

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning _____, **and ending** _____

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

C Name of organization: **GOODWILL INDUSTRIES OF NORTHEAST INDIANA, INC.**
 Doing business as: _____
 Number and street (or P O box if mail is not delivered to street address): **1516 MAGNAVOX WAY**
 Room/suite: _____
 City or town, state or province, country, and ZIP or foreign postal code: **FORT WAYNE IN 46804**

D Employer identification number: **35-1905018**

E Telephone number: **260-478-7617**

G Gross receipts \$: **13,991,689**

F Name and address of principal officer:
WILLIAM WARRINER
1516 MAGNAVOX WAY
FORT WAYNE IN 46804

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list (see instructions)

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

J Website: **FWGOODWILL.ORG**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1993**

M State of legal domicile: **IN**

H(c) Group exemption number ▶ _____

Part I Summary		Prior Year	Current Year
1 Briefly describe the organization's mission or most significant activities: GOODWILL PROVIDES OPPORTUNITIES FOR PEOPLE WITH DISABILITIES AND EMPLOYMENT BARRIERS TO BUILD INDEPENDENCE THROUGH EMPLOYMENT.			
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
3	Number of voting members of the governing body (Part VI, line 1a)	3	16
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	428
6	Total number of volunteers (estimate if necessary)	6	16
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0
8 Contributions and grants (Part VIII, line 1h)		5,645,068	5,469,702
9 Program service revenue (Part VIII, line 2g)			0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-2,255	4,241
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,478,962	3,231,096
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		9,121,775	8,705,039
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0
14 Benefits paid to or for members (Part IX, column (A), line 4)			0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		6,154,327	5,918,323
16a Professional fundraising fees (Part IX, column (A), line 11)			0
b Total fundraising expenses (Part IX, column (D), line 25)			0
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-14e)		3,266,642	3,126,777
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		9,420,969	9,045,100
19 Revenue less expenses Subtract line 18 from line 12		-299,194	-340,061
20 Total assets (Part X, line 16)		Beginning of Current Year	End of Year
		6,378,967	6,254,074
21 Total liabilities (Part X, line 26)		1,147,787	1,347,557
22 Net assets or fund balances Subtract line 21 from line 20		5,231,180	4,906,517

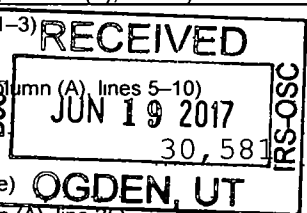
Part II Signature Block

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

Sign Here
 Signature of officer: *[Signature]* Date: **6-12-17**
 WILLIAM WARRINER PRESIDENT & CEO
 Type or print name and title

Paid Preparer Use Only
 Print/Type preparer's name: MICHAEL R. ZIEMBO, CPA
 Preparer's signature: *[Signature]* Date: **6-5-17**
 Check if PTIN self-employed P00294564
 Firm's name: **BADEN, GAGE & SCHROEDER, LLC** Firm's EIN: **35-1939627**
 Firm's address: **6920 POINTE INVERNESS WAY #300 FORT WAYNE, IN 46804-7926** Phone no: **260-422-2551**

SCANNED JUN 23 2017



936 10

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

GOODWILL PROVIDES OPPORTUNITIES FOR PEOPLE WITH DISABILITIES AND EMPLOYMENT BARRIERS TO BUILD INDEPENDENCE THROUGH EMPLOYMENT.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 8,209,539 including grants of \$) (Revenue \$)

SEE SCHEDULE O

FOUNDED LOCALLY IN 1937, GOODWILL PROVIDES OPPORTUNITIES FOR PEOPLE WITH DISABILITIES AND EMPLOYMENT BARRIERS TO BUILD INDEPENDENCE THROUGH EMPLOYMENT. GOODWILL ADDS UNIQUE VALUE IN OUR COMMUNITY BY EQUIPPING PEOPLE WHOSE OPTIONS ARE LIMITED BECAUSE OF DISABILITY, CRIMINAL HISTORY, LOW EDUCATION LEVEL, LACK OF WORK EXPERIENCE OR OTHER SIGNIFICANT BARRIERS WITH JOBS (43% OR 176 EMPLOYEES AND 100% OF 605 CLIENTS SERVED FIT THESE CRITERIA IN 2016). \$2,619,088 IN WAGES (55% OF TOTAL PAYROLL) WERE EARNED BY PEOPLE WITH DISABILITIES AND EMPLOYMENT BARRIERS EMPLOYED BY GOODWILL LAST YEAR. THE PROJECTED FIRST-YEAR WAGES OF 95 CLIENTS PLACED INTO WORK EVALUATIONS (13) OR COMMUNITY EMPLOYMENT (82) TOTALED AN ADDITIONAL

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 8,209,539

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c 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 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
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-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		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)		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c 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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question number, response, Yes, and No. Rows include questions 1a through 14b regarding IRS filings and tax compliance.

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 or note to any line in this Part VI

Section 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. 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.		
	16		
1b	Enter the number of voting members included in line 1a, above, who are independent.		
	16		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body?	X	
8b	b Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		X

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

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

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed <input type="checkbox"/> IN
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20	State the name, address, and telephone number of the person who possesses the organization's books and records <input type="checkbox"/> LARRY HOLZINGER 1516 MAGNAVOX WAY FORT WAYNE IN 46804 260-478-7617

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MELISSA BEBER SECRETARY	1.00 0.00	X		X				0	0	0
(2) STAN BIEBERICH DIRECTOR	1.00 0.00	X						0	0	0
(3) DOUG BARROW DIRECTOR	1.00 0.00	X						0	0	0
(4) JACQUELYN FELLER DIRECTOR	1.00 0.00	X						0	0	0
(5) AMY HOCHSTETLER DIRECTOR	1.00 0.00	X						0	0	0
(6) JODI LEAMON DIRECTOR	1.00 0.00	X						0	0	0
(7) LAURA MASER VICE CHAIR	1.00 0.00	X		X				0	0	0
(8) TIMOTHY MANGES DIRECTOR	1.00 0.00	X						0	0	0
(9) TODD NICHOLS DIRECTOR	1.00 0.00	X						0	0	0
(10) JOE O'CONNOR TREASURER	1.00 0.00	X		X				0	0	0
(11) RANDY RUSK CHAIR	1.00 0.00	X		X				0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) WIL SMITH DIRECTOR	1.00 0.00	X						0	0	0
(13) JANIE WALDRON DIRECTOR	1.00 0.00	X						0	0	0
(14) EDWARD WELLING DIRECTOR	1.00 0.00	X						0	0	0
(15) GARY YARGER DIRECTOR	1.00 0.00	X						0	0	0
(16) STEVEN ZACHER DIRECTOR	1.00 0.00	X						0	0	0
(17) WILLIAM WARRINER PRESIDENT & CEO	40.00 0.00			X				115,845	0	22,445
1b Sub-total								115,845		22,445
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								115,845		22,445

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3		X
4		X
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ZUMBRUN CONSTRUCTION FORT WAYNE IN 46802	3110 EDWARDS ST CONSTRUCTION	154,151

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **1**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	389,884				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	5,079,818				
	g Noncash contributions included in lines 1a-1f		\$ 5,001,327				
	h Total. Add lines 1a-1f			5,469,702			
	Program Service Revenue	2a	Busn. Code				
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)		8,762			8,762
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		b Less rental exps					
		c Rental inc or (loss)					
		d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less cost or other basis & sales exps		4,521			
		c Gain or (loss)		-4,521			
		d Net gain or (loss)		-4,521	-4,521		
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a					
		b Less direct expenses					
		c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses							
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a		8,510,044				
	b Less cost of goods sold		5,282,129				
	c Net income or (loss) from sales of inventory		3,227,915			3,227,915	
Miscellaneous Revenue		Busn. Code					
11a MISCELLANEOUS INCOME			3,181			3,181	
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			3,181				
12 Total revenue. See instructions			8,705,039	-4,521	0	3,239,858	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	138,289		132,083	6,206
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,659,230	4,271,418	387,529	283
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	70,105	52,299	17,806	
9 Other employee benefits	612,797	592,738	19,948	111
10 Payroll taxes	437,902	398,626	38,763	513
11 Fees for services (non-employees)				
a Management				
b Legal	1,000	615	385	
c Accounting	29,013		29,013	
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 Schedule O)	7,312	1,206	6,106	
12 Advertising and promotion	230,467	200,878	8,239	21,350
13 Office expenses	279,011	252,048	26,796	167
14 Information technology	1,947		1,947	
15 Royalties				
16 Occupancy	1,599,876	1,557,793	41,270	813
17 Travel	265,357	254,990	10,057	310
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	16,235	8,777	6,766	692
20 Interest	39,272	25,198	14,074	
21 Payments to affiliates	91,803	91,803		
22 Depreciation, depletion, and amortization	257,547	221,353	36,194	
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 O.)				
a MERCHANT AND BANK FEES	197,590	180,432	17,158	
b POSTAGE AND SHIPPING	57,639	56,047	1,505	87
c RENTAL AND MAINTENANCE EQ	35,193	27,944	7,249	
d MISCELLANEOUS	17,515	15,374	2,092	49
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	9,045,100	8,209,539	804,980	30,581
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	796,107	1	756,838
	2 Savings and temporary cash investments	2,449,197	2	1,951,675
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	137,355	4	172,202
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	491,018	8	482,721
	9 Prepaid expenses and deferred charges	104,220	9	140,386
	10a Land, buildings, and equipment. cost or other basis Complete Part VI of Schedule D	10a 5,882,229		
	b Less: accumulated depreciation	10b 3,145,529	10c 2,377,697	2,736,700
	11 Investments—publicly traded securities		11	
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	23,373	15	13,552
16 Total assets. Add lines 1 through 15 (must equal line 34)	6,378,967	16	6,254,074	
Liabilities	17 Accounts payable and accrued expenses	467,307	17	477,663
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	633,471	23	843,988
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	47,009	25	25,906
	26 Total liabilities. Add lines 17 through 25	1,147,787	26	1,347,557
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	5,231,180	27	4,906,517
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	5,231,180	33	4,906,517	
34 Total liabilities and net assets/fund balances	6,378,967	34	6,254,074	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,705,039
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,045,100
3	Revenue less expenses. Subtract line 2 from line 1	3	-340,061
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,231,180
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	1,580
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	13,818
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	4,906,517

Part XII Financial Statements and Reporting

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

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

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

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

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

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

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

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

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2016

Open to Public Inspection

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.**

▶ **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

Department of the Treasury
Internal Revenue Service

Name of the organization **GOODWILL INDUSTRIES OF NORTHEAST INDIANA, INC.**

Employer identification number
35-1905018

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	5,201,772	5,295,970	5,075,847	5,645,068	5,469,702	26,688,359
2 Tax revenues levied for the organization'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	5,201,772	5,295,970	5,075,847	5,645,068	5,469,702	26,688,359
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						26,688,359

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	5,201,772	5,295,970	5,075,847	5,645,068	5,469,702	26,688,359
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	10,187	6,732	4,172	4,819	8,762	34,672
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)	2,318	5,062	5,305	7,347	3,181	23,213
11 Total support. Add lines 7 through 10						26,746,244
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	99.78 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	99.78 %
16a 33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

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

Section A. Public Support

Table with 7 columns: (a) 2012, (b) 2013, (c) 2014, (d) 2015, (e) 2016, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2012, (b) 2013, (c) 2014, (d) 2015, (e) 2016, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12)

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Line Number, Percentage. Row 15: Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) - 15 - %; Row 16: Public support percentage from 2015 Schedule A, Part III, line 15 - 16 - %

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Line Number, Percentage. Row 17: Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) - 17 - %; Row 18: Investment income percentage from 2015 Schedule A, Part III, line 17 - 18 - %

19a 33 1/3% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows include questions 1 through 10b regarding supported organizations, including their designation, status, and control.

Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
 - a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
 - b A family member of a person described in (a) above?
 - c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

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

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

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

	Yes	No
1		

Section D. All Type III Supporting Organizations

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

	Yes	No
1		
2		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)
 - a The organization satisfied the Activities Test Complete line 2 below.
 - b The organization is the parent of each of its supported organizations. Complete line 3 below
 - c The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions).

2 Activities Test Answer (a) and (b) below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement
- 3 Parent of Supported Organizations Answer (a) and (b) below.
 - a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
 - b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

	Yes	No
2a		
2b		
3a		
3b		

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

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

Section A - Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Pnor Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.35	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI) See instructions	
7	Total annual distributions. Add lines 1 through 6	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9	Distributable amount for 2016 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required-explain in Part VI) See instructions		
3	Excess distributions carryover, if any, to 2016:		
a			
b			
c	From 2013		
d	From 2014		
e	From 2015		
f	Total of lines 3a through e		
g	Applied to underdistributions of prior years		
h	Applied to 2016 distributable amount		
i	Carryover from 2011 not applied (see instructions)		
j	Remainder Subtract lines 3g, 3h, and 3i from 3f		
4	Distributions for 2016 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2016 distributable amount		
c	Remainder Subtract lines 4a and 4b from 4		
5	Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI See instructions		
6	Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions		
7	Excess distributions carryover to 2017. Add lines 3j and 4c		
8	Breakdown of line 7:		
a			
b	Excess from 2013		
c	Excess from 2014		
d	Excess from 2015		
e	Excess from 2016		

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

PART II, LINE 10 - OTHER INCOME DETAIL

MISCELLANEOUS INCOME	\$	23,213
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization

GOODWILL INDUSTRIES OF NORTHEAST INDIANA, INC.

Employer identification number

35-1905018

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate value of contributions to (during year), Aggregate value of grants from (during year), Aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
2a Preservation of land for public use (e.g., recreation or education)
2b Protection of natural habitat
2c Preservation of open space
2d Preservation of a historically important land area
2e Preservation of a certified historic structure

Table with 2 columns: Held at the End of the Tax Year. Rows 2a-2d: Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure included in (a), Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Yes No

Part V Endowment Funds.

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

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

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

- a Board designated or quasi-endowment %
- b Permanent endowment %
- c Temporarily restricted endowment %

The percentages on lines 2a, 2b, and 2c should equal 100%

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

- (i) unrelated organizations
- (ii) related organizations

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Yes No

	Yes	No
3a(i)		
3a(ii)		
3b		

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		91,805		91,805
b Buildings		2,384,561	1,261,694	1,122,867
c Leasehold improvements		1,620,559	945,472	675,087
d Equipment		1,785,304	938,363	846,941
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)				2,736,700

Part VII Investments—Other Securities.

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

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

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) ACCRUED OBLIGATION ON INTEREST SWAP	24,085	
(3) ACCRUED LEASE EXPENSE	1,821	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	25,906	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	8,706,619
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	1,580	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	1,580
3	Subtract line 2e from line 1		3	8,705,039
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	8,705,039

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	9,045,100
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	9,045,100
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	9,045,100

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

PART X - FIN 48 FOOTNOTE

GOODWILL IS A PUBLICLY SUPPORTED ORGANIZATION AND IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THEREFORE, NO PROVISION FOR INCOME TAXES IS INCLUDED IN THESE FINANCIAL STATEMENTS. GOODWILL HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A)(2) OF THE INTERNAL REVENUE CODE.

THE ACCOUNTING STANDARD THAT PROVIDES GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, GOODWILL MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE

Part XIII Supplemental Information (continued)

LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. EXAMPLES OF TAX POSITIONS INCLUDE THE TAX-EXEMPT STATUS OF GOODWILL AND VARIOUS POSITIONS RELATED TO THE POTENTIAL SOURCES OF UNRELATED BUSINESS TAXABLE INCOME. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THERE WERE NO UNRECOGNIZED TAX BENEFITS IDENTIFIED OR RECORDED AS LIABILITIES FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015.

GOODWILL FILES TAX RETURNS IN THE U.S. FEDERAL JURISDICTION AND THE STATE OF INDIANA. GOODWILL BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS PRIOR TO 2013.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2016

**Open To Public
Inspection**

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization

**GOODWILL INDUSTRIES OF NORTHEAST
INDIANA, INC.**

Employer identification number

35-1905018

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		5,001,327	RESALE VALUE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded				
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

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

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

	Yes	No
30a		X
31	X	
32a		X

Part II

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

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016**Open to Public
Inspection**

Name of the organization	GOODWILL INDUSTRIES OF NORTHEAST INDIANA, INC.	Employer identification number	35-1905018
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FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

\$1,052,818.

GOODWILL IS OPERATING UNDER ITS EIGHTH CONSECUTIVE HIGHEST-POSSIBLE THREE-YEAR ACCREDITATION FROM THE COMMISSION ON ACCREDITATION OF REHABILITATION FACILITIES (CARF) FOR ITS COMMUNITY EMPLOYMENT SERVICES AND JOB DEVELOPMENT. GOODWILL'S CARF ACCREDITATION IS A PUBLIC COMMITMENT TO: 1) INVOLVE CLIENTS IN USING SERVICES THAT OPTIMIZE THEIR CHOSEN GOALS AND OUTCOMES; 2) BE ACCOUNTABLE TO OUR FUNDING SOURCES, REFERRAL AGENCIES AND COMMUNITY AT LARGE; AND 3) DELIVER EFFICIENT, CLIENT-FOCUSED PROGRAMS AND SERVICES THAT MEET NATIONAL STANDARDS FOR PERFORMANCE. THE ORGANIZATION IS SCHEDULED TO BE RE-SURVEYED BY CARF IN THE FALL OF 2018.

GOODWILL IS GOVERNED BY A 15 PERSON UNCOMPENSATED INDEPENDENT BOARD OF DIRECTORS. THE GOODWILL BOARD AVERAGED 82% MEETING ATTENDANCE OVER CALENDAR YEAR 2016. 88% OF BOARD MEMBERS MADE A FINANCIAL CONTRIBUTION TO GOODWILL DURING 2016. 100% OF BOARD MEMBERS SIGNED AND ADHERED TO CODE OF ETHICS AND CONFLICT OF INTEREST POLICIES. PEOPLE WITH DISABILITIES, VETERANS AND PEOPLE OF DIFFERENT RACE, ETHNICITY, SEX, RELIGION, ETC. COMPRISED 60% OF GOODWILL'S BOARD.

THE ORGANIZATIONAL VALUES THAT GUIDE GOODWILL'S OPERATION AND WORKFORCE INCLUDE: RESPECT; STEWARDSHIP; ETHICS; GROWTH; AND WORK. GOODWILL'S EXPIRING (3-YEAR) 2014-16 STRATEGIC PLAN WAS TRANSITIONED TO A NEW 2017-19 PLAN AT THE CLOSE OF 2016. THE STRATEGIC IMPERATIVES OF GOODWILL'S 2017-19

Name of the organization

GOODWILL INDUSTRIES OF NORTHEAST

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35-1905018

STRATEGIC PLAN CONTINUE TO FOCUS ON GROWTH AND INCLUDE: GROW THE MISSION; GROW THE BUSINESS; GROW THE PEOPLE; GROW ORGANIZATIONAL EXCELLENCE; AND GROW THE BRAND.

GOODWILL COLLABORATES WITH MANY DIFFERENT ORGANIZATIONS: IN DIVISION OF DISABILITY & REHABILITATION SERVICES; SOCIAL SECURITY ADMINISTRATION; TRANSITION PARTNERS OF NORTHEAST IN; GAPP GROUP (GOODWILL, PARK CENTER & PATHFINDERS COLLABORATION); NORTHEAST IN SCHOOL SYSTEMS; DELL (COMPUTER RECYCLING); AND GOODWILL INDUSTRIES INTERNATIONAL. COLLABORATING WITH 5 OTHER AGENCIES ACROSS NORTHERN INDIANA, GOODWILL WAS APPROVED FOR FUNDING FROM THE STATE TO PROVIDE PRE-EMPLOYMENT TRANSITION SERVICES TO YOUTH WITH DISABILITIES AGES 14-22. THIS LED TO SIGNIFICANT EXPANSION OF GOODWILL'S SERVICES TO STUDENTS WITH DISABILITIES IN THE EAST ALLEN COUNTY SCHOOL SYSTEM.

PROFESSIONAL AFFILIATIONS INCLUDED: INDIANA ASSOCIATION OF REHABILITATION FACILITIES (INARF); GOODWILL INDUSTRIES INTERNATIONAL, INC.; GREATER FORT WAYNE, INC.; NORTHEAST INDIANA CHAMBERS OF COMMERCE (AUBURN, DECATUR, HUNTINGTON, WELLS AND WHITLEY); SOCIAL SECURITY ADMINISTRATION (TICKET-TO-WORK); INDIANA ASSOCIATION FOR PEOPLE IN SUPPORTED EMPLOYMENT (INAPSE); INDIANA UNIVERSITY INSTITUTE ON DISABILITY & COMMUNITY; NORTHERN INDIANA HUMAN RESOURCES ASSOCIATION (NIHRA); TRANSITION PARTNERS OF NORTHEAST INDIANA; GAPP GROUP (GOODWILL, PARK CENTER & PATHFINDERS COLLABORATION); TRANSPORTATION ADVISORY COMMITTEE; AND THE DISABILITY EXPO.

THE ONGOING INTERNAL AND EXTERNAL AUDITS THAT EVALUATE GOODWILL'S PROGRAM AND ORGANIZATIONAL EFFECTIVENESS INCLUDE: CARF ON-SITE SURVEY OF PROGRAMS;

Name of the organization

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GOODWILL INDUSTRIES OF NORTHEAST

35-1905018

BETTER BUSINESS BUREAU STANDARDS FOR CHARITABLE ACCOUNTABILITY; INDEPENDENT FINANCIAL AUDIT BY EXTERNAL CPA FIRM; GOODWILL INDUSTRIES INTERNATIONAL MEMBERSHIP STANDARDS; AND OUTCOMES MEASURES REPORT ON PROGRAM SERVICES. GOODWILL FINANCIAL MANAGEMENT ANALYTICS FOR 2016 WERE VERY HEALTHY FOR THE NONPROFIT SECTOR AND INCLUDED: 90.9% OF TOTAL BUDGET TO PROGRAMS; 9.0% MANAGEMENT/GENERAL EXPENSE; AND .1% FUNDRAISING EXPENSE.

GOODWILL'S SERVICE AREA COVERS 10 NORTHEAST INDIANA COUNTIES-ALLEN, ADAMS, DEKALB, HUNTINGTON, JAY, LAGRANGE, NOBLE, STEUBEN, WELLS, AND WHITLEY. GOODWILL PROVIDES EMPLOYMENT COUNSELING, JOB TRAINING AND JOBS FOR PEOPLE WHO FACE BARRIERS TO FINDING AND KEEPING A JOB, INCLUDING PEOPLE WITH DISABILITIES, RECIPIENTS OF PUBLIC ASSISTANCE, AND PEOPLE WITH LIMITED EDUCATION OR WORK HISTORY. GOODWILL'S MISSION IS CARRIED OUT THROUGH A VARIETY OF PROGRAMS AND SERVICES, ALL WITH ONE GOAL-TO HELP PEOPLE WITH DISABILITIES OR OTHER DISADVANTAGES BECOME MORE SUCCESSFUL, PRODUCTIVE, AND INDEPENDENT. OUR SERVICES ARE INDIVIDUALIZED TO MEET THE NEEDS OF PROGRAM PARTICIPANTS AND INCLUDE:

1. DISCOVERY (JOB SHADOWS, INFORMATIONAL INTERVIEWS, SITUATIONAL ASSESSMENTS, WORK EXPERIENCE, VOCATIONAL GUIDANCE AND COUNSELING, VOCATIONAL TESTING AND CAREER EXPLORATION);

2. JOB DEVELOPMENT AND PLACEMENT (RESUME PREPARATION, JOB SEEKING SKILLS TRAINING, INTERVIEWING, NETWORKING, JOB READINESS TRAINING AND PLACEMENT ASSISTANCE);

3. JOB COACHING / ON THE JOB SUPPORTS (LEARNING JOB DUTIES, UNDERSTANDING

Name of the organization

GOODWILL INDUSTRIES OF NORTHEAST

Employer identification number

35-1905018

THE RULES OF WORK, EMPLOYMENT COUNSELING, NATURAL SUPPORT STRATEGIES AND EMPLOYMENT ADVOCACY); AND

4. EXTENDED SERVICES / FOLLOW-ALONG (ONGOING SUPPORT PROVIDED TO HELP PERSONS WITH SEVERE DISABILITIES MAINTAIN EMPLOYMENT).

THE NUMBER OF PEOPLE (CLIENTS) WITH DISABILITIES / EMPLOYMENT BARRIERS SERVED BY GOODWILL INCREASED FROM 416 (2015) TO 605 (2016) - A 189 OR 31% INCREASE.

234 PEOPLE RECEIVED JOB PLACEMENT INTENSIVE SERVICES IN 2016 INCLUDING: \$1,052,818.00 PROJECTED FIRST-YEAR WAGES OF 95 CLIENTS PLACED INTO COMMUNITY EMPLOYMENT OR WORK EVALUATIONS; STARTING WAGES RANGED FROM \$7.25 TO \$20.00 HOURLY; 59% OF CLIENTS PLACED INTO EMPLOYMENT HAD MULTIPLE DISABILITIES AND 41% A SINGLE DISABILITY; COGNITIVE (55%), MENTAL HEALTH (17%), SENSORY (10%) AND PHYSICAL/HEALTH RELATED (18%) WERE THE PRIMARY DISABILITY CATEGORIES OF GOODWILL CLIENTS SERVED.

96 INDIVIDUALS WITH DISABILITIES (88 HIGH-SCHOOL TRANSITION STUDENTS AND 8 STUDENTS IN A RETAIL TRAINING CLASS) FROM AREA SCHOOL SYSTEMS, RECEIVED WORK EXPERIENCE AND TRAINING OPPORTUNITIES AT GOODWILL.

14,525 WAS THE TOTAL NUMBER OF INDIVIDUAL SERVICES PROVIDED TO GOODWILL'S CLIENTS AT NO COST TO THEM IN 2016.

GOODWILL RELIES UPON THE SALES OF DONATED ITEMS TO CREATE JOBS AND FUND OUR PROGRAMS FOR PEOPLE WITH DISABILITIES, DISADVANTAGES, AND OTHER BARRIERS TO

Name of the organization

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EMPLOYMENT. IN FACT, 90.9 CENTS OF EVERY DOLLAR IS REINVESTED BACK INTO OUR COMMUNITY THROUGH JOBS, SERVICES AND PROGRAM RELATED EXPENSE. SIMPLY PUT, DONATIONS HELP GOODWILL CREATE JOBS AND PUT PEOPLE BACK TO WORK, AND WE BELIEVE THAT WORK HAS THE POWER TO TRANSFORM LIVES. THE POWER OF WORK ALLOWS THOSE WE EMPLOY AND SERVE TO GAIN SELF-ESTEEM, SKILLS, EXPERIENCE AND THE RESOURCES NEEDED TO LEAD MORE INDEPENDENT LIVES.

428 PEOPLE WHO WORKED FOR GOODWILL (IN JOBS RANGING FROM EMPLOYMENT SERVICES STAFF, STORE STAFF, TRUCK DRIVERS, MATERIAL HANDLERS, E-COMMERCE TECHNICIANS, ADMINISTRATIVE AND SUPPORT STAFF) PAID \$1,258,337.00 IN FEDERAL, STATE AND LOCAL TAXES.

515,538 PURCHASES WERE MADE IN GOODWILL'S 10 THRIFT STORES BY WOMEN, MEN, TEENAGERS, FAMILIES AND SENIOR CITIZENS WHO WERE PROVIDED A LOW-COST, HIGH-QUALITY SHOPPING EXPERIENCE. GOODWILL'S WIDE-ARRAY OF DONATED MERCHANDISE ATTRACTS SHOPPERS OF ALL AGES AND FROM ALL WALKS OF LIFE.

43,712 ADDITIONAL ON-LINE PURCHASES WERE MADE THROUGH GOODWILL'S E-COMMERCE STORE SHOPGOODWILL.COM.

\$484,269.00 WAS COLLECTED IN SALES TAX THROUGH THE GOODWILL STORES AND REMITTED TO THE STATE OF INDIANA.

\$2,843,857.00 WAS RETURNED TO THE LOCAL ECONOMY FROM THE OPERATION OF GOODWILL'S PROGRAMS AND SERVICES.

1,817 HOUSEHOLDS, BUSINESSES, CHURCHES AND NEIGHBORHOODS RECEIVED FREE

Name of the organization

Employer identification number

GOODWILL INDUSTRIES OF NORTHEAST

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PICK-UP OF DONATED GOODS FROM GOODWILL. THE DONATION OF HOUSEHOLD GOODS ENTRUSTED TO GOODWILL, DRIVES THE ORGANIZATION'S ABILITY TO HELP PEOPLE OVERCOME THEIR BARRIERS TO EMPLOYMENT.

3,357,247 POUNDS OF DONATED TEXTILES, SHOES, PLASTICS AND OTHER GOODS UNSUITABLE FOR SALE IN THE GOODWILL STORES WERE REPURPOSED OR RECYCLED AND KEPT OUT OF THE WASTE STREAM. GOODWILL HAS BEEN A PIONEER OF THE "REDUCE, REUSE, REPURPOSE" PRACTICE OF UNWANTED, BUT STILL USABLE, ITEMS TO HELP CREATE A HEALTHIER ENVIRONMENT.

FINALLY, AN ADDITIONAL 111,946 ELECTRONIC WASTE POUNDS (COMPUTERS) WERE RECYCLED, AT NO COST TO THE DONORS, THROUGH GOODWILL'S PARTNERSHIP WITH DELL RECONNECT AND DIVERTED FROM AREA LANDFILLS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE GOODWILL CEO SHALL ENSURE THAT TAX PAYMENTS AND OTHER GOVERNMENT-ORDERED PAYMENTS OR FILINGS ARE FILED IN A TIMELY AND ACCURATE MANNER (WITHOUT USE OF EXTENSIONS UNLESS REQUIRED BY UNUSUAL CIRCUMSTANCES). THE CEO SHALL SIGN AND CERTIFY THAT THE IRS FEDERAL FORM 990 IS ACCURATE AND COMPLETE. THE FINANCE & RISK MANAGEMENT COMMITTEE SHALL REVIEW (FOR COMPLETENESS AND ACCURACY) AND APPROVE THE IRS FORM FEDERAL 990 ANNUAL TAX FILING PRIOR TO SUBMISSION, AND THE FULL BOARD SHALL RECEIVE A COPY OF THE DOCUMENT BEFORE ITS SUBMISSION. THE COMMITTEE'S REVIEW OF THE FEDERAL FORM 990 SHALL BE SUMMARIZED IN MEETING MINUTES AND INCLUDE THE FOLLOWING POINTS: DATE OF THE REVIEW, THE BOARD MEMBERS IN ATTENDANCE, SCOPE OF THE REVIEW, AND FEEDBACK AND/OR SUGGESTED REVISIONS.

FEEDBACK AND/OR SUGGESTED REVISIONS SHALL BE TRANSMITTED VIA EMAIL OR

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TELEPHONE (BY PERSONS DESIGNATED BY THE COMMITTEE) DIRECTLY TO THE INDEPENDENT FINANCIAL AUDITORS ENGAGED TO COMPLETE THE FEDERAL FORM 990.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE BOARD, OFFICERS, AND MANAGEMENT EMPLOYEES HAVE THE RESPONSIBILITY OF ADMINISTERING THE AFFAIRS OF GOODWILL HONESTLY AND PRUDENTLY, AND OF EXERCISING THEIR BEST CARE, SKILL, AND JUDGMENT FOR THE SOLE BENEFIT OF GOODWILL. THOSE PERSONS SHALL EXERCISE THE UTMOST GOOD FAITH IN ALL TRANSACTIONS INVOLVED IN THEIR DUTIES, AND THEY SHALL NOT USE THEIR POSITIONS WITH GOODWILL OR KNOWLEDGE GAINED THEREFROM FOR THEIR PERSONAL BENEFIT. THE INTERESTS OF THE ORGANIZATION MUST BE THE FIRST PRIORITY IN ALL DECISIONS AND ACTIONS. ALL OFFICERS, MANAGEMENT EMPLOYEES AND BOARD MEMBERS SHALL FULLY ADHERE TO THE CONFLICT OF INTEREST POLICY, ANNUALLY DISCLOSE IN WRITING ANY ACTIVITY OR RELATIONSHIP, WHICH MAY BE PERCEIVED AS A CONFLICT OF INTEREST, AND A RECORD OF THAT DISCLOSURE IS MAINTAINED.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE GOODWILL EXECUTIVE COMMITTEE SHALL ALSO SERVE AS THE "COMPENSATION COMMITTEE" TO CONDUCT THE ANNUAL PERFORMANCE EVALUATION OF AND GOAL-SETTING WITH THE GOODWILL PRESIDENT/CEO. GOODWILL WILL FOLLOW THE PROCEDURE OF "REBUTTABLE PRESUMPTION" TO ENSURE COMPLIANCE WITH IRS GUIDELINES (IRC 4958) THAT PLACES RESTRICTIONS ON THE EXECUTIVE COMPENSATION OF "DISQUALIFIED PERSONS" WITHIN TAX-EXEMPT ORGANIZATIONS. GOODWILL WILL MEET THE THREE CRITERIA ESSENTIAL TO ESTABLISH THAT A TRANSACTION WAS NOT AN EXCESS BENEFIT TRANSACTION: (1) THE TRANSACTION WAS APPROVED IN ADVANCE BY AN AUTHORIZED BODY OF THE NONPROFIT ORGANIZATION COMPOSED OF INDEPENDENT/UNRELATED INDIVIDUALS WHO DO NOT HAVE A CONFLICT OF INTEREST;

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(2) THE AUTHORIZED BODY OBTAINED RELIED UPON APPROPRIATE DATA, SUCH AS A COMPENSATION REPORT OR PROOF OF FAIR MARKET VALUE, AS TO COMPARABILITY BEFORE MAKING ITS DECISION; AND (3) THE AUTHORIZED BODY ADEQUATELY DOCUMENTED THE BASIS FOR ITS DETERMINATION AT THE TIME IT MADE ITS DECISION.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
SEE PART VI, SECTION B, LINE 15A.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION CONSISTENT WITH THE REQUIREMENTS OF SECTION 6104(D) OF THE INTERNAL REVENUE CODE AND THE REGULATIONS HEREUNDER, COPIES OF THE ORGANIZATION'S FEDERAL FORM 990 SHALL BE MADE AVAILABLE, UPON REQUEST, IN A CURRENT, ACCESSIBLE AND TIMELY MANNER TO ANY INDIVIDUALS WHO REQUEST IT. THE FEDERAL FORM 990 SHALL ALSO BE POSTED ON GOODWILL'S WEBSITE FOR PUBLIC INSPECTION.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

CHANGE IN INTEREST RATE SWAP \$ 13,818