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Dupartment of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning and ending	<u>g</u>
B Check if Please C Name of organization	D Employer identification number
use IRS JAMES C. DULIN GOODWILL INDUSTRIES FUNI	D
Address change print c/O RICHARD H. SCHOENFELD	
Name change Doing Business As	52-1051764
Initial See Number and street (or P 0 box if mail is not delivered to street address) Room/	
Terminated Instruc- TWO WISCONSIN CIRCLE 500	(301) 951-4455
Amended return City or town, state or country, and ZIP + 4	G Gross receipts \$ 2,102,829
Application CHEVY CHASE, MD 20815	H(a) Is this a group return
F Name and address of principal officer: ARMIGER L. JAGOE	for affiliates? Yes X No
8101 CONNECTICUT AVE, N-704, CHEVY CHASE,	MD H(b) Are all affiliates included? Yes Mo
I Tax-exempt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	If "No," attach a list. (see instructions)
J Website: ► N/A	H(c) Group exemption number ▶
· · · · · · · · · · · · · · · · · · ·	Year of formation 1975 M State of legal domicile D
Part I Summary	
Briefly describe the organization's mission or most significant activities: PROVIDE	
GREATER WASHINGTON AND GOODWILL INDUSTRIES Check this box In the organization discontinued its operations or disposed of Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of employees (Part V, line 2a) Total number of volunteers (estimate if necessary) Total gross unrelated business revenue from Part VIII, column (C), line 12	INTERNATIONAL
Check this box I if the organization discontinued its operations or disposed of	more than 25% of its net assets.
Number of voting members of the governing body (Part VI, line 1a)	3
4 Number of independent voting members of the governing body (Part VI, line 1b)	. 4
5 Total number of employees (Part V, line 2a)	5
6 Total number of volunteers (estimate if necessary)	6
7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a 0
b Net unrelated business taxable income from Form 990-T, line 34	7ь 0
	Prior Year Current Year
8 Contributions and grants (Part VIII, line 1h)	
9 Program service revenue (Part VIII, line 2g)	
9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	108,807. 31,526
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,660. 753
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	112,467. 32,279
13 Grants and similar amounts paid (Part IX, column (A), lines 1·3)	205,000. 165,000
14 Benefits paid to or for members (Part IX, column (A), line 4)	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	12,000. 22,000
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25)	
b Total fundraising expenses (Part IX, column (D), line 25)	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	41,614. 37,008
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	258,614. 224,008
19 Revenue less expenses. Subtract line 18 from line 12	-146,147191,729
RECEIVED	Beginning of Current Year End of Year
20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from Aire 20 8 2010	3,742,795. 3,551,066
건 Total liabilities (Part X, line 26) 경 경우 2010 전	
	3,742,795. 3,551,066
Part II Signature Block	
Under penalties of penury, I declare that I have examined the sorm including accompanying schedules and stater and complete Declaretion of preparer other than officer) is based and improve up in which preparer has any known	ments, and to the best of my knowledge and belief, it is true, correct, wledge
Sign Sign	5/10/10
Here Signature of officer	Date
ARMIGER 1 JAGOE, TRUSTEE	
Type or print name and title	
Preparer's Date	Check If Preparer's identifying number (see instructions)
Preparer's Signature Matthew Courts Bage 5/7/10	employed
	EIN ►
self-employed), address, and address, and self-employed address a	
Use Only yours if self-employed, address, and ZIP+4 11320 RANDOM HILLS ROAD, SUITE 600 FAIRFAX, VA 22030-7427	Phone no ► 703-218-3600
May the IRS discuss this return with the preparer shown above? (see instructions)	X Yes N
9322001 02-04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separat	te instructions. Form 990 (200

Par	t 🚻 Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: PROVIDE SUPPORT FOR GOODWILL OF GREATER WASHINGTON AND GOODWILL
	INDUSTRIES INTERNATIONAL
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 X No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
•	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 100,000 • including grants of \$ 100,000 •) (Revenue \$)
	TO PROVIDE FUNDS FOR GOODWILL OF GREATER WASHINGTON (DAVIS MEMORIAL
	GOODWILL INDUSTRIES)
	65.000
4b	(Code:) (Expenses \$ 65,000 • Including grants of \$ 65,000 •) (Revenue \$) TO PROVIDE FUNDS FOR GOODWILL INDUSTRIES INTERNATIONAL
	10 PROVIDE FUNDS FOR GOODWILL INDUSTRIES INTERNATIONAL
4c	(Code:) (Expenses \$ Including grants of \$) (Revenue \$)
-	,\
4d	Other program services. (Describe in Schedule O.)
<u> </u>	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ \$ 165,000.
_ <u>4e</u> _	Total program service expenses ►\$ 165,000. Form 990 (2009)
93200	2

Form 990 (2009)

Part IV Checklist of Required Schedules

C/O RICHARD H. SCHOENFELD

			Yes	No
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		<u>X</u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			i
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; 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	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			l
	as applicable	11		X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	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.			
•	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.			
•	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.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		1	Х
	Schedule D, Parts XI, XII, and XIII.	12	-	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes. No If "Yes." completing Schedule D. Parts XI. XII. and XIII is optional 12A X			
40		40		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
D	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		
13	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	13	-	
10	located outside the United States? If "Yes," complete Schedule F, Part III	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	<u></u> _	 	┌╌
• •	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	· · ·	 	† -
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u></u> -
	complete Schedule G, Part III	19		x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
	District Significant Specials St. Co. Co. Co. Co. Co. Co. Co. Co. Co. Co			

Form 990 (2009)

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	_X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,		İ	
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	_22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		İ	
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			.,
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			١,,
	Schedule K. If "No", go to line 25	24a	-	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	_		
	any tax-exempt bonds?	24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
ь	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			_U
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			l .
^-	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			v
00	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
_	instructions for applicable filing thresholds, conditions, and exceptions):	200		Х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was	200		
C	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	,	29		X
30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
30	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30	 	1
٥.	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	- 		
-	Schedule N. Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
-	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
-	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part Vi, lines 11 and 19?			
-	Note. All Form 990 filers are required to complete Schedule O	38	X	
				20000

Par	Statements Regarding Other IRS Filings and Tax Compliance	_		
			Yes	No
Ìda	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		ļ
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
	provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b_		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		v
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	_		v
	benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	7h		1
8	supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
	at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.	٠		-
	Did the organization make any taxable distributions under section 4966?	9a		1
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			ļ
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			1
	Gross income from members or shareholders			
-	Gross income from other sources (Do not net amounts due or paid to other sources against			
_	amounts due or received from them.)			
12a		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			1

52-1051764

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

3ec	tion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body	7							
b	Enter the number of voting members that are independent	7							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	ľ							
	officer, director, trustee, or key employee?	2		X					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors or trustees, or key employees to a management company or other person?	3		X					
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х					
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X					
6	Does the organization have members or stockholders?	6		X					
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			l					
	governing body?	7a		X					
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	ļ	X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year								
	by the following:								
а	The governing body?	8a	X	1,					
b	Each committee with authority to act on behalf of the governing body?	8ь		X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		v						
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X	Ь					
<u>sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)								
40-	Done the average translation have lead about any bronches are effiliated?	10a	Yes	No X					
	Does the organization have local chapters, branches, or affiliates?	Iva	-						
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10ь							
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Х						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	''							
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	ĺ	х					
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	120	-						
_	to conflicts?	12b							
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	100							
	in Schedule O how this is done	12c							
13	Does the organization have a written whistleblower policy?	13		X					
14	Does the organization have a written document retention and destruction policy?	14		Х					
15	Did the process for determining compensation of the following persons include a review and approval by independent	ľ							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a		X					
b	Other officers or key employees of the organization	15b	ļ	X					
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16a		X					
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation								
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			1					
<u></u>	exempt status with respect to such arrangements?	16b							
	List the states with which a copy of this Form 990 is required to be filed NONE								
17		hio for							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available. Check all that each	ible for							
	public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request								
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest polici	v and fine	ncial						
. 5	statements available to the public.	,, and IIIla	41 IUIAI						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organ	nization:	•						
	SUNTRUST BANK - (202) 879-6318								
	1445 NEW YORK AVE, NW, WASHINGTON, DC 20005-2158								
		Form	990	(2009)					

932006 02-04-10

Form 990 (2009) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)							(D)	(E)	(F)	
Name and Title	Average hours	Position (check all that apply)					lv)	Reportable compensation	Reportable compensation	Estimated amount of other compensation from the organization and related organizations	
	per week	Individual trustee or director	Institutional trustee Officer Key employee Highest compensated employee Former			from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)				
ARMIGER L. JAGOE PRUSTEE	0.20	v						2,000.	0.	0	
JAMES A. PARKER	0.20	┝			\vdash	\vdash	\vdash	2,000.	0.		
TRUSTEE	0.20	x						2,000.	0.	0	
VILLIAM C. YOWELL PRUSTEE	0.20	v						2,000.	0.	0	
ALAN R. SWENDIMAN						_	-				
PRUSTEE	0.20	X						10,000.	0.	0	
CHARLES E. PARDOE TRUSTEE	0.20	x			!			2,000.	0.	0	
VILLIAM C.D. BURR	0.20	x						2,000.	0.	0	
STEPHEN D. GAVIN FRUSTEE	0.20							2,000.	0.	0	
								2,000			
									-		

	t VII Section A. Officers, Directors, T (A)	(B)			(0	C)			(D)	(E))) 		
•	Name and title	Average hours	(с		Pos all 1		app	ly)	Reportable compensation	Reportable compensation		stimate nount	
		per week	Individual frustee or director	Institutional trustæe	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	f orç an	other npensa rom the ganizated related anizate	e Ion ed
												_	
													-
							-				_	_	
							-						
									00.000				
1 b 2	Total Total number of individuals (including but compensation from the organization	t not limited to ti	hose	liste	ed a	bov	e) wl	ho r	22,000. eceived more than \$100		· .		0.
3	Did the organization list any former office line 1a? If "Yes," complete Schedule J fo			e, ke	y en	olqn	yee,	or h	nighest compensated ei	mployee on	3	Yes	No X
4	For any individual listed on line 1a, is the and related organizations greater than \$1	sum of reportab	ole c							the organization	4		Х
5 Sec	Did any person listed on line 1a receive of the organization? If "Yes," complete Schettion B. Independent Contractors				from	any	y uni	relat	ted organization for serv	rices rendered to	5		Х
1	Complete this table for your five highest the organization. NONE	compensated in	dep	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of compe	nsation	from	
	(A) Name and busine	ss address							(B) Description of s	services	Comp	C) ensatio	n
						_							
	Total number of independent contractors	s (including but i	not l	ımıte	ed to	the	se li	stec	d above) who received r	nore than			
	\$100,000 in compensation from the orga		•				0				Form	990	2000)

C/O RICHARD H. SCHOENFELD Form 990 (2009) 52-1051764 Page 9 Part VIII Statement of Revenue (D) (B) (C) (A) Revenue excluded from tax under sections 512, Total revenue Related or Unrelated exempt function business revenue revenue 513, or 514 Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 9 Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f **Business Code** Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 71,243. other similar amounts) 71,243. Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory 2,030,833. b Less: cost or other basis 2,070,550 and sales expenses -39717.c Gain or (loss) -39,717.-39,717.d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events \triangleright 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c_Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** LITIGATION SETTLEMENTS 900099 651. 651. **b** MISCELLANEOUS INCOME 900099 102. d All other revenue 753 e Total. Add lines 11a-11d 32,279. 32,279. Total revenue. See instructions

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52-1051764 Page **10**

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) but are not required to complete columns (B). (C), and (D).

	All other organizations must comple			ete columns (B), (C), and	
	not include amounts reported on lines 6b, 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 governments and				
	organizations in the U.S. See Part IV, line 21	165,000.	165,000.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,			****	
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16			. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	22,000.		_22,000.	
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				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management .				
b	Legal				
С	Accounting	4,200.		4,200.	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	27,577.		27,577.	
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties .				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization	_			
23	Insurance				
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	BANK CUSTODIAN FEES	4,301.		4,301.	······································
b	FOREIGN TAX PAID	693.		693.	
c	MISCELLANEOUS	237.		237.	
d		-			
e					
f	All other expenses		-		
25	Total functional expenses. Add lines 1 through 24f	224,008.	165,000.	59,008.	0.
26	Joint costs. Check here ▶ ☐ If following	,	*		
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
93201	0 02-04-10				Form 990 (2009)

C/O RICHARD H. SCHOENFELD

-41 C F C	Balance Sheet	(A)	(B)
		Beginning of year	End of year
1	Cash - non-interest-bearing	1	
2	Savings and temporary cash investments	2	
3	Pledges and grants receivable, net	3	
4	Accounts receivable, net	4	
5	Receivables from current and former officers, directors, trustees, key		
	employees, and highest compensated employees. Complete Part II		
	of Schedule L	5	
6	Receivables from other disqualified persons (as defined under section		
	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		
	Part II of Schedule L	6	
7	Notes and loans receivable, net	7	
8	Inventories for sale or use	8	
į 9	Prepaid expenses and deferred charges	9	
10a	Land, buildings, and equipment: cost or other		
	basis. Complete Part VI of Schedule D 10a		
ь	Less: accumulated depreciation 10b	10c	
11	Investments - publicly traded securities	3,742,795. 11	3,551,066
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	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	3,742,795. 16	3,551,066
17	Accounts payable and accrued expenses	17	
18	Grants payable	18	
19	Deferred revenue	19	
20	Tax-exempt bond liabilities	20	
g 21	Escrow or custodial account liability. Complete Part IV of Schedule D	21	
21 22	Payables to current and former officers, directors, trustees, key employees,		
	highest compensated employees, and disqualified persons. Complete Part II		
4	of Schedule L	22	
23	Secured mortgages and notes payable to unrelated third parties	23	
24	Unsecured notes and loans payable to unrelated third parties	24	
25	Other liabilities. Complete Part X of Schedule D	25	
26	Total liabilities. Add lines 17 through 25	0. 26	C
	Organizations that follow SFAS 117, check here and complete		
3	lines 27 through 29, and lines 33 and 34.		
27	Unrestricted net assets	27	
28	Temporarily restricted net assets .	28	
29	Permanently restricted net assets	29	
Ē	Organizations that do not follow SFAS 117, check here X and		
5	complete lines 30 through 34.		
27 28 29 30 31 32	Capital stock or trust principal, or current funds	3,742,795. 30	3,551,066
2 31	Paid-in or capital surplus, or land, building, or equipment fund	0. 31	0
32	Retained earnings, endowment, accumulated income, or other funds	0. 32	C
33	Total net assets or fund balances .	3,742,795. 33	3,551,066
34	Total liabilities and net assets/fund balances	3,742,795. 34	3,551,066

JAMES C. DULIN GOODWILL INDUSTRIES FUND

52-1051764 Page **12** C/O RICHARD H. SCHOENFELD

			Yes	No
۱1	Accounting method used to prepare the Form 990: X Cash Cash Other	-		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		Х
С	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?	. 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
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?	3a		X
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.	3ь		

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. ► See separate instructions.

2009
Open to Public

Inspection

Dèpartment of the Treasury Internal Revenue Service

Name of the organization

JAMES C. DULIN GOODWILL INDUSTRIES FUND C/O RICHARD H. SCHOENFELD

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 11, check only one box.)

Employer identification number 52-1051764

1 🔲	A church, cor	nvention of churches	s, or association of churc	ches desci	ribed in se	ction 170	(b)(1)(A)(i)			
2			0(b)(1)(A)(ii). (Attach Sc							
з 🔲	A hospital or	a cooperative hospi	tal service organization of	described i	n section	170(b)(1)	(A)(iii).			
4 🔲	A medical res	search organization	operated in conjunction	with a hos	pıtal descr	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter t	he hospital's name.
	city, and stat									•
5 🔲	An organizati	on operated for the	benefit of a college or ur	niversity ov	vned or op	erated by	a governr	mental uni	t describe	ed in
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)							
6 🔲	A federal, sta	ite, or local governm	ent or governmental unit	described	d in sectio	n 170(b)(1)(A)(v).			
7 🔲	An organizati	on that normally rec	eives a substantial part o	of its supp	ort from a	governme	ntal unit o	r from the	general p	oublic described in
	section 170(b)(1)(A)(vi). (Comple	te Part II.)							
8 🗔	A community	trust described in s	ection 170(b)(1)(A)(vi). ((Complete	Part II.)					
9 🗀	An organizati	on that normally rec	eives: (1) more than 33 1	1/3% of its	support fi	rom contri	butions, m	nembershij	p fees, an	nd gross receipts from
			nctions - subject to certa							
			axable income (less sect							
	See section	509(a)(2). (Complete	Part III.)							
10 🔲	An organizati	on organized and or	perated exclusively to te	st for publi	c safety. S	See sectio	n 509(a)(4	l).		
11 X	An organizati	on organized and or	perated exclusively for th	ne benefit d	of, to perfo	orm the fur	nctions of,	or to carry	y out the	purposes of one or
	more publicly	supported organiza	ations described in section	on 509(a)(1	1) or sectio	on 509(a)(2	2). See se c	tion 509(a	a)(3). Che	eck the box that
	describes the	e type of supporting	organization and comple	et <u>e lin</u> es 1°	1e through	11h.				
	a Type I	l b ∟	J Type II d	: 🔲 Тур	e III - Func	tionally int	egrated		ďΧ	Type III - Other
e X	By checking	this box, I certify tha	it the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified p	persons other than
	foundation m	anagers and other t	han one or more publicly	supporte	d organiza	ations des	cribed in s	ection 509	9(a)(1) or s	section 509(a)(2).
f	If the organiz	ation received a writ	ten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e III		
	supporting of	rganization, check th	nis box							
g	Since August	t 17, 2006, has the c	organization accepted ar	ny gift or co	ontribution	from any	of the follo	owing pers	sons?	
	(i) A perso	n who directly or ind	rectly controls, either al	one or tog	ether with	persons o	lescribed i	ın (iı) and (i	iıı) below,	
	the gove	erning body of the si	upported organization?		-	=				11g(i) X
	(ii) A famıly	member of a persor	n described in (i) above?							11g(ii) X
	(iii) A 35% d	controlled entity of a	person described in (i) of	or (ii) above	∍?					11g(iii) X
h	Provide the f	ollowing information	about the supported org	ganızatıon((s).					
		· · · · · · · · · · · · · · · · · · ·	(III) Tune of	· · · · · · · · · · · · · · · · · · ·				1 4 3 3		
	of supported	(ii) EIN	(iii) Type of organization	r	rganization			(vi) is organizatio	the on in col	(vii) Amount of
org	anization		(described on lines 1-9	governing (sted in your document?			(i) organiz U.S	ed in the	support
			above or IRC section	Yes	,	Yes				
COODW	ILL OF		(see instructions)) SECTION	res	No	res	No	Yes	No	
		53-0196588		v		v		v		100 000
GOODW		53-0130366	SECTION	Х		X		X	 	100,000.
		53-0196517	· - ·	X		X		x		65,000.
TIADOG	TITED I	53-0190317	202(A)(I)					^	 	03,000.
-		··· -		 	 					

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Schedule A (Form 990 or 990-EZ) 2009

165,000.

932021 02-08-10

Total

(Complete only if you checked				(D)(T)(A)(IV) an		/1)
Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Tax revenues levied for the organ-						
ızation'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 The portion of total contributions						
by each person (other than a						
governmental unit or publicly						
supported organization) included						
on line 1 that exceeds 2% of the						
amount shown on line 11,						
column (f)				1		
6 Public support. Subtract line 5 from line 4						
Section B. Total Support				·	- ₁	
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest,						
dıvıdends, payments received on						
securities loans, rents, royalties		1				
and income from similar sources						
9 Net income from unrelated business						
activities, whether or not the		1				
business is regularly carried on						
10 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10		1	<u> </u>	<u> </u>		
12 Gross receipts from related activities,	etc. (see instruct	tions)			12	
13 First five years. If the Form 990 is for	rthe organization	's first, second, th	ird, fourth, or fifth t	ax year as a section	on 501(c)(3)	
organization, check this box and stor		·			 	<u> </u>
Section C. Computation of Publ					 	
14 Public support percentage for 2009 (I			column (f)) .	• • •	14	
15 Public support percentage from 2008					15	•
16a 33 1/3% support test - 2009. If the o	=			14 is 33 1/3% or r	more, check this bo	ox and
stop here. The organization qualifies						▶∟
b 33 1/3% support test - 2008. If the o	=			l line 15 is 33 1/3%	6 or more, check th	nis box
and stop here. The organization qual	• •					. ▶∟
17a 10% -facts-and-circumstances tes	_	=				
and if the organization meets the "fac			•	•	art IV how the orga	nization
meets the "facts-and-circumstances"	-	•		•		▶∟
b 10% -facts-and-circumstances tes	7	-				
more, and if the organization meets the						e
organization meets the "facts-and-circ		•	•			▶ ∟
18 Private foundation. If the organization	n did not check a	a box on line 13, 10	6a, 16b, 17a, or 17			
				Sch	edule A (Form 996	or 990-EZ) 200

Section A. Public Support	(=) 0005	(F) 0000	(=) 0007	(40,0000	(4) 0000	(A T . · ·
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)	t	1. 6		<u> </u>		<u> </u>
14 First five years. If the Form 990 is for t	ne organization	's tirst, second, thi	ra, tourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	zation,
check this box and stop here	Support D					P [_
Section C. Computation of Public					Tae I	
15 Public support percentage for 2009 (Iir		•	column (t))		15	
16 Public support percentage from 2008	*				16	
Section D. Computation of Invest					147	
17 Investment income percentage for 200	•	• • • • • • • • • • • • • • • • • • • •	ne 13, column (t))	•	17	
18 Investment income percentage from 20				. 45	18	17
19a 33 1/3% support tests - 2009. If the d						i / Is not ▶ □
more than 33 1/3%, check this box and	="			• • •		
b 33 1/3% support tests - 2008. If the c	-					and ⊾ □
line 18 is not more than 33 1/3%, chec			•		-	
20 Private foundation. If the organization	ald not check a	a box on line 14, 19	a, or 19b, check t	nis box and see ii	nstructions	

2 Employer identification number EOPLE WITH DISADVANTAGES PEOPLE WITH DISADVANTAGES 52-1051764 ORGANIZATION TO EDUCATE, RGANIZATION TO EDUCATE, Open to Public OMB No 1545-0047 2009 FRAIN, EMPLOY & PLACE TRAIN, EMPLOY & PLACE Inspection (h) Purpose of grant or assistance PROVIDE FUNDS FOR ROVIDE FUNDS FOR X Yes recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed me and address of organization (b) FIN (c) IRC section (d) Amount of I (d) Method of I (n) December of III (h) Primose Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection non-cash assistance (g) Description of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ö ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. JAMES C. DULIN GOODWILL INDUSTRIES FUND (d) Amount of 100,000 000'59 cash grant (c) IRC section if applicable SCHOENFELD 509(A)(1) 509(A)(2) 53-0196517 53-0196588 General Information on Grants and Assistance (e) C/O RICHARD H. criteria used to award the grants or assistance? DAVIS MEMORIAL GOODWILL INDUSTRIES DBA GOODWILL OF GREATER WASHINGTON 1 (a) Name and address of organization GOODWILL INDUSTRIES INTERNATIONAL - 2200 SOUTH DAKOTA AVENUE NE INC - 15810 INDIANOLA DRIVE or government WASHINGTON, DC 20018 ROCKVILLE, MD 20855 Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part : Partil

1

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Enter total number of section 501(c)(3) and government organizations

Enter total number of other organizations

Schedule I (Form 990) 2009

52-1051764

Schedule I (Form 990) 2009 C/O RICHARD H. SCHOENFELD

| Part iii | Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. SCHEDULE I, PART I, LINE 2: THE ORGANIZATON REVIEWS REPORTS PREPARED BY TI	de the information	formation required in Part I, I ZATON REVIEWS	line 2, and any other additional int	additional information.	
HAS THE GRANTEE	PRESENT	ATIONS TO	THE ORGANIZ	ATION'S	
TRUSTEES ON AN ANNUAL BASIS THAT EXPLAIN HOW THE GRANTEES	XPLAIN HO	OW THE GRA	NTEES HAVE	USED THE	
GRANT FUNDS.					

Schedule I (Form 990) 2009

932102 02-02-10

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

JAMES C. DULIN GOODWILL INDUSTRIES FUND C/O RICHARD H. SCHOENFELD

 $\begin{array}{c} \textbf{Employer identification number} \\ 52 - 1051764 \end{array}$

FORM 990, PART VI, SECTION A, LINE 8B: NOT APPLICABLE - ORGANIZATION DOES
NOT HAVE COMMITTEES
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PREPARED BY AN
INDEPENDENT CERTIFIED PUBLIC ACCOUNTANT THEN REVIEWED AND SIGNED BY A
TRUSTEE.
FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, POLICIES, AND
FINANCIAL INFORMATION IS MADE AVAILABLE TO THE PUBLIC UPON REQUEST.
FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECTORS, ETC:
ARMIGER L. JAGOE - 8101 CONN AVE, N-704, CHEVY CHASE, MD 20815
JAMES A. PARKER - 10315 GEORGETOWN PIKE, GREAT FALLS, VA 22066
WILLIAM C. YOWELL - 3822 NORTH TAZEWELL ST,, ARLINGTON, VA 22207
ALAN R. SWENDIMAN - 9609 DEWMAR LANE, KENSINGTON, MD 20895
CHARLES E. PARDOE - 5403 SPANGLER AVE,, BETHESDA, MD 20816
WILLIAM C.D. BURR - 9924 CARMELITA DRIVE, POTOMAC, MD 20854
STEPHEN D. GAVIN - 3135 WORTHINGTON STREET, NW, WASHINGTON, DC 20015

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2009 · Open to Public Inspection

OMB No 1545-0047

Employer identification number Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► See separate instructions. JAMES C. DULIN GOODWILL INDUSTRIES FUND Name of the organization Department of the Treasury Internal Revenue Service

Name of the organization CALLES C. BULLIN C. CALLES C. BULLIN C. C. RICHARD H.	SCHOENFELD				52-1051764
Part i Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)	ete if the organization answered "Yes" t	o Form 990, Part IV, line 33.)			
(a)	(p)	(0)	(D)	(e)	(4)
Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
	T				
	T				
part # Identification of Related Tax-Exempt Organizations (Complete i organizations during the tax year.)	zations (Complete if the organization an	if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt	irt IV, line 34 becaus	se it had one or more	related tax-exempt
(a)	(9)	(0)	(D)	(e)	(t)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling
of related organization		foreign country)	section	status (if section 501(c)(3))	entity
DAVIS MEMORIAL GOODWILL INDUSTRIES DBA	TO EDUCATE, TRAIN, EMPLOY,				
GOODWILL OF GREATER WASHINGTON - 53-0, 2200	E PLACE PEO				
SOUTH DAKOTA AVENUE NE, WASHINGTON, DC	DISADVANTAGES &	DISTRICT OF COLUMBIA	501(C)(3)	509(A)(2)	N/A
GOODWILL INDUSTRIES INTERNATIONAL INC -	TO EDUCATE, TRAIN, EMPLOY,				
53-0196517, 15810 INDIANOLA DRIVE,	& PLACE PEOPLE WITH				
ROCKVILLE, MD 20855	DISADVANTAGES &	MARYLAND	501(C)(3)	509(A)(1)	N/A
	T				
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	itice, see the Instructions for Form 990	o.			Schedule R (Form 990) 2009

932161 02-04-10

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JAMES C. DULIN GOODWILL INDUSTRIES FUND

C/O RICHARD H. SCHOENFELD

Schedule R (Form 990) 2009

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

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General or managing partner? Percentage Schedule R (Form 990) 2009 ownership Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) 9 Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets \in ate allocations? Disproportion-Yes No Ξ Share of total Share of end-of-year assets Ð Type of entity (C corp, S corp, or trust) Share of total псоте (d)
(Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> Legal domicile (state or foreign country) 20 Direct controlling entity Primary activity ਉ Legal domicile (state or foreign country) Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization 932162 02-04-10 Part IV

JAMES C. DULIN GOODWILL INDUSTRIES FUND C/O RICHARD H. SCHOENFELD

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Schedule R (Form 990) 2009

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		۶	Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) Interest (ii) annuttes (iii) royalties or (iv) rent from a controlled entity		1 a	×
b Gift, grant, or capital contribution to other organization(s)		1b X	\dashv
c Gift, grant, or capital contribution from other organization(s)		10	×
d Loans or loan quarantees to or for other organization(s)		P	×
		-	×
			11,,
f Sale of assets to other organization(s)		=	×
a Purchase of assets from other organization(s)		-	×
		÷	×
		; -	×
j Lease of facilities, equipment, or other assets from other organization(s)		i,	×
k Performance of services or membership or fundraising solicitations for other organization(s)		+	×
Performance of services or membership or fundraising solicitations by		=	×
m Sharing of facilities, equipment, mailing lists, or other assets		1	X
n Sharing of paid employees		Ę	×
 Reimbursement paid to other organization for expenses 		9	×
p Reimbursement paid by other organization for expenses		1р	×
q Other transfer of cash or property to other organization(s)		19	×
		+	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	tion thresholds.		
(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved	Ved
(1) DAVIS MEMORIAL GOODWILL INDUSTRIES DBA GOODWILL OF GREATER WASHINGTON	В	100,	100,000.
(2) GOODWILL INDUSTRIES INTERNATIONAL INC	В	65,	.000,
(9)			
(4)			
(5)	,		
(9)			
932163 02-04-10	Schedu	Schedule R (Form 990) 2009	0) 2009

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JAMES C. DULIN GOODWILL INDUSTRIES FUND

Schedule R (Form 990) 2009 C/O RICHARD H. SCHOENFELD

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) (a)	(4)	(9)	69	(e)	£	(a)	3
	(2)		ì ;			3	
Name, address, and EIN	Primary activity	Legal domicile	Are all partners section 501(c)(3)	Share of end-of-	Dispropor- tonate	amount in box 20	General or managing
(SEE)		country)	Yes No			of Schedule K-1 (Form 1065)	1 ' 1
							-
			_				
							_
					<u>.</u>		
			_			-	
					•		•
						•	_
							_

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Schedule R (Form 990) 2009



SCHEDULE OF INVESTMENTS SOLD / MATURED / DISTRIBUTED

DULIN GOODWILL INDUST. FUND ACCOUNT NO. 7025343

01/01/09 THROUGH 12/31/09

PAGE

7.0

DATE	PAR VALUE OR SHARES	DESCRIPTION		PROCEEDS	FEDERAL TAX COST	REALIZED GAIN/LOSS
		SALES				
02/24/09 03/02/09 03/10/09	200 200 200	AFLAC INC COM AFLAC INC COM AFLAC INC COM		6,481.00 3,238.64 2,824.00	12,392.44- 6,196.22- 6,196.22-	5,911.44- 2,957.58- 3,372.22-
		TOTAL AFLAC INC COM	1	12,543.64	24,784.88-	12,241.24-
09/01/09	009	AMETEK INC COM NEW		18,765.36	22,117.98-	3,352.62-
09/01/09 10/15/09 11/19/09	50 75 125	AUTOZONE INC COM AUTOZONE INC COM AUTOZONE INC COM		7,463.73 10,867.72 17,850.18	6,811.22- 10,216.82- 16,090.90-	652.51 650.90 1,759.28
		TOTAL AUTOZONE INC COM		36,181.63	33,118.94-	3,062.69
02/24/09	150	CANON INC ADR		3,659.11	5,306.00-	1,646.89-
11/19/09	200	CVS CAREMARK CORP COM		6,020.76	8,118.62.	2,097.86-
02/24/09	800	EMERSON ELEC CO COM		23,567.07	14,580.00-	8,987.07
09/54/09	100,000	FED FARM CR BK 0.590%	6/15/10	100,000.00	100,000.00-	00.0
06/19/09	250,000	FED HOME LN BK 5.250%	6/19/09	250,000.00	250,962.50-	962.50-
10/27/09	100,000	FED HOME LN BK 5.300%	10/27/11	100,000.00	100,000.00-	00.0
05/05/09	250,000	FED HOME LN MTG 1.050%	2/05/10	250,000.00	250,000.00-	00.0
05/05/09	250,000	FED HOME LN MTG CORP 1.250%	5/05/10	250,000.00	250,000.00-	00.0



SCHEDULE OF INVESTMENTS SOLD / MATURED / DISTRIBUTED

01/01/09 THROUGH 12/31/09 DULIN GOODWILL INDUST. FUND ACCOUNT NO. 7025343

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PAGE

REALIZED GAIN/LOSS	3,451.50-	4,251.78-	3,840.05-	0.04-	12.42	20,198.98	19,624.92-	655.15	967 83-	3,325.41-	3,671.79-	12,822.06	00.0	3,354.53-	4,882 04
FEDERAL TAX	8,129.96-	14,396.02-	8,353,66-	1.41-198.54-	199.95-	10,683.44-	52,331.72-	3,914.82-	11,371.08-	6,325.50-	7,324.20-	-94.454.76-	2,799,051.93-	5,733.72-	6,207.60-
PROCEEDS	4,678.46	10,144.24	4,513.61	1.37	212.37	30,882.42	32,706.80	4,569.97	10,403.25	3,000.09	3,652.41	33,276.82	2,799,051.93	2,379.19	11,089.64
DESCRIPTION	GENERAL DYNAMICS CORP COM	GENZYME CORP GEN DIV COM	HARRIS CORP DEL COM	HARRIS STRATEX NETWORKS INC CL A HARRIS STRATEX NETWORKS INC CL A	TOTAL HARRIS STRATEX NETWORKS INC CL A	ILLINOIS TOOL WKS INC COM	JOHNSON CTLS INC COM	KIMCO RLTY CORP COM REIT	O'REILLY AUTOMOTIVE INC COM	PHARMACEUTICAL PROD DEV INC COM	PRICE T ROWE GROUP INC COM	PROCTER & GAMBLE CO COM	RIDGEWORTH FD-US TREAS MMKT #974	RPM INTL INC COM	STRAYER EDUCATION INC COM
PAR VALUE OR SHARES	100	200	150	0.263		850	2,700	200	300	150	150	650	2,799,051.93	250	50
DATE	03/05/09	12/08/09	05/21/09	60/60/90		60/60/90	05/24/09	02/24/09	10/15/09	. 05/21/09	02/24/09	02/24/09	VARIOUS	03/10/09	10/15/09



SCHEDULE OF INVESTMENTS SOLD / MATURED / DISTRIBUTED

PAGE 01/01/09 THROUGH 12/31/09 DULIN GOODWILL INDUST. FUND ACCOUNT NO. 7025343

DESCRIPTION SYNIVERSE HLDGS INC COM
TAIWAN SEMICONDUCTOR MFG CO LTD ADR TECHNE CORP COM
TRIMBLE NAV LTD COM
UNITED TECHNOLOGIES CORP COM
TOTAL UNITED TECHNOLOGIES CORP COM
US TBILL
US TBILL 10/08/09
WASHINGTON ST 5.500% 7/01/11
WEINGARTEN REALTY INVESTORS REIT
WILEY JOHN & SONS INC CL A COM
TOTAL SALES US TREAS MMKT

THE REALIZED GAIN/LOSS NOTED ABOVE IS BASED ON THE FEDERAL TAX COST VALUE OF THE POSITION SOLD, NOT THE ADJUSTED BOOK VALUE