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Form

990Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

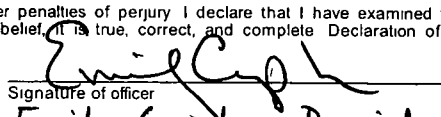

2009**Open to Public
Inspection****A For the 2009 calendar year, or tax year beginning****09/01, 2009, and ending****08/31, 2010**

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization GOODWILL INDUSTRIES OF KANSAS INC		D Employer identification number
		Doing Business As		48-0673284
		Number and street (or P O box if mail is not delivered to street address)		E Telephone number
		P.O. BOX 8169		(316) 744-9291
City or town, state or country, and ZIP + 4		G Gross receipts \$ 12,739,015.		
WICHITA, KS 67208		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)		
F Name and address of principal officer EMILY COMPTON		H(c) Group exemption number ▶		
3636 N. OLIVER WICHITA, KS 67208				
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no)		<input type="checkbox"/> 4947(a)(1) or		<input type="checkbox"/> 527
J Website ▶ WWW.GOODWILLKS.ORG				
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1986		M State of legal domicile KS

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities PROVIDE EDUCATION, TRAINING, EMPLOYMENT AND PERSONAL GROWTH OPPORTUNITIES FOR PEOPLE WITH DISABILITIES AND OTHER BARRIERS TO EMPLOYMENT.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	21
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	21
	5 Total number of employees (Part V, line 2a)	5	676
	6 Total number of volunteers (estimate if necessary)	6	350
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	
b Net unrelated business taxable income from Form 990-T, line 34	7b		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	561,987.	402,730.
	10 Investment income (Part VIII column (A), lines 3, 4, and 7d)	1,471,988.	12,240,270.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	62,748.	19,503.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,724,202.	14,359.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,820,925.	12,676,862.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	979.	16,455.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	6,665,738.	7,890,765.
	b Total fundraising expenses, Part IX, column (D), line 25) ▶ 258,490.	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	3,309,678.	3,439,288.
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	9,976,395.	11,346,508.
19 Revenue less expenses Subtract line 18 from line 12	844,530.	1,330,354.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26)	15,284,030.	16,022,474.
	22 Net assets or fund balances Subtract line 21 from line 20	4,014,616.	3,422,706.
		11,269,414.	12,599,768.

Part II Signature Block

Sign Here	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	
	Signature of officer  Emily Compton, President Type or print name and title	Date JUN 10 2011 OGDEN, UT 16-7-11
Paid Preparer's Use Only	Preparer's signature  Firm's name (or yours if self-employed), address, and ZIP + 4 GRANT THORNTON LLP 8300 THORN DRIVE, SUITE 300 WICHITA, KS 67226-2708	Date 06-06-11 Check if self-employed <input type="checkbox"/> Preparer's identifying number (see instructions) EIN ▶ Phone no ▶ 316-265-3231

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.*

Form 990 (2009)

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Part III Statement of Program Service Accomplishments**1** Briefly describe the organization's mission:

THE MISSION OF GOODWILL INDUSTRIES OF KANSAS IS TO PROVIDE EDUCATION,
TRAINING, EMPLOYMENT AND PERSONAL GROWTH OPPORTUNITIES FOR PEOPLE
WITH DISABILITIES AND OTHER BARRIERS TO EMPLOYMENT.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the 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 \$ 9,852,006 including grants of \$ 16,455) (Revenue \$ 12,240,270)
PROVIDE EDUCATION, TRAINING, EMPLOYMENT AND PERSONAL GROWTH
OPPORTUNITIES FOR PEOPLE WITH DISABILITIES AND OTHER BARRIERS TO
EMPLOYMENT.

4b (Code _____) (Expenses \$ 308,539 including grants of \$ _____) (Revenue \$ 0)
YOUTH EDUCATION AND TRAINING (EDGE): THE YOUTH EDUCATION PROGRAM
IS FOR AT-RISK YOUTH THAT MEET THE DEFINITION OF POVERTY AND ARE
UNDER THE AGE OF 21. ABOUT 700 YOUNG ADULTS ARE SERVED BY THE
PROGRAM, FREE OF CHARGE, TO IMPROVE THEIR LITERACY SKILLS AND WORK
TOWARD ACHIEVING THEIR GED. YOUTH ARE GUIDED THROUGH THE PROGRAM
BY QUALIFIED EDUCATION SPECIALISTS.

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 **▶** 10,160,545.

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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	1	X
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2	X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	X
5 Sections 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 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, VII, VIII, IX, or X 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 Schedule D, Parts XI, XII, and XIII	12	X
12A Was the organization included in consolidated, independent audited financial statement for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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 or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, 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, 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," complete Schedule G, Part III	19	X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	X

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

Form 990 (2009)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.	1a	58
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
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	676
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).	2b	X
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	3b	
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
b	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 question 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
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	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
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	X
8	Sponsoring 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	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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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.

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body	21	
b Enter the number of voting members that are independent	21	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
b 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?		
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	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?		X
b 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 exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► KS, _____

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 for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► GREG SANDLIN 3636 N. OLIVER WICHITA, KS 67208
 316-744-9291

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

☐ Check this box if the organization did not compensate any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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			
TOD WAWZYSKO MEMBER-AT-LARGE	1.00	X						0.	0.	0.
JOAN BARRETT DIRECTOR	1.00	X						0.	0.	0.
DON BARRY DIRECTOR	1.00	X						0.	0.	0.
STEVE A HOULIK TREASURER	1.00	X		X				0.	0.	0.
JOE JOHNSON MEMBER AT LARGE	1.00	X						0.	0.	0.
DENNIS W KERSCHEN DIRECTOR	1.00	X						0.	0.	0.
DEB MCARTHUR DIRECTOR	1.00	X						0.	0.	0.
MARK NICHOLS CHAIRMAN	1.00	X		X				0.	0.	0.
RHONDA DENNIS SECRETARY	1.00	X		X				0.	0.	0.
TOM DONDLINGER DIRECTOR	1.00	X						0.	0.	0.
RICHARD STAFFORD DIRECTOR	1.00	X						0.	0.	0.
BILL HANNA DIRECTOR	1.00	X						0.	0.	0.
SHAWN LANCELOT VICE CHAIRMAN	1.00	X		X				0.	0.	0.
SUE RONSHAGEN DIRECTOR	1.00	X						0.	0.	0.
ERIC SEXTON DIRECTOR	1.00	X						0.	0.	0.
DAVE UNRUH DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(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			
BRAD CLOTHIER DIRECTOR	1.00	X						0.	0.	0.
ROBERT HARMON DIRECTOR	1.00	X						0.	0.	0.
CHRIS HURST DIRECTOR	1.00	X						0.	0.	0.
BILL PICKERT DIRECTOR	1.00	X						0.	0.	0.
EMILY COMPTON PRESIDENT	40.00			X				155,695.	0.	19,824.
GREG SANDLIN VICE PRESIDENT FINANCE	40.00			X				80,922.	0.	14,555.
1b Total								236,617.	0.	34,379.

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

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

	Yes	No
3		X
4	X	
5		X

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

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2		
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 2		

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	151,949			
	d	Related organizations	1d				
	e	Government grants (contributions) . .	1e	144,121			
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	106,660			
	g	Noncash contributions included in lines 1a-1f \$		17,336			
	h	Total. Add lines 1a-1f		402,730			
Program Service Revenue				Business Code			
	2a	SUPPORTED EMPLOYMENT	900099	537,323	537,323		
	b	CONTRACT SERVICES	541900	859,269	859,269		
	c	MERCHANDISE SALES	453310	10,843,678	10,843,678		
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		12,240,270			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		14,986			14,986
	4	Income from investment of tax-exempt bond proceeds		0			
	5	Royalties		0			
			(i) Real (ii) Personal				
	6a	Gross Rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)		0			
	7a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
				8,450			
	b	Less cost or other basis and sales expenses		3,933			
	c	Gain or (loss)		4,517			
	d	Net gain or (loss)		4,517			4,517
	8a	Gross income from fundraising events (not including \$ 151,949 of contributions reported on line 1c) See Part IV, line 18	ATCH 3	63,727			
	b	Less direct expenses		58,220			
	c	Net income or (loss) from fundraising events	ATCH. 4.	5,507			5,507
	9a	Gross income from gaming activities See Part IV, line 19					
	b	Less direct expenses					
	c	Net income or (loss) from gaming activities		0			
	10a	Gross sales of inventory, less returns and allowances					
b	Less cost of goods sold						
c	Net income or (loss) from sales of inventory		0				
Miscellaneous Revenue			Business Code				
11a	VENDING SALES		8,852			8,852	
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		8,852				
12	Total Revenue. See instructions		12,676,862	12,240,270		33,862	

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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).**

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 governments and organizations in the U.S. See Part IV, line 21 . . .	16,455.	16,455.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	277,363.	44,152.	233,211.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	0.			
7 Other salaries and wages	6,071,447.	5,648,877.	290,372.	132,198.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . .	17,430.	8,798.	7,012.	1,620.
9 Other employee benefits	972,802.	863,827.	76,244.	32,731.
10 Payroll taxes	551,723.	502,271.	38,770.	10,682.
11 Fees for services (non-employees)	0.			
a Management				
b Legal	22,611.		22,611.	
c Accounting	20,847.		20,847.	
d Lobbying	0.			
e Professional fundraising services See Part IV, line 17	0.			
f Investment management fees	0.			
g Other	75,965.	10,242.	65,723.	
12 Advertising and promotion	164,701.	107,351.	4,706.	52,644.
13 Office expenses	556,963.	495,185.	53,607.	8,171.
14 Information technology	0.			
15 Royalties	0.			
16 Occupancy	845,672.	826,975.	10,334.	8,363.
17 Travel	173,454.	164,584.	7,977.	893.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	50,809.	36,576.	14,233.	
20 Interest	124,578.	123,863.	715.	
21 Payments to affiliates ATCH 5	103,293.	103,293.		
22 Depreciation, depletion, and amortization . . .	713,611.	666,751.	40,296.	6,564.
23 Insurance	123,721.	115,149.	5,496.	3,076.
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)				
a REPAIRS AND MAINTENANCE	151,522.	141,833.	9,214.	475.
b TAXES, LICENSES AND PERMITS	29,150.	29,150.		
c CREDIT CARD CHARGES	164,206.	143,695.	19,755.	756.
d MEMBERSHIP DUES	21,447.	16,256.	4,245.	946.
e MISCELLANEOUS EXPENSE	96,738.	95,262.	2,105.	-629.
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	11,346,508.	10,160,545.	927,473.	258,490.
26 Joint Costs. Check here <input type="checkbox"/> 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				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	356,341.	1	339,832.
	2 Savings and temporary cash investments	2,374,159.	2	3,577,020.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	192,774.	4	229,975.
	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	338,176.	8	338,293.
	9 Prepaid expenses and deferred charges	87,030.	9	57,093.
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 17,839,748.		
	b Less accumulated depreciation	10b 6,627,837.		
		11,729,550.	10c	11,211,911.
	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	206,000.	15	268,350.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	15,284,030.	16	16,022,474.	
Liabilities	17 Accounts payable and accrued expenses	1,073,915.	17	667,051.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities	960,731.	20	734,117.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties. ATCH. 6.	1,803,374.	23	1,776,040.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	176,596.	25	245,498.
	26 Total liabilities. Add lines 17 through 25	4,014,616.	26	3,422,706.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	11,243,283.	27	12,571,637.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets	26,131.	29	28,131.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	11,269,414.	33	12,599,768.
	34 Total liabilities and net assets/fund balances	15,284,030.	34	16,022,474.

Form 990 (2009)

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	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	X	
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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> 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?		X
3b	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		

Form **990** (2009)

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.)

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 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 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						

Section B. Total Support

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, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2009. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2008. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2009

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 9 of Part I.)

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")	516,152	510,257	509,032	561,987	402,730	2,500,158
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	8,478,121	8,724,843	9,583,805	10,256,936	12,326,501	49,370,206
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	8,994,273	9,235,100	10,092,837	10,818,923	12,729,231	51,870,364
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	30,094	33,262	28,092	26,152	21,475	139,075
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	386,328	581,497	394,977	439,228	554,002	2,356,032
c Add lines 7a and 7b.	416,422	614,759	423,069	465,380	575,477	2,495,107
8 Public support. (Subtract line 7c from line 6)						49,375,257

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.	8,994,273	9,235,100	10,092,837	10,818,923	12,729,231	51,870,364
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	114,385	120,009	103,271	62,748	14,986	415,399
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	114,385	120,009	103,271	62,748	14,986	415,399
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)	6,366	6,175	10,395	0	0	22,936
13 Total support. (Add lines 9, 10c, 11, and 12)	9,115,024	9,361,284	10,206,503	10,881,671	12,744,217	52,308,699
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	94.39%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	95.91%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	.79%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	.92%
19a 33 1/3% support tests - 2009. 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 ► <input checked="" type="checkbox"/>		
b 33 1/3% support tests - 2008. 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 ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions.

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.**

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions**

OMB No 1545-0047

2009

**Open to Public
Inspection**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization	Employer identification number
GOODWILL INDUSTRIES OF KANSAS INC	48-0673284

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$
- 3 Volunteer hours ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ
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Schedule C (Form 990 or 990-EZ) 2009

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
		0.													
1 a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	1,500.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	1,500.													
c	Total lobbying expenditures (add lines 1a and 1b)	10,150,247.													
d	Other exempt purpose expenditures	10,151,747.													
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns	657,587.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)	164,397.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2 a Lobbying non-taxable amount			593,819.	657,587.	1,251,406.
b Lobbying ceiling amount (150% of line 2a, column (e))					1,877,109.
c Total lobbying expenditures			2,750.	1,500.	4,250.
d Grassroots nontaxable amount			148,455.	164,397.	312,852.
e Grassroots ceiling amount (150% of line 2d, column (e))					469,278.
f Grassroots lobbying expenditures			0.	0.	0.

Schedule C (Form 990 or 990-EZ) 2009

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If "Yes," describe in Part IV			
j Total. Add lines 1c through 1i			
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Part IV Supplemental Information (continued)

Area with horizontal dashed lines for supplemental information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

GOODWILL INDUSTRIES OF KANSAS INC

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Employer identification number

48-0673284

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate 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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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 8/17/06	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, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, 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 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, 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" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, 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) Revenues included in 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 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

Schedule D (Form 990) 2009

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 XIV.

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" to 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 XIV and complete the following table

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if organization answered "Yes" to 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 year end balance held as

- a Board designated or quasi-endowment ▶ _____ %
 b Permanent endowment ▶ _____ %
 c Term endowment ▶ _____ %

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

- (i) unrelated organizations
 (ii) related organizations

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

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		3,062,274.		3,062,274.
b Buildings		12,195,301.	4,500,456.	7,694,845.
c Leasehold improvements				
d Equipment		1,907,712.	1,605,799.	301,911.
e Other		674,464.	521,583.	152,881.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)				11,211,911.


Schedule D (Form 990) 2009

Part VII Investments - Other Securities. 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
Financial derivatives		
Closely-held equity interests		
Other _____		

Total (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total (Column (b) must equal Form 990, Part X, col (B) line 13) 		

Part IX **Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total (Column (b) must equal Form 990, Part X, col (B) line 15)	

Part X **Other Liabilities.** See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Amount
	Federal income taxes	
	DEFERRED COMPENSATION	245,498.
	Total (Column (b) must equal Form 990, Part X, col (B) line 25)	245,498.

2. FIN 48 Footnote In Part XIV, 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

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	12,676,862.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	11,346,508.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,330,354.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	1,330,354.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	12,748,734.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	71,872.
e	Add lines 2a through 2d	2e	71,872.
3	Subtract line 2e from line 1	3	12,676,862.
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 XIV)	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	12,676,862.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	11,418,380.
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 XIV)	2d	71,872.
e	Add lines 2a through 2d	2e	71,872.
3	Subtract line 2e from line 1	3	11,346,508.
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 XIV)	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	11,346,508.

Part XIV Supplemental Information

Complete this part to 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, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

Part XIV Supplemental Information (continued)

COGS

SCHEDULE D, PART XII QUESTION 2D AND PART XIII QUESTION 2D

COGS TREATED AS A REDUCTION OF REVENUE ON FORM 990 PART VIII \$13,652

FUNDRAISING EXPENSES

SCHEDULE D, PART XII QUESTION 2D AND PART XIII QUESTION 2D

FUNDRAISING EXPENSES TREATED AS A REDUCTION OF FUNDRAISING REVENUE FORM

990 PART VIII. \$58,220

FIN 48

PART X, QUESTION 2

THE CORPORATION IS EXEMPT FROM FEDERAL INCOME TAXES PURSUANT TO SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE CORPORATION IS ALSO EXEMPT FROM STATE INCOME TAXES. ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN PROVIDED IN THE ACCOMPANYING FINANCIAL STATEMENTS; HOWEVER, UNRELATED BUSINESS INCOME, IF ANY, MAY BE SUBJECT TO TAXATION.

THE CORPORATION RECOGNIZES THE FINANCIAL STATEMENT BENEFIT OF A TAX POSITION ONLY AFTER DETERMINING THAT THE RELEVANT TAX AUTHORITY WOULD MORE LIKELY THAN NOT SUSTAIN THE POSITION FOLLOWING AN AUDIT. THE CORPORATION IS GENERALLY NO LONGER SUBJECT TO U.S. FEDERAL AND STATE INCOME TAX EXAMINATIONS BY TAXING AUTHORITIES FOR FISCAL YEARS BEFORE 2007.

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

▶ Attach to Form 990 or Form 990-EZ ▶ See separate instructions

2009

**Open To Public
Inspection**

Name of the organization

GOODWILL INDUSTRIES OF KANSAS INC

Employer identification number

48-0673284

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|---|--|
| a <input type="checkbox"/> Mail solicitations | e <input type="checkbox"/> Solicitation of non-government grants |
| b <input type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input type="checkbox"/> Phone solicitations | g <input type="checkbox"/> Special fundraising events |
| d <input type="checkbox"/> In-person solicitations | |
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

- 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total events
		TELETHON (event type)	FESTIVAL TREES (event type)	3 (total number)	(add col (a) through col (c))
Revenue	1 Gross receipts	93,116.	68,260.	54,300.	215,676.
	2 Less Charitable contributions	93,116.	44,027.	14,806.	151,949.
	3 Gross income (line 1 minus line 2)		24,233.	39,494.	63,727.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs			1,416.	1,416.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	5,614.	19,691.	31,499.	56,804.
	10 Direct expense summary Add lines 4 through 9 in column (d)				(58,220.)
	11 Net income summary Combine line 3, column (d), and line 10				5,507.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d)				()
	8 Net gaming income summary Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," explain _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," explain _____

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

	Yes	No
9 a		
10 a		
11		
12		

		Yes	No
13	Indicate the percentage of gaming activity operated in.		
a	The organization's facility 13a %		
b	An outside facility 13b %		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name ► _____		
	Address ► _____		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue? 15a		
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
c	If "Yes," enter name and address of the third party		
	Name ► _____		
	Address ► _____		
16	Gaming manager information:		
	Name ► _____		
	Gaming manager compensation ► \$ _____		
	Description of services provided ► _____		
	<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor		
17	Mandatory distributions:		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? 17a		
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____		

OMB No. 1545-0047

Open to Public Inspection

Employer Identification number

48-0673284

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

- Part II** 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 recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use additional space if needed.

2	Enter total number of section 501(c)(3) and government organizations	1
3	Enter total number of other organizations	0

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

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on 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

ASSISTANCE PROVIDED

SCHEDULE I, PART I, QUESTION 2

GOODWILL INDUSTRIES OF KANSAS, INC. OCCASSIONALLY PROVIDES ASSISTANCE TO

501(C)(3) CHARITABLE ORGANIZATIONS. GOODWILL INDUSTRIES OF KANSAS ENSURES

THAT GRANT FUNDS ARE USED FOR PROPER PURPOSES AND NOT DIVERTED FROM THE

INTENDED USE BY GIVING TO 501(C)(3) ORGANIZATIONS RECOGNIZED AS

TAX-EXEMPT BY THE IRS. THE CHARITABLE ORGANIZATION WHO RECEIVED FUNDS

FOR THE FISCAL YEAR ENDING 08/31/2010 SENT A QUARTERLY REPORT TO GOODWILL

INDUSTRIES OF KANSAS REPORTING HOW THE FUNDS WERE SPENT.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

GOODWILL INDUSTRIES OF KANSAS INC

Employer identification number

48-0673284

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization.

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

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

Schedule J (Form 990) 2009

1111

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

This image shows a full page of a worksheet designed for handwriting practice. It features a series of evenly spaced, horizontal dashed lines across the entire page, providing a guide for letter height and placement. The background is plain white, and there are no other markings or text present.

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).

► Attach to Form 990. See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

GOODWILL INDUSTRIES OF KANSAS INC

Employer identification number

48-0673284

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer	
						Yes	No	Yes	No
A TAX EXEMPT BOND SERIES A&B CITY OF HUTCHINSON KS	48-60155517		08/04/2004	1,100,000	HUTCH, W CENTRAL & HAYS STORE		X		X
B TAX EXEMPT BOND SERIES C CITY OF HUTCHINSON KS	48-6015517		10/15/2004	852,500	HAYS STORE FINANCING		X		X
C									
D									
E									

Part II Proceeds

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Total proceeds of issue		X								
2 Gross proceeds in reserve funds										
3 Proceeds in refunding or defeasance escrows										
4 Other unspent proceeds										
5 Issuance costs from proceeds										
6 Working capital expenditures from proceeds										
7 Capital expenditures from proceeds										
8 Year of substantial completion										
9 Were the bonds issued as part of a current refunding issue?										
10 Were the bonds issued as part of an advance refunding issue?										
11 Has the final allocation of proceeds been made?										
12 Does the organization maintain adequate books and records to support the final allocation of proceeds?										

Part III Private Business Use

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X						
2 Are there any lease arrangements with respect to the financed property which may result in private business use?		X		X						

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

Schedule K (Form 990) 2009

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Part III Private Business Use (Continued)

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts with respect to the financed property which may result in private business use?		X		X						
b Are there any research agreements with respect to the financed property which may result in private business use?		X		X						
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		X		X						
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government.		0.0000%		0.0000%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government.		0.0000%		0.0000%		%		%		%
6 Total of lines 4 and 5.		0.0000%		0.0000%		%		%		%
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X							

Part IV Arbitrage

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X						
2 Is the bond issue a variable rate issue?		X		X						
3a Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		X		X						
b Name of provider										
c Term of hedge										
4a Were gross proceeds invested in a GIC?		X		X						
b Name of provider										
c Term of GIC										
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5 Were any gross proceeds invested beyond an available temporary period?		X		X						
6 Did the bond issue qualify for an exception to rebate?	X		X							

Schedule K (Form 990) 2009

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

OMB No 1545-0047

2009

**Open to Public
Inspection**

Employer identification number

48-0673284

GOODWILL INDUSTRIES OF KANSAS INC

ATTACHMENT 1

EXECUTIVE COMPENSATION

PART VI, QUESTION 15

INFORMATION REGARDING PERFORMANCE IS GATHERED FROM BOARD MEMBERS AND
REVIEWED BY THE EXECUTIVE COMMITTEE AND IS EVALUATED WITH COMPARABLE
GOODWILLS THROUGH DATA OBTAINED FROM GOODWILL INDUSTRIES INTERNATIONAL.
KEY EMPLOYEES ARE EVALUATED BASED ON ACHIEVEMENT OF QUANTIFIABLE GOALS
ESTABLISHED IN THE PRIOR YEAR WITH COMPENSATION DETERMINED WITH DATA
OBTAINED FOR COMPARABLE POSITIONS FROM GOODWILL INDUSTRIES.

GOVERNING DOCUMENTS AVAILABILITY

PART VI, QUESTION 19

THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY
ARE AVAILABLE UPON REQUEST.

COMMUNITY BENEFIT

PART III, QUESTIONS 4A AND 4B

THE MISSION OF GOODWILL INDUSTRIES OF KANSAS, INC. IS TO PROVIDE
EDUCATION, TRAINING, EMPLOYMENT AND PERSONAL GROWTH OPPORTUNITIES FOR
PEOPLE WITH DISABILITIES AND OTHER BARRIERS TO EMPLOYMENT. WE ACCOMPLISH
OUR MISSION THROUGH SIX MAJOR PROGRAMS.

ORGANIZATIONAL EMPLOYMENT/DAY SERVICES: LAST YEAR MORE THAN 100 PEOPLE
WITH DEVELOPMENTAL DISABILITIES AND OTHER VOCATIONAL BARRIERS FOUND
EMPLOYMENT IN OUR CONTRACTS DIVISION WORKING ON PACKAGING AND LIGHT

Name of the organization	Employer identification number
GOODWILL INDUSTRIES OF KANSAS INC	48-0673284
ATTACHMENT 1 (CONT'D)	

MANUFACTURING CONTRACTS GOODWILL HAS WITH AREA BUSINESSES. MANY OF THE
CLIENTS RECEIVED THEIR FIRST PAYCHECK THROUGH OUR PROGRAM AND LEARNED
ABOUT THE JOY OF WORKING AND EARNING A WAGE.

ADULT AND YOUNG ADULT CASE MANAGEMENT: CASE MANAGERS ACT AS ADVOCATES OF
PEOPLE WITH DEVELOPMENTAL DISABILITIES. CASE MANAGERS WERE CHARGED WITH
PROTECTING THE HEALTH AND SAFETY NEEDS OF 110 INDIVIDUALS LAST YEAR. MANY
OF THE CLIENTS IN THE PROGRAM COME FROM FAMILIES THAT TAKE ADVANTAGE OF
THEM OR ARE UNABLE TO CARE FOR THEM PROPERLY.

YOUTH EDUCATION AND TRAINING (EDGE): THE YOUTH EDUCATION PROGRAM IS FOR
AT-RISK YOUTH THAT MEET THE DEFINITION OF POVERTY AND ARE UNDER THE AGE
OF 21. ABOUT 900 YOUNG ADULTS CAME TO OUR PROGRAM, FREE OF CHARGE, TO
IMPROVE THEIR LITERACY SKILLS AND WORK TOWARD ACHIEVING THEIR GED. YOUTH
ARE GUIDED THROUGH THE PROGRAM BY QUALIFIED EDUCATION SPECIALISTS. LAST
YEAR 105 YOUTH PASSED THEIR GED EXAM AND RECEIVED THEIR HIGH SCHOOL
DIPLOMA.

LITERACY AND ADULT BASIC EDUCATION: ADULTS OVER 21, SEEKING TO IMPROVE
THEIR EDUCATION, ARE GUIDED INTO OUR LITERACY AND ADULT BASIC EDUCATION
PROGRAM. SPECIALLY TRAINED TUTORS WORK ONE-ON-ONE WITH ADULTS TO IMPROVE
THEIR SKILLS. ALMOST 100 ADULTS ARE CURRENTLY BEING SERVED IN THIE
PROGRAM. THIS PROGRAM IS ALSO OFFERED FREE OF CHARGE.

SUPPORTED EMPLOYMENT: WORKING WITH THE DEPARTMENT OF VOCATIONAL

Name of the organization

GOODWILL INDUSTRIES OF KANSAS INC

Employer identification number

48-0673284

ATTACHMENT 1 (CONT'D)

REHABILITATION, GOODWILL PROVIDES PRE-EMPLOYMENT SKILLS TESTING FOR
PEOPLE READY TO RE-ENTER THE WORKFORCE.

ECONOMIC AND EMPLOYMENT SUPPORTS (EES): THE DEPARTMENT OF SOCIAL AND
REHABILITATION SERVICES SENT NEARLY 90 INDIVIDUALS TO GOODWILL TO HELP
TRANSITION THEM FROM WELFARE TO WORK. PARTICIPANTS RECEIVED ASSISTANCE
WITH JOB INTERVIEWS, RESUME WRITING AND FINDING EMPLOYMENT.

OTHER/GOODWILL RETAIL STORES: OUR 15 RETAIL STORES PROVIDE WORK
OPPORTUNITIES FOR PEOPLE WITH SEVERE VOCATIONAL/EMPLOYMENT BARRIERS.
NEARLY 50 PERCENT (175 EMPLOYEES) OF OUR RETAIL EMPLOYEES HAVE A SEVERE
EMPLOYMENT BARRIER. WE HAVE HIRED WOMEN FROM AREA HOMELESS SHELTERS AS
WELL AS FROM AGENCIES ADDRESSING THE NEEDS OF DOMESTIC ABUSE. MANY OF
OUR RETAIL EMPLOYEES LACK BASIC READING AND WRITING SKILLS MAKING THEM
UNEMPLOYABLE IN OUR INCREASINGLY HIGH TECH SOCIETY. ALL FULLTIME
EMPLOYEES ARE ELIGIBLE FOR HEALTH, VACATION AND SICK LEAVE BENEFITS.
GOODWILL PAYS 80% OF A SINGLE HEALTH INSURANCE POLICY AND 100% OF DENTAL
INSURANCE

MONITOR CONFLICT OF INTEREST POLICY

PART VI, QUESTION 12C

ANY DUALITY OF INTEREST OR POSSIBLE CONFLICT OF INTEREST ON THE PART OF
ANY DIRECTOR IS REQUIRED TO BE DISCLOSED TO THE OTHER MEMBERS OF THE
BOARD AND MADE A MATTER OF PUBLIC RECORD, EITHER THROUGH AN ANNUAL
PROCEDURE OR WHEN THE INTEREST BECOMES A MATTER OF BOARD ATTENTION.

ANY DIRECTOR HAVING A DUALITY OF INTEREST OR POSSIBLE CONFLICT OF

Name of the organization

GOODWILL INDUSTRIES OF KANSAS INC

Employer identification number

48-0673284

ATTACHMENT 1 (CONT'D)

INTEREST ON ANY MATTER IS NOT PERMITTED TO VOTE OR USE PERSONAL INFLUENCE ON THE MATTER, AND WILL NOT BE COUNTED IN DETERMINING THE QUORUM FOR THE MEETING, EVEN WHEN PERMITTED BY LAW. THE MINUTES OF THE MEETING WILL REFLECT THE DIRECTOR'S DISCLOSURE, THE ABSTENTION FROM VOTING AND THE PRESENCE OF A QUORUM.

990 REVIEW

PART VI, SECTION A, QUESTION 11

THE BOARD OF DIRECTORS WILL BE PROVIDED AN ELECTRONIC COPY OF THE FORM 990 BEFORE FILING WITH THE IRS. THE CEO AND CFO REVIEW THE 990 PRIOR TO FILING WITH THE IRS.

MERCHANDISE SALES REVENUE REPORTING

PART VIII, LINE 2C

GOODWILL INDUSTRIES OF KANSAS, INC. REPORTED THE SALE OF USED MERCHANDISE ON LINE 2C OF PART VIII IN THE CURRENT YEAR. IN PRIOR YEARS THE USED MERCHANDISE SALES WERE REPORTED ON LINE 10A OF PART VIII. REPORTING THE USED MERCHANDISE SALES ON LINE 2C BETTER REFLECTS THE ORGANIZATION'S PROGRAM SERVICE REVENUE. GOODWILL INDUSTRIES OF KANSAS, INC. WILL CONTINUE TO REPORT THE SALE OF USED MERCHANDISE ON LINE 2C OF PART VIII IN FUTURE YEARS.

ATTACHMENT 2990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
WASTE CONNECTIONS INC 2745 N. OHIO	TRASH SERVICE	110,898.

Name of the organization

GOODWILL INDUSTRIES OF KANSAS INC

Employer identification number

48-0673284

ATTACHMENT 2 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
WICHITA, KS 67219		
WALZ HARMAN HUFFMAN 5616 E. HUFFMAN DR. KECHI, KS 67067	CONSTRUCTION	341,553.
TOTAL COMPENSATION		<u>452,451.</u>

ATTACHMENT 3FORM 990, PART VIII - EXCLUDED CONTRIBUTIONS

<u>DESCRIPTION</u>	<u>AMOUNT</u>
TELETHON	93,116.
CAJUN FOOD FEST	2,075.
BOWL-A-THON	3,266.
FESTIVAL OF TREES	44,027.
ANNUAL DINNER	6,831.
ADMIN. PROFESSIONALS DAY	2,634.
TOTAL	<u>151,949.</u>

ATTACHMENT 4FORM 990, PART VIII - FUNDRAISING EVENTS

<u>DESCRIPTION</u>	<u>GROSS INCOME</u>	<u>DIRECT EXPENSES</u>	<u>NET INCOME</u>
TELETHON		5,614.	-5,614.
CAJUN FOOD FEST	23,542.	16,508.	7,034.
BOWL-A-THON		549.	-549.
FESTIVAL OF TREES	24,232.	19,691	4,541.

Name of the organization

GOODWILL INDUSTRIES OF KANSAS INC

Employer identification number

48-0673284

ATTACHMENT 4 (CONT'D)FORM 990, PART VIII - FUNDRAISING EVENTS

<u>DESCRIPTION</u>	<u>GROSS INCOME</u>	<u>DIRECT EXPENSES</u>	<u>NET INCOME</u>
ANNUAL DINNER	13,320.	13,033.	287.
ADMIN. PROFESSIONALS DAY	2,633.	2,825.	-192.
TOTALS	<u>63,727.</u>	<u>58,220.</u>	<u>5,507.</u>

ATTACHMENT 5FORM 990, PART IX - PAYMENTS TO AFFILIATES

<u>DESCRIPTION</u>	(A) <u>TOTAL EXPENSES</u>	(B) <u>PROGRAM SERVICE EXP.</u>	(C) <u>MANAGEMENT AND GENERAL</u>	(D) <u>FUNDRAISING EXPENSES</u>
GOODWILL INDUSTRIES INTERNATIONAL	103,293	103,293		
TOTALS	<u>103,293</u>	<u>103,293</u>		

ATTACHMENT 6FORM 990, PART X - SECURED MORTGAGES AND NOTES PAYABLE

LENDER: UNITED STATES DEPARTMENT OF AGRICULTURE

INTEREST RATE: 5.125000

MATURITY DATE: 01/01/2025

REPAYMENT TERMS: MONTHLY INSTALLMENTS OF \$5,838

SECURITY PROVIDED: REAL ESTATE AND EQUIPMENT

BEGINNING BALANCE DUE	726,320.
ENDING BALANCE DUE	<u>692,707.</u>

LENDER: UNITED STATES DEPARTMENT OF AGRICULTURE

INTEREST RATE: 5.000000

MATURITY DATE: 01/01/2025

REPAYMENT TERMS: MONTHLY INSTALLMENTS OF \$1,235

SECURITY PROVIDED: REAL ESTATE AND EQUIPMENT

BEGINNING BALANCE DUE	154,195.
ENDING BALANCE DUE	<u>146,920.</u>

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Schedule O (Form 990) 2009

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Name of the organization

GOODWILL INDUSTRIES OF KANSAS INC

Employer identification number

48-0673284

ATTACHMENT 6 (CONT'D)

LENDER: UNITED BANK & TRUST
 INTEREST RATE: 5.750000
 MATURITY DATE: 03/01/2023
 REPAYMENT TERMS: MONTHLY INSTALLMENTS OF \$2,477
 SECURITY PROVIDED: REAL ESTATE AND EQUIPMENT

BEGINNING BALANCE DUE	274,236.
ENDING BALANCE DUE	<u>259,855.</u>

LENDER: UNITED STATES DEPARTMENT OF AGRICULTURE
 INTEREST RATE: 4.625000
 MATURITY DATE: 03/01/2027
 REPAYMENT TERMS: MONTHLY INSTALLMENTS OF \$4,504
 SECURITY PROVIDED: REAL ESTATE AND EQUIPMENT

BEGINNING BALANCE DUE	648,623.
ENDING BALANCE DUE	<u>624,058.</u>

Name of the organization

GOODWILL INDUSTRIES OF KANSAS INC

Employer identification number

48-0673284

ATTACHMENT 6 (CONT'D)

LENDER: NOTE PAYABLE

ORIGINAL AMOUNT: 52,500.

INTEREST RATE: 3.250000

MATURITY DATE: 04/01/2013

BEGINNING BALANCE DUE 0.
ENDING BALANCE DUE 52,500.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE 1,803,374.

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE 1,776,040.

FORM 990, PART VIII - NONCASH CONTRIBUTIONS

NAME AND ADDRESS	DATE	FEDEPATED CAMPAIGNS	MEMBERSHIP DUES	ATTACHMENT 7			GOVERNMENT GRANTS	ALL OTHER CONTRIBUTIONS
				FUNDRAISING EVENTS	RELATED ORGANIZATIONS			
NONCASH	8/30/2010							17,336
TOTALS								17,336

FORM 990, PART VIII - CONTRIBUTIONS

ATTACHMENT 8

NAME AND ADDRESS	DATE	FEDERATED CAMPAIGNS	MEMBERSHIP DUES	FUNDRAISING EVENTS	RELATED ORGANIZATIONS	GOVERNMENT GRANTS	ALL OTHER CONTRIBUTIONS
CHARLES AND ELIZABETH KOCH (OTHER CONT) PO BOX 2256 WICHITA, KS 67201	8/30/2010			3,275			5,000
BANK OF AMERICA (FUNDRAISING CONTR) PO BOX 1122 WICHITA, KS 67201-1122	8/30/2010			22,600			
CARGILL MEAT SOLUTIONS 151 N MAIN WICHITA, KS 67202-1413	8/30/2010						35,813
VARIOUS PO BOX 8169 WICHITA, KS 67208	8/30/2010			1,000			
CHARLES AND ELIZABETH KOCH (FUNDRAISING) PO BOX 2256 WICHITA, KS 67201-2256	8/30/2010			12,000			
SPIRIT AEROSYSTEMS, INC (FUNDRAISING) PO BOX 780008 WICHITA, KS 67278-0008	8/30/2010			1,650			
BOEING IDS WICHITA (FUNDRAISING) PO BOX 7730 WICHITA, KS 67277-7730	8/30/2010						17,336
NONCASH							

FORM 990, PART VIII - CONTRIBUTIONS

NAME AND ADDRESS	DATE	FEDEPATED CAMPAIGNS	ATTACHMENT 8 (CONT'D)			
			FUNDRAISING EVENTS	RELATED ORGANIZATIONS	GOVERNMENT GRANTS	ALL OTHER CONTRIBUTIONS
WESTAR ENERGY PO BOX 208 WICHITA, KS 67201-0208			9,350			
GLASSMAN, PETE P O BOX 8169 WICHITA, KS 67208	8/30/2010					10,211
SEDGWICK COUNTY 525 N MAIN ST WICHITA, KS 67203	08/30/2009				58,658	
GOODGUIDES 1220 EAST 1ST WICHITA, KS 67214	8/30/11				85,463	
FUNDRAISING CONTRIBUTIONS PO BOX 8169 WICHITA, KS 67208			102,074			
BANK OF AMERICA (OTHER CONTR) PO BOX 1133 WICHITA, KS 67201						10,100
CARGILL MEAT SOLUTIONS (OTHER CONTR) 151 N MAIN STREET WICHITA, KS 67202						100
BOEING IDS WICHITA (OTHER CONTR) PO BOX 7730 WICHITA, KS 67277						28,100
TOTALS			151,949		144,121	106,660

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))
▶ Attach to your tax return. ▶ See separate instructions.

Name(s) shown on return

Identifying number

GOODWILL INDUSTRIES OF KANSAS INC

48-0673284

1 Enter the gross proceeds from sales or exchanges reported to you for 2009 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions).

1

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year (see instructions)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
	ATTACHMENT 9						-3,016.

3 Gain, if any, from Form 4684, line 43

3

4 Section 1231 gain from installment sales from Form 6252, line 26 or 37

4

5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824

5

6 Gain, if any, from line 32, from other than casualty or theft

6

7 Combine lines 2 through 6 Enter the gain or (loss) here and on the appropriate line as follows

7

-3,016.

Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9 Skip lines 8, 9, 11, and 12 below

Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9 If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below

8 Nonrecaptured net section 1231 losses from prior years (see instructions)

8

9 Subtract line 8 from line 7 If zero or less, enter -0- If line 9 is zero, enter the gain from line 7 on line 12 below If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions)

9

Part II Ordinary Gains and Losses (see instructions)

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less)

11 Loss, if any, from line 7

11

(3,016)

12 Gain, if any, from line 7 or amount from line 8, if applicable

12

13 Gain, if any, from line 31

13

7,533.

14 Net gain or (loss) from Form 4684, lines 35 and 42a

14

15 Ordinary gain from installment sales from Form 6252, line 25 or 36

15

16 Ordinary gain or (loss) from like-kind exchanges from Form 8824

16

17 Combine lines 10 through 16

17

4,517.

18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below For individual returns, complete lines a and b below

a If the loss on line 11 includes a loss from Form 4684, line 39, column (b)(ii), enter that part of the loss here Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23 Identify as from "Form 4797, line 18a" See instructions

18a

b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a Enter here and on Form 1040, line 14.

18b

For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2009)

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255
(see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A	EQUIPMENT SALE	VAR	06/30/2010
B			
C			
D			

These columns relate to the properties on lines 19A through 19D		Property A	Property B	Property C	Property D
20	Gross sales price (Note See line 1 before completing)	8,450.			
21	Cost or other basis plus expense of sale	17,486.			
22	Depreciation (or depletion) allowed or allowable	16,569.			
23	Adjusted basis Subtract line 22 from line 21	917.			
24	Total gain Subtract line 23 from line 20	7,533.			
25	If section 1245 property:				
a	Depreciation allowed or allowable from line 22	16,569.			
b	Enter the smaller of line 24 or 25a	7,533.			
26	If section 1250 property If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291				
a	Additional depreciation after 1975 (see instructions)				
b	Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)				
c	Subtract line 26a from line 24 If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e				
d	Additional depreciation after 1969 and before 1976				
e	Enter the smaller of line 26c or 26d				
f	Section 291 amount (corporations only)				
g	Add lines 26b, 26e, and 26f				
27	If section 1252 property Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership)				
a	Soil, water, and land clearing expenses				
b	Line 27a multiplied by applicable percentage (see instructions)				
c	Enter the smaller of line 24 or 27b				
28	If section 1254 property:				
a	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion (see instructions)				
b	Enter the smaller of line 24 or 28a				
29	If section 1255 property:				
a	Applicable percentage of payments excluded from income under section 126 (see instructions)				
b	Enter the smaller of line 24 or 29a (see instructions)				

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties Add property columns A through D, line 24	30	7,533.
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b Enter here and on line 13	31	7,533.
32	Subtract line 31 from line 30 Enter the portion from casualty or theft on Form 4684, line 37 Enter the portion from other than casualty or theft on Form 4797, line 6	32	

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less
(see instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years	33	
34 Recomputed depreciation (see instructions)	34	
35 Recapture amount Subtract line 34 from line 33 See the instructions for where to report	35	

Form 4797 (2009)

ATTACHMENT 9

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• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box. ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing your return. See instructions.	Name of exempt organization		Employer identification number
	GOODWILL INDUSTRIES OF KANSAS INC		48-0673284
	Number, street, and room or suite no. If a P.O. box, see instructions		
	P.O. BOX 8169		
City, town or post office, state, and ZIP code. For a foreign address, see instructions			
WICHITA, KS 67208			

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ☒ GREG SANDLIN
Telephone No. FAX No.
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for
- I request an additional 3-month extension of time until
- For calendar year , or other tax year beginning , and ending
- If the tax year entered in line 5 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period
- State in detail why you need the extension

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title Date

GRANT THORNTON LLP
8300 THORN DRIVE, SUITE 300
WICHITA, KS 67226-2708

Form 8868 (Rev. 1-2011)