOD SERVICES TO INDIGENT PERSONS AND SUBSCRIBERS WITH HEALTH PROBLEMS WHO WOULD OTHERWISE HAVE DIFFICULTY MAINTAINING A BALANCED DIET. FROM JULY 1, 2001 THROUGH JUNE 30, 2002, THE MEAL PROGRAM SERVED 365,124 MEALS TO 1,046 CLIENTS. IN ADDITION, CONTRACTS WERE RENEWED WITH 3 AREA HOSPITALS, ST. CHARLES, ST. LUKE'S AND ST. VINCENT'S TO PROVIDE HEALTHY DIETS FOR THOSE WHO ARE ILL.

				NTS	EXPENSES	
TO FORM 990, PART III, LINE A					1,253,903.	
FORM 990	NON-GOVE	ERNMENT SECU	RITIES	S	TATEMENT 6	
SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES	
EQUITIES MUTUAL FUNDS CORPORATE BONDS	125,399.	78,000.	812,481.		812,481. 125,399. 78,000.	
TO 990, LN 54 COL B	125,399.	78,000.	812,481.		1,015,880.	

FORM 990 GOVE	GOVERNMENT SECURITIES			
DESCRIPTION	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES	
US TREASURY NOTES AND BONDS	213,986.		213,986.	
TOTAL TO FORM 990, LINE 54, COL B	213,986.	<u> </u>	213,986.	
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE	
DESCRIPTION VEHICLES EQUIPMENT FURNITURE LEASEHOLDS CAPITAL LEASES	167,618. 83,135. 5,672. 7,170. 10,000.	165,991. 59,092. 5,158. 1,147. 6,167.	1,627. 24,043. 514. 6,023. 3,833.	
TOTAL TO FORM 990, PART IV, LN 57	273,595.	237,555.	36,040	

					 		
FORM 9		OTHER NOTE:	S AND LO	OANS PAY	ABLE 	STATEMENT	<u>_</u>
LENDE	R'S NAME	TERMS (OF REPAY	(MENT			
OFFICE	PRODUCTS, INC.	\$199/M	ONTH				
DATE O		ORIGINAL OAN AMOUNT		TEREST RATE			
06/30/	/99 06/30/04	10,000	0.	7.25%			
SECURI	TY PROVIDED BY BO	RROWER I	PURPOSE	OF LOAN			
N/A		(OFFICE C	OPIER			
RELATI	ONSHIP OF LENDER						
N/A		_					
DESCRI	PTION OF CONSIDER	ATION			FMV OF CONSIDERATION	BALANCE DU	JΕ
N/A					0.	4,4	38.
тотат	INCLUDED ON FORM	990. PART 1	IV. TINE	: 64. CO	LUMN B	4.4	38.
			- · ,	,			
FORM 9		I - RELATI OMPLISHMENT			VITIES TO POSES	STATEMENT	10
LINE	EXPLANATION OF R	ELATIONSHII	P OF ACT	IVITIES			
93A	THE ORGANIZATION UNABLE TO PROVID					PHYSICALLY	•
93B	THE ORGANIZATION LOCATIONS TO SEL HAVE DIFFICULTIE HEALTH PROBLEMS. DIETARY SERVICES ORGANIZATION.	L GROCERIES S OBTAINING GROCERY S	S AND OT G FOOD F SALES AR	HER NECT ROM NORI E AN ES	ESSITIES TO INDI MAL GROCERY STOR SENTIAL PART OF	VIDUALS WHO RES DUE TO PROVIDING	

MOBILE MEALS OF TOLEDO, INC 2001 FORM 990 34-1019610

PART II-STATEMENT OF FUNCTIONAL EXPENSES

COLUMN D-FUNDRAISING

DIRECT

Direct fundraising expenses are included in Part 1, line 9b for costs directly attributable to revenue shown on line 9a. The company has two major fundraising events each year.

MOBILE MEALS OF TOLEDO, INC. - 2002 BOARD OF DIRECTORS

EXECUTIVE COMMITTEE

President -George Brymer

Fifth/Third P O Box 1868 Toledo, OH 43603 H 474-6166 W 259-7843 F 259-7883

Vice President/Meals

Kathie Maxwell 7829 Hedingham Sylvania, OH 43560 H 882-1233

Vice President/Market

Jeff Cole Dana Corp - Corp Comm. 4500 Dorr Street Toledo, OH 43697 W 535-4704

President Elect - Bil Homka

One Government Center Ste 1620 Toledo, OH 43604 W 419-936-2652

Secretary -Leslie Ansberg

Health Care REIT
One Seagate, Ste 1500
Toledo, OH 43603
H 472-4003 W 247-2876
F 247-2826

Treasurer -Libby Boldt

6115 Glasgow Rd Sylvania, OH 43560 H 882-4809 W 843-6000 F 843-6099

Executive Director

Maureen Stevens 1946 N 13th St Toledo, OH 43624 H 385-6766 W 255-6710 F 255-5427

COMMITTEE CHAIRS

By-Laws & Human Resource

Barbara Gant King HCR Manor Care Summit Center P O Box 10086 Toledo, OH 43699 W 252-5516 F 252-5510

Community Outreach

Teresa Rueb Card Advertising P O Box 499 Temp, MI 48182-0499 W 734-850-9557 F 734-847-2446

Development - Chili

Development - Wine

Rob Snoad St Charles Mercy Hospital 2600 Navarre Ave Oregon, OH 43616 W 696-7739

Finance - Elaine Canning

Bostwick Braun 1946 N 13th Street Toledo, OH 43624 W 259-3903 F 259-3924

Long-Range/Strategic Planning

Tom Bedell Grogan Chrysler Plymouth 6100 Telegraph Rd Toledo, OH 43612 W 476-0761 F 476-4877

Nominating & Recruiting

Kathy Zacharias 5644 Golf Creek Rd Toledo, OH 43623 H 882-7443 F 882-6543

Program Services

Jeff Cole
Dana Corp - Corp Comm
4500 Dorr Street
Toledo, OH 43697
W 535-4704

AT-LARGE MEMBERS

Mohammed Alo 4940 Homerdale Ave Toledo, OH 43623 C 419-343-0061

Mark Holmes West Park Place 3501 Executive Pkwy Toledo, OH 43606 W 531-9221 F 531-4103

Susan Reynolds Attorney General's Office One Seagate, Suite 2150 Toledo, OH 43604 W 245-2550 H 471-9198

Rev Dr Steve Smith Collingwood Presbyterian Church 2108 Collingwood Blvd Toledo, OH 43620 W 243-3275

Tom Snivley Gordon Food Service 1450 Holland Road Maumee, OH 43537 W 893-5031

Maggie Thurber 3058 117th St. Toledo, OH 43611 H 729-4764 W 245-1854

Mark Wagoner, Jr Shumaker, Loop & Kendrick 1000 Jackson St Toledo, OH 43624 W 321-1412

Dean Wilson
Dana Commercial Credit
P O Box 931
Toledo, OH 43697
W 897-7499 F 322-7222

Tom Zaremba Roetzel & Andress One Seagate – Suite 999 Toledo, OH 43604 W 242-7985 or 254-5246 F 242-0316