

Form **990**
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 private foundations)

Do not enter social security numbers on this form as it may be made public

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2019
Open to Public Inspection

A For the **2019** calendar year, or tax year beginning **01-01-2019**, and ending **12-31-2019**

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 \$ 15,796,335

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)
H(c) Group exemption number ▶

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

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
GOODWILL INDUSTRIES OF NORTHEAST INDIANA, INC EMPOWERS AND PREPARES PEOPLE FOR INDEPENDENCE THROUGH TRAINING, PERSONAL GROWTH AND WORK

2 Check this box 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 2019 (Part V, line 2a)	5	448
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 39	7b	

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	5,453,609	6,302,190
9 Program service revenue (Part VIII, line 2g)		0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	793	12,682
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,538,010	3,727,262
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,992,412	10,042,134
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)	5,515,587	6,169,080
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 7,483		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,348,868	3,504,039
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	8,864,455	9,673,119
19 Revenue less expenses Subtract line 18 from line 12	127,957	369,015

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	5,610,242	5,936,567
21 Total liabilities (Part X, line 26)	1,212,527	1,169,837
22 Net assets or fund balances Subtract line 21 from line 20	4,397,715	4,766,730

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: ***** Date: 2020-05-28
 WILLIAM WARRINER PRESIDENT & CEO
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: Preparer's signature: Date: 2020-05-28
 Check if self-employed PTIN: P00294564
 Firm's name: ▶ BADEN GAGE & SCHROEDER LLC Firm's EIN: ▶ 35-1939627
 Firm's address: ▶ 6920 POINTE INVERNESS WAY 300 FORT WAYNE, IN 468047926 Phone no: (260) 422-2551

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 INDUSTRIES OF NORTHEAST INDIANA, INC EMPOWERS AND PREPARES PEOPLE FOR INDEPENDENCE THROUGH TRAINING, PERSONAL GROWTH AND WORK

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 \$ 8,897,881 including grants of \$) (Revenue \$ 3,723,522)
See Additional Data

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 ▶ 8,897,881

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		No
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		No
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		
11a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
11b	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		No
11c	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		No
11d	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		No
11e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		No
11f	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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	Yes	
12b	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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
14b	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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
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? If "Yes," complete Schedule I, Parts I and II		No

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		No
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? If "Yes," complete Schedule L, Part I		No
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? If "Yes," complete Schedule L, Part I		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		No
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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		No
28b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		No
28c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
35b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		No
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	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

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

Table with 3 main columns: Question/Description, Answer Box, and Yes/No columns. Rows include questions 2a through 16 regarding employee reporting, tax returns, gross income, foreign accounts, prohibited transactions, deductible contributions, and charitable trusts.

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



Section A. Governing Body and Management

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

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

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

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply; 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year; 20 State the name, address, and telephone number of the person who possesses the organization's books and records.

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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) WILLIAM WARRINER PRESIDENT &	40 00			X				126,157	0	20,952
(2) MELISSA BEBER CHAIR	1 00	X		X				0	0	0
(3) STAN BIEBERICH DIRECTOR	1 00	X						0	0	0
(4) DOUG BARROW SECRETARY	1 00	X		X				0	0	0
(5) NICHOLAS ELKINS DIRECTOR	1 00	X						0	0	0
(6) JACQUELYN FELLER DIRECTOR	1 00	X						0	0	0
(7) CHAD GLASSBURN DIRECTOR	1 00	X						0	0	0
(8) MATT HENRY DIRECTOR	1 00	X						0	0	0
(9) AMY HOCHSTETLER DIRECTOR	1 00	X						0	0	0
(10) ROBERT LEE DIRECTOR	1 00	X						0	0	0
(11) TIMOTHY MANGES DIRECTOR	1 00	X						0	0	0
(12) TODD NICHOLS DIRECTOR	1 00	X						0	0	0
(13) JOE O'CONNOR TREASURER	1 00	X		X				0	0	0
(14) RANDY RUSK DIRECTOR	1 00	X						0	0	0
(15) WIL SMITH DIRECTOR	1 00	X						0	0	0
(16) EDWARD WELLING DIRECTOR	1 00	X						0	0	0
(17) STEVEN ZACHER VICE CHAIR	1 00	X		X				0	0	0

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				
1b Sub-Total											
c Total from continuation sheets to Part VII, Section A											
d Total (add lines 1b and 1c)								126,157		20,952	

1b Sub-Total ▶

c Total from continuation sheets to Part VII, Section A ▶

d Total (add lines 1b and 1c) ▶

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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 ▶

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	590,876		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	5,711,314		
	g Noncash contributions included in lines 1a - 1f \$	1g	5,532,535		
h Total. Add lines 1a-1f		6,302,190			

Program Service Revenue	Business Code					
2a						
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)			12,682			12,682	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6a Gross rents	6a	(i) Real	(ii) Personal				
			6b Less rental expenses	6b				
		6c Rental income or (loss)	6c					
		d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other				
			7b Less cost or other basis and sales expenses	7b				
		7c Gain or (loss)	7c					
		d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	8a						
			8b Less direct expenses	8b				
		c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities See Part IV, line 19	9a						
9b Less direct expenses			9b					
c Net income or (loss) from gaming activities								
10a Gross sales of inventory, less returns and allowances	10a			9,477,723				
		10b Less cost of goods sold	10b	5,754,201				
	c Net income or (loss) from sales of inventory				3,723,522		3,723,522	
Miscellaneous Revenue	Business Code							
11a MISCELLANEOUS INCOME				3,740		3,740		
b								
c								
d All other revenue								
e Total. Add lines 11a-11d				3,740				
12 Total revenue. See instructions				10,042,134		3,739,944		

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	147,109		144,384	2,725
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	4,936,079	4,618,992	317,087	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	74,309	61,524	12,785	
9 Other employee benefits	544,787	527,791	16,761	235
10 Payroll taxes	466,796	432,164	34,413	219
11 Fees for services (non-employees)				
a Management				
b Legal	10,591		10,591	
c Accounting	37,573		37,573	
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)	8,028	2,397	5,631	
12 Advertising and promotion	172,028	161,668	6,920	3,440
13 Office expenses	315,997	274,872	40,773	352
14 Information technology				
15 Royalties				
16 Occupancy	1,810,273	1,769,388	40,604	281
17 Travel	326,680	316,276	10,305	99
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	17,636	12,733	4,831	72
20 Interest	29,421	19,023	10,398	
21 Payments to affiliates	90,756	90,756		
22 Depreciation, depletion, and amortization	286,840	241,343	45,497	
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	243,969	231,043	12,926	
b POSTAGE AND SHIPPING	77,957	76,044	1,893	20
c RENTAL AND MAINTENANCE EQ	46,222	35,548	10,674	
d MISCELLANEOUS	30,068	26,319	3,709	40
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	9,673,119	8,897,881	767,755	7,483
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	953,082	1	1,225,059
	2 Savings and temporary cash investments	1,620,838	2	1,776,631
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	223,101	4	240,347
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	507,977	8	559,041
	9 Prepaid expenses and deferred charges	120,933	9	121,410
	10a Land, buildings, and equipment—cost or other basis—Complete Part VI of Schedule D	6,069,227		
	b Less accumulated depreciation	4,074,322		
		2,155,860	10c	1,994,905
	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	28,451	15	19,174	
16 Total assets. Add lines 1 through 15 (must equal line 34)	5,610,242	16	5,936,567	
Liabilities	17 Accounts payable and accrued expenses	538,224	17	581,935
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	674,303	23	587,902
	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		25	
	26 Total liabilities. Add lines 17 through 25	1,212,527	26	1,169,837
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	4,397,715	27	4,766,730
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	4,397,715	32	4,766,730	
33 Total liabilities and net assets/fund balances	5,610,242	33	5,936,567	

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	10,042,134
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,673,119
3	Revenue less expenses Subtract line 2 from line 1	3	369,015
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,397,715
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	4,766,730

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

Software ID:**Software Version:****EIN:** 35-1905018**Name:** GOODWILL INDUSTRIES OF NORTHEAST INDIANA INC

Form 990 (2019)

Form 990, Part III, Line 4a:

SEE SCHEDULE O GOODWILL WAS FOUNDED IN 1902 IN BOSTON, MA BY REV EDGAR J HELMS, A METHODIST MINISTER AND EARLY SOCIAL INNOVATOR HELMS COLLECTED UNWANTED HOUSEHOLD GOODS AND CLOTHING IN WEALTHIER AREAS OF THE CITY AND EMPLOYED JOBLESS MEN AND WOMEN TO REFURBISH THEM INCOME FROM THE RESOLD GOODS PAID THE WORKER'S WAGES THE SYSTEM WORKED, AND THE GOODWILL PHILOSOPHY OF "A HAND UP, NOT A HAND OUT" WAS BORN TODAY REVEREND HELM'S PHILOSOPHY FLOURISHES AMONG 157 INDEPENDENT, COMMUNITY-BASED GOODWILL MEMBER AGENCIES IN THE UNITED STATES AND CANADA, AS WELL AS 14 INTERNATIONAL AFFILIATES IN OTHER COUNTRIES INCLUDING SOUTH KOREA, FINLAND, PHILIPPINES, TRINIDAD, VENEZUELA, THAILAND, BRAZIL, MEXICO, PANAMA, COSTA RICA AND URUGUAY THE GOODWILL CAN TRACE ITS FORT WAYNE ROOTS BACK TO 1936, WHEN REVEREND HELMS PROPOSED A FEDERATION OF GOODWILL INDUSTRIES ACROSS NORTHERN INDIANA THE FORT WAYNE GOODWILL WAS INCORPORATED WITH THE INDIANA SECRETARY OF STATE IN 1937 AND OPENED ITS DOORS ON JANUARY 3, 1938 AT 112 EAST COLUMBIA STREET GOODWILL INDUSTRIES OF NORTHEAST INDIANA, INC, HEADQUARTERED IN FORT WAYNE, EMPOWERS AND PREPARES PEOPLE FOR INDEPENDENCE THROUGH TRAINING, PERSONAL GROWTH AND WORK WE BELIEVE THAT WORK IS THE KEY FACTOR IN THE ABILITY OF PEOPLE TO ACHIEVE DESIRABLE LIFE OUTCOMES WITH IT COMES MORE THAN A PAYCHECK OR BENEFITS WORK PROVIDES A SENSE OF PURPOSE, BUILDS SELF-ESTEEM, CREATES INDEPENDENCE, AND OPPORTUNITY TO PARTICIPATE IN THE GREATER ECONOMIC AND SOCIAL LIFE OF OUR COMMUNITY EVERY PERSON WHO DONATES TO, SHOPS IN OUR STORES, HIRES SOMEONE THROUGH GOODWILL, OR SPREADS THE WORD ABOUT OUR MISSION, CREATES OPPORTUNITIES FOR OUR FRIENDS, FAMILY AND NEIGHBORS WITH DISABILITIES AND DISADVANTAGES 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 BARRIER WITH JOBS (77% OR 344 EMPLOYEES AND 100% OF 693 CLIENTS SERVED FIT THESE CRITERIA IN 2019) 4,106,863 00 MILLION IN WAGES (82% OF TOTAL PAYROLL) WERE EARNED BY PEOPLE WITH DISABILITIES AND EMPLOYMENT BARRIERS EMPLOYED BY GOODWILL LAST YEAR THE PROJECTED FIRST-YEAR WAGES OF 34 CLIENTS PLACED INTO WORK EVALUATIONS OR COMMUNITY EMPLOYMENT TOTALED AN ADDITIONAL 486,737 00 GOODWILL IS OPERATING UNDER ITS NINTH 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 GOODWILL INDUSTRIES OF NORTHEAST INDIANA, INC IS GOVERNED BY A 16 PERSON UNCOMPENSATED, INDEPENDENT VOLUNTEER BOARD OF DIRECTORS THE GOODWILL BOARD AVERAGED 85% MEETING ATTENDANCE OVER CALENDAR YEAR 2019 100% OF BOARD MEMBERS MADE A FINANCIAL CONTRIBUTION TO GOODWILL DURING 2019 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 50% OF GOODWILL'S BOARD THE ORGANIZATIONAL VALUES THAT GUIDE GOODWILL'S OPERATION AND WORKFORCE INCLUDE RESPECT, STEWARDSHIP, ETHICS, GROWTH, AND WORK THE STRATEGIC IMPERATIVES OF GOODWILL'S 2017-19 STRATEGIC PLANS 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, TRANSITION PARTNERS OF NORTHEAST IN, GAPP GROUP (GOODWILL, PARK CENTER & PATHFINDERS COLLABORATION), NORTHEAST IN SCHOOL SYSTEMS, DELL (COMPUTER RECYCLING), AND GOODWILL INDUSTRIES INTERNATIONAL PARTNERING WITH 5 OTHER AGENCIES ACROSS NORTHERN INDIANA (OPPORTUNITY ENTERPRISES, LOGAN COMMUNITY RESOURCES, PATHFINDERS, CORVILLA AND PARK CENTER), GOODWILL PROVIDES PRE-EMPLOYMENT TRANSITION SERVICES TO YOUTH WITH DISABILITIES AGES 14-22 THIS LED TO PARTNERSHIPS WITH ANGOLA HIGH SCHOOL, CROSSROAD CHILD & FAMILY SERVICES, DEKALB HIGH SCHOOL, EAST ALLEN ALTERNATIVE SCHOOL, EAST NOBLE HIGH SCHOOL, EASTSIDE JR/SR HIGH SCHOOL, FREEMONT HIGH SCHOOL, GARRETT HIGH SCHOOL, HERITAGE JR/SR HIGH SCHOOL, NEW HAVEN HIGH SCHOOL, WOODLAN JR/SR HIGH SCHOOL, IN CORRECTIONS CAREER ACADEMY AND LEO HIGH SCHOOL GOODWILL INDUSTRIES' PRE-ETS IS PROVIDING JOB EXPLORATION COUNSELING, WORK-BASED LEARNING EXPERIENCES, COUNSELING ON POSTSECONDARY OPPORTUNITIES, WORKPLACE READINESS, AND INSTRUCTION OF SELF-ADVOCACY TO STUDENTS WITH DISABILITIES PROFESSIONAL AFFILIATIONS (2019) INCLUDED INDIANA ASSOCIATION OF REHABILITATION FACILITIES (INARF), GOODWILL INDUSTRIES INTERNATIONAL, INC, 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, NATIONAL ASSOCIATION OF SOCIAL WORKERS, THE COMMISSION ON ACCREDITATION OF REHABILITATION FACILITIES (CARF), AND THE DISABILITY EXPO THE ONGOING INTERNAL AND EXTERNAL AUDITS THAT EVALUATE GOODWILL'S PROGRAM AND ORGANIZATIONAL EFFECTIVENESS INCLUDED CARF ON-SITE SURVEY OF PROGRAMS, INDEPENDENT FINANCIAL AUDIT BY EXTERNAL CPA FIRM, GOODWILL INDUSTRIES INTERNATIONAL MEMBERSHIP STANDARDS, AND OUTCOMES MEASURES REPORT ON PROGRAM SERVICES GOODWILL FINANCIAL MANAGEMENT ANALYTICS FOR 2019 WERE VERY HEALTHY FOR THE NONPROFIT SECTOR AND INCLUDED 91 4% OF TOTAL BUDGET TO PROGRAMS, 8 5% 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, YOUTH 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 THE RULES OF WORK, EMPLOYMENT COUNSELING, NATURAL SUPPORT STRATEGIES AND EMPLOYMENT ADVOCACY), 4 EXTENDED SERVICES / FOLLOW-ALONG (ONGOING SUPPORT PROVIDED TO HELP PERSONS WITH SEVERE DISABILITIES MAINTAIN EMPLOYMENT), AND 5 PRE-EMPLOYMENT TRANSITION SERVICES (TO YOUTH WITH DISABILITIES AGES 14- 22) INCLUDING JOB EXPLORATION COUNSELING, WORK-BASED LEARNING EXPERIENCES, COUNSELING ON POSTSECONDARY OPPORTUNITIES, WORKPLACE READINESS, AND INSTRUCTION OF SELF-ADVOCACY TO STUDENTS WITH DISABILITIES THE NUMBER OF CLIENTS WITH DISABILITIES AND/OR EMPLOYMENT BARRIERS SERVED BY GOODWILL IN 2019 TOTALED 693 125 PEOPLE RECEIVED JOB PLACEMENT INTENSIVE SERVICES IN 2019 INCLUDING 486,737 00 PROJECTED FIRST-YEAR WAGES OF 34 CLIENTS PLACED INTO COMMUNITY EMPLOYMENT OR WORK EVALUATIONS, STARTING WAGES RANGED FROM 7 25 TO 17 00 HOURLY, 62% OF CLIENTS PLACED INTO EMPLOYMENT HAD MULTIPLE DISABILITIES AND 38% A SINGLE DISABILITY THE BREAKDOWN OF PERSONS' SERVED PRIMARY DISABILITIES INCLUDED (62% COGNITIVE) LEARNING DISABILITY, AUTISM, ADHD, TRAUMATIC BRAIN INJURY, ASPERGER'S, MODERATE INTELLECTUAL AND STROKE, (23% SENSORY) HEARING IMPAIRMENT, DEAF, GLAUCOMA, RETINOPATHY, VISUAL IMPAIRMENT AND LEGALLY BLIND, (9% MENTAL HEALTH) MENTAL ILLNESS, BIPOLAR AND SCHIZOPHRENIA, AND (6% PHYSICAL) COPD AND DWARFISM 316 WAS THE NUMBER OF HIGH-SCHOOL AGED STUDENTS WITH DISABILITIES (FROM NORTHEAST INDIANA SCHOOL SYSTEMS) THAT RECEIVED WORK EXPERIENCE AND TRAINING OPPORTUNITIES AT GOODWILL GOODWILL RELIES UPON THE SALES OF DONATED ITEMS TO CREATE JOBS AND FUND OUR PROGRAMS FOR PEOPLE WITH DISABILITIES, DISADVANTAGES, AND OTHER BARRIERS TO EMPLOYMENT IN FACT, 91 4 CENTS OF EVERY DOLLAR IS REINVESTED BACK INTO OUR NORTHEAST INDIANA 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

SCHEDULE A
(Form 990 or
990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2019

Open to Public Inspection

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	5,645,068	5,469,702	5,500,357	5,453,609	6,302,190	28,370,926
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	5,645,068	5,469,702	5,500,357	5,453,609	6,302,190	28,370,926
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						28,370,926

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	5,645,068	5,469,702	5,500,357	5,453,609	6,302,190	28,370,926
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,819	8,762	9,652	934	12,682	36,849
9	Net income from unrelated business activities, whether or not the business is regularly carried on				2,007	2,740	4,747
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	7,347	3,181	2,013	5,852		18,393
11	Total support. Add lines 7 through 10						28,430,915
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**

Section C. Computation of Public Support Percentage

14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	99.790%
15	Public support percentage for 2018 Schedule A, Part II, line 14	15	99.800%

16a 33 1/3% support test—2019. 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

b 33 1/3% support test—2018. 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

17a 10%-facts-and-circumstances test—2019. 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

b 10%-facts-and-circumstances test—2018. 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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
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

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. 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—2018. 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 on line 12 of 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

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described 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? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		
		11a	
		11b	
		11c	

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> 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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
		2a	
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? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
		2b	
3	Parent of Supported Organizations Answer (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? <i>Provide details in Part VI.</i>		
		3a	
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
		3b	

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (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 .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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 2019 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-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2019			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2019 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2020. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

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

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART II, LINE 10	MISCELLANEOUS INCOME 18,393

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2019

Open to Public Inspection

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

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? Yes No

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)
- Preservation of land for public use (e.g., recreation or education)
 - Protection of natural habitat
 - Preservation of open space
 - Preservation of an historically important land area
 - Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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? Yes No

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)? Yes No

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

b 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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
b Assets included in Form 990, Part X ▶ \$ _____

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
- | | Amount |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

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

	(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 | Yes | No |
| (ii) related organizations | | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

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

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		2,411,926	1,442,676	969,250
c Leasehold improvements		1,630,791	1,215,972	414,819
d Equipment		1,934,705	1,415,674	519,031
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				1,994,905

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)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	

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	10,042,134
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		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	10,042,134
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	10,042,134

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	9,673,119
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	9,673,119
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	9,673,119

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 35-1905018

Name: GOODWILL INDUSTRIES OF NORTHEAST
INDIANA INC

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 3, PART X	<p>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 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, 2019 AND 2018 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 2016</p>

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2019

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

Open to Public Inspection

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		5,532,535	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	
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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?

	Yes	No
30a		No
31	Yes	
32a		No
33		

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

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

Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

2019

Open to Public Inspection

Department of the Treasury

Name of the organization

GOODWILL INDUSTRIES OF NORTHEAST INDIANA INC

Employer identification number

35-1905018

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PAGE 2, PART III, LINE 4A</p>	<p>SEE SCHEDULE O GOODWILL WAS FOUNDED IN 1902 IN BOSTON, MA BY REV EDGAR J HELMS, A METHOD IST MINISTER AND EARLY SOCIAL INNOVATOR HELMS COLLECTED UNWANTED HOUSEHOLD GOODS AND CLOT HING IN WEALTHIER AREAS OF THE CITY AND EMPLOYED JOBLESS MEN AND WOMEN TO REFURBISH THEM INCOME FROM THE RESOLD GOODS PAID THE WORKER'S WAGES THE SYSTEM WORKED, AND THE GOODWILL PHILOSOPHY OF "A HAND UP, NOT A HAND OUT" WAS BORN TODAY REVEREND HELM'S PHILOSOPHY FLOUR ISHES AMONG 157 INDEPENDENT, COMMUNITY-BASED GOODWILL MEMBER AGENCIES IN THE UNITED STATES AND CANADA, AS WELL AS 14 INTERNATIONAL AFFILIATES IN OTHER COUNTRIES INCLUDING SOUTH KOR EA, FINLAND, PHILIPPINES, TRINIDAD, VENEZUELA, THAILAND, BRAZIL, MEXICO, PANAMA, COSTA RIC A AND URUGUAY THE GOODWILL CAN TRACE ITS FORT WAYNE ROOTS BACK TO 1936, WHEN REVEREND HEL MS PROPOSED A FEDERATION OF GOODWILL INDUSTRIES ACROSS NORTHERN INDIANA THE FORT WAYNE GO ODWILL WAS INCORPORATED WITH THE INDIANA SECRETARY OF STATE IN 1937 AND OPENED ITS DOORS O N JANUARY 3, 1938 AT 112 EAST COLUMBIA STREET GOODWILL INDUSTRIES OF NORTHEAST INDIANA, I NC , HEADQUARTERED IN FORT WAYNE, EMPOWERS AND PREPARES PEOPLE FOR INDEPENDENCE THROUGH TR AINING, PERSONAL GROWTH AND WORK WE BELIEVE THAT WORK IS THE KEY FACTOR IN THE ABILITY OF PEOPLE TO ACHIEVE DESIRABLE LIFE OUTCOMES WITH IT COMES MORE THAN A PAYCHECK OR BENEFITS WORK PROVIDES A SENSE OF PURPOSE, BUILDS SELF-ESTEEM, CREATES INDEPENDENCE, AND OPPORTUN ITY TO PARTICIPATE IN THE GREATER ECONOMIC AND SOCIAL LIFE OF OUR COMMUNITY EVERY PERSON WHO DONATES TO, SHOPS IN OUR STORES, HIRES SOMEONE THROUGH GOODWILL, OR SPREADS THE WORD A BOUT OUR MISSION, CREATES OPPORTUNITIES FOR OUR FRIENDS, FAMILY AND NEIGHBORS WITH DISABIL ITIES AND DISADVANTAGES GOODWILL ADDS UNIQUE VALUE IN OUR COMMUNITY BY EQUIPPING PEOPLE W HOSE OPTIONS ARE LIMITED BECAUSE OF DISABILITY, CRIMINAL HISTORY, LOW EDUCATION LEVEL, LAC K OF WORK EXPERIENCE OR OTHER SIGNIFICANT BARRIER WITH JOBS (77% OR 344 EMPLOYEES AND 100% OF 693 CLIENTS SERVED FIT THESE CRITERIA IN 2019) 4,106,863 00 MILLION IN WAGES (82% OF TOTAL PAYROLL) WERE EARNED BY PEOPLE WITH DISABILITIES AND EMPLOYMENT BARRIERS EMPLOYED BY GOODWILL LAST YEAR THE PROJECTED FIRST-YEAR WAGES OF 34 CLIENTS PLACED INTO WORK EVALUAT IONS OR COMMUNITY EMPLOYMENT TOTALED AN ADDITIONAL 486,737 00 GOODWILL IS OPERATING UNDER ITS NINTH CONSECUTIVE HIGHEST-POSSIBLE THREE- YEAR ACCREDITATION FROM THE COMMISSION ON A CCREDITATION OF REHABILITATION FACILITIES (CARF) FOR ITS COMMUNITY EMPLOYMENT SERVICES AND JOB DEVELOPMENT GOODWILL'S CARF ACCREDITATION IS A PUBLIC COMMITMENT TO 1) INVOLVE CLIE NTS 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, C LIENT-FOCUSED PROGRAMS AND SERVICES THAT MEET NATIONAL STANDARDS FOR PERFORMANCE GOODWILL INDUSTRIES OF NORTHEAST INDIANA, INC IS GOVERNED BY A 16 PERSON UNCOMPENSATED, INDEPENDE NT VOLUNTEER BOARD OF DIRECTOR</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4A	<p>S THE GOODWILL BOARD AVERAGED 85% MEETING ATTENDANCE OVER CALENDAR YEAR 2019 100% OF BOARD MEMBERS MADE A FINANCIAL CONTRIBUTION TO GOODWILL DURING 2019 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 50% OF GOODWILL'S BOARD THE ORGANIZATIONAL VALUES THAT GUIDE GOODWILL'S OPERATION AND WORKFORCE INCLUDE RESPECT, STEWARDSHIP, ETHICS, GROWTH, AND WORK THE STRATEGIC IMPERATIVES OF GOODWILL'S 2017-19 STRATEGIC PLANS 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, TRANSITION PARTNERS OF NORTHEAST IN, GAPP GROUP (GOODWILL, PARK CENTER & PATHFINDERS COLLABORATION), NORTHEAST IN SCHOOL SYSTEMS, DELL (COMPUTER RECYCLING), AND GOODWILL INDUSTRIES INTERNATIONAL PARTNERING WITH 5 OTHER AGENCIES ACROSS NORTHERN INDIANA (OPPORTUNITY ENTERPRISES, LOGAN COMMUNITY RESOURCES, PATHFINDERS, CORVILLA AND PARK CENTER), GOODWILL PROVIDES PRE-EMPLOYMENT TRANSITION SERVICES TO YOUTH WITH DISABILITIES AGES 14-22 THIS LED TO PARTNERSHIPS WITH ANGOLA HIGH SCHOOL, CROSSROAD CHILD & FAMILY SERVICES, DEKALB HIGH SCHOOL, EAST ALLEN ALTERNATIVE SCHOOL, EAST NOBLE HIGH SCHOOL, EASTSIDE JR/SR HIGH SCHOOL, FREEMONT HIGH SCHOOL, GARRETT HIGH SCHOOL, HERITAGE JR/SR HIGH SCHOOL, NEW HAVEN HIGH SCHOOL, WOODLAN JR/SR HIGH SCHOOL, IN CORRECTIONS CAREER ACADEMY AND LEO HIGH SCHOOL GOODWILL INDUSTRIES' PRE-ETS IS PROVIDING JOB EXPLORATION COUNSELING, WORK-BASED LEARNING EXPERIENCES, COUNSELING ON POSTSECONDARY OPPORTUNITIES, WORKPLACE READINESS, AND INSTRUCTION OF SELF-ADVOCACY TO STUDENTS WITH DISABILITIES PROFESSIONAL AFFILIATIONS (2019) INCLUDED INDIANA ASSOCIATION OF REHABILITATION FACILITIES (INARF), GOODWILL INDUSTRIES INTERNATIONAL, INC, 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, NATIONAL ASSOCIATION OF SOCIAL WORKERS, THE COMMISSION ON ACCREDITATION OF REHABILITATION FACILITIES (CARF), AND THE DISABILITY EXPO THE ONGOING INTERNAL AND EXTERNAL AUDITS THAT EVALUATE GOODWILL'S PROGRAM AND ORGANIZATIONAL EFFECTIVENESS INCLUDED CARF ON-SITE SURVEY OF PROGRAMS, INDEPENDENT FINANCIAL AUDIT BY EXTERNAL CPA FIRM, GOODWILL INDUSTRIES INTERNATIONAL MEMBERSHIP STANDARDS, AND OUTCOMES MEASURES REPORT ON PROGRAM SERVICES GOODWILL FINANCIAL MANAGEMENT ANALYTICS FOR 2019 WERE VERY HEALTHY FOR THE NONPROFIT SECTOR AND INCLUDED 91.4% OF TOTAL BUDGET TO PROGRAMS, 8.5% MANAGEMENT/GENERAL EXPENSE, AND 1% FUNDRAISING EXPENSE GOODWILL'S SERVICE AREA COVERS 10 N</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PAGE 2, PART III, LINE 4A</p>	<p>ORTHEAST INDIANA COUNTIES-ALLEN, ADAMS, DEKALB, HUNTINGTON, JAY, LAGRANGE, NOBLE, STEUBEN, WELLS, AND WHITLEY GOODWILL PROVIDES EMPLOYMENT COUNSELING, JOB TRAINING AND JOBS FOR PE OPLE WHO FACE BARRIERS TO FINDING AND KEEPING A JOB, INCLUDING PEOPLE WITH DISABILITIES, Y OUTH 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 SERV ICES, ALL WITH ONE GOAL- TO HELP PEOPLE WITH DISABILITIES OR OTHER DISADVANTAGES BECOME MO RE SUCCESSFUL, PRODUCTIVE, AND INDEPENDENT OUR SERVICES ARE INDIVIDUALIZED TO MEET THE NE EDS OF PROGRAM PARTICIPANTS AND INCLUDE 1 DISCOVERY (JOB SHADOWS, INFORMATIONAL INTERVIEW S, SITUATIONAL ASSESSMENTS, WORK EXPERIENCE, VOCATIONAL GUIDANCE AND COUNSELING, VOCATIONA L TESTING AND CAREER EXPLORATION), 2 JOB DEVELOPMENT AND PLACEMENT (RESUME PREPARATION, JO B SEEKING SKILLS TRAINING, INTERVIEWING, NETWORKING, JOB READINESS TRAINING AND PLACEMENT ASSISTANCE), 3 JOB COACHING / ON THE JOB SUPPORTS (LEARNING JOB DUTIES, UNDERSTANDING THE RULES OF WORK, EMPLOYMENT COUNSELING, NATURAL SUPPORT STRATEGIES AND EMPLOYMENT ADVOCACY), 4 EXTENDED SERVICES / FOLLOW-ALONG (ONGOING SUPPORT PROVIDED TO HELP PERSONS WITH SEVERE DISABILITIES MAINTAIN EMPLOYMENT), AND 5 PRE-EMPLOYMENT TRANSITION SERVICES (TO YOUTH WITH DISABILITIES AGES 14- 22) INCLUDING JOB EXPLORATION COUNSELING, WORK-BASED LEARNING EXPER IENCES, COUNSELING ON POSTSECONDARY OPPORTUNITIES, WORKPLACE READINESS, AND INSTRUCTION OF SELF-ADVOCACY TO STUDENTS WITH DISABILITIES THE NUMBER OF CLIENTS WITH DISABILITIES AND/ OR EMPLOYMENT BARRIERS SERVED BY GOODWILL IN 2019 TOTALED 693 125 PEOPLE RECEIVED JOB PLA CEMENT INTENSIVE SERVICES IN 2019 INCLUDING 486,737 00 PROJECTED FIRST-YEAR WAGES OF 34 C LIENTS PLACED INTO COMMUNITY EMPLOYMENT OR WORK EVALUATIONS, STARTING WAGES RANGED FROM 7 25 TO 17 00 HOURLY, 62% OF CLIENTS PLACED INTO EMPLOYMENT HAD MULTIPLE DISABILITIES AND 38 % A SINGLE DISABILITY THE BREAKDOWN OF PERSONS' SERVED PRIMARY DISABILITIES INCLUDED (62 % COGNITIVE) LEARNING DISABILITY, AUTISM, ADHD, TRAUMATIC BRAIN INJURY, ASPERGER'S, MODERA TE INTELLECTUAL AND STROKE, (23% SENSORY) HEARING IMPAIRMENT, DEAF, GLAUCOMA, RETINOPATHY, VISUAL IMPAIRMENT AND LEGALLY BLIND, (9% MENTAL HEALTH) MENTAL ILLNESS, BIPOLAR AND SCHIZ OPHRENIA, AND (6% PHYSICAL) COPD AND DWARFISM 316 WAS THE NUMBER OF HIGH-SCHOOL AGED STUD ENTS WITH DISABILITIES (FROM NORTHEAST INDIANA SCHOOL SYSTEMS) THAT RECEIVED WORK EXPERIEN CE AND TRAINING OPPORTUNITIES AT GOODWILL GOODWILL RELIES UPON THE SALES OF DONATED ITEMS TO CREATE JOBS AND FUND OUR PROGRAMS FOR PEOPLE WITH DISABILITIES, DISADVANTAGES, AND OTH ER BARRIERS TO EMPLOYMENT IN FACT, 91 4 CENTS OF EVERY DOLLAR IS REINVESTED BACK INTO OUR NORTHEAST INDIANA COMMUNITY THROUGH JOBS, SERVICES AND PROGRAM RELATED EXPENSE SIMPLY PU T, DONATIONS HELP GOODWILL CREATE JOBS AND PUT PEOPLE BACK TO WORK, AND WE BELIEVE THAT WO RK HAS THE POWER TO TRANSFORM</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	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 TELEPHONE (BY PERSONS DESIGNATED BY THE COMMITTEE) DIRECTLY TO THE INDEPENDENT FINANCIAL AUDITORS ENGAGED TO COMPLETE THE FEDERAL FORM 990

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 12C	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.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15A	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, (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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15B	SEE PART VI, SECTION B, LINE 15A

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	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