



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except 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 2010 Open to Public Inspection
---	--	---

A For the 2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010		
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT INC Doing Business As Number and street (or P O box if mail is not delivered to street address) PO BOX 668768Room/suite City or town, state or country, and ZIP + 4 CHARLOTTE, NC 28266	D Employer identification number 56-0844639
		E Telephone number (704) 372-3434
		G Gross receipts \$ 35,261,662
	F Name and address of principal officer MICHAEL ELDER PO BOX 668768 CHARLOTTE, NC 28266	H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶
	I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527	
J Website: ▶ WWW.GOODWILLSP.ORG		
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation 1949
		M State of legal domicile NC

Part I	Summary
---------------	----------------

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE PROCEEDS FROM THE SALES OF DONATED GOODS IN GOODWILL'S RETAIL STORES PROVIDES FUNDING FOR JOB TRAINING AND EMPLOYMENT SERVICES FOR INDIVIDUALS FACING BARRIERS TO EMPLOYMENT IN 2010 NEARLY 600 GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT (GISP) ASSOCIATES HELPED CHANGE LIVES IN THE SOUTHERN PIEDMONT REGION, WHICH INCLUDES 13 COUNTIES IN NORTH CAROLINA AND FIVE COUNTIES IN SOUTH CAROLINA GOODWILL BELIEVES THAT ALL PEOPLE SHOULD HAVE THE OPPORTUNITY TO DEVELOP TO THEIR FULLEST POTENTIAL THROUGH THE POWER OF WORK WORK CREATES ECONOMIC ENERGY THAT BUILDS STRONG FAMILIES AND STRONG COMMUNITIES GISP PROVIDED JOB TRAINING AND EMPLOYMENT SERVICES FOR 14,771 INDIVIDUALS IN 2010 AND PLACED 2,077 PEOPLE INTO PERMANENT AND TEMPORARY EMPLOYMENT GISP IN 2010 WAS ABLE TO DIVERT MORE THAN 49 MILLION POUNDS OF GOODS FROM AREA LANDFILLS, INCLUDING MORE THAN 3 6 MILLION POUNDS OF ELECTRONIC WASTE																								
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets																								
	<table><tr><td>3 Number of voting members of the governing body (Part VI, line 1a)</td><td>3</td><td>21</td></tr><tr><td>4 Number of independent voting members of the governing body (Part VI, line 1b)</td><td>4</td><td>21</td></tr><tr><td>5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)</td><td>5</td><td>1,358</td></tr><tr><td>6 Total number of volunteers (estimate if necessary)</td><td>6</td><td>393</td></tr><tr><td>7a Total unrelated business revenue from Part VIII, column (C), line 12</td><td>7a</td><td>0</td></tr><tr><td>b Net unrelated business taxable income from Form 990-T, line 34</td><td>7b</td><td>0</td></tr></table>	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 individuals employed in calendar year 2010 (Part V, line 2a)	5	1,358	6 Total number of volunteers (estimate if necessary)	6	393	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0	b Net unrelated business taxable income from Form 990-T, line 34	7b	0						
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 individuals employed in calendar year 2010 (Part V, line 2a)	5	1,358																							
6 Total number of volunteers (estimate if necessary)	6	393																							
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0																							
b Net unrelated business taxable income from Form 990-T, line 34	7b	0																							
Revenue	<table><tr><td>8 Contributions and grants (Part VIII, line 1h)</td><td>Prior Year</td><td>Current Year</td></tr><tr><td>9 Program service revenue (Part VIII, line 2g)</td><td>7,141,339</td><td>7,712,300</td></tr><tr><td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td><td>24,200,716</td><td>26,617,673</td></tr><tr><td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td><td>203,927</td><td>235,479</td></tr><tr><td>12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td><td>70,021</td><td>47,161</td></tr><tr><td></td><td>31,616,003</td><td>34,612,613</td></tr></table>	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	9 Program service revenue (Part VIII, line 2g)	7,141,339	7,712,300	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	24,200,716	26,617,673	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	203,927	235,479	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	70,021	47,161		31,616,003	34,612,613						
	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year																						
	9 Program service revenue (Part VIII, line 2g)	7,141,339	7,712,300																						
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	24,200,716	26,617,673																						
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	203,927	235,479																						
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	70,021	47,161																							
	31,616,003	34,612,613																							
Expenses	<table><tr><td>13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)</td><td>404,245</td><td>450,170</td></tr><tr><td>14 Benefits paid to or for members (Part IX, column (A), line 4)</td><td>0</td><td>0</td></tr><tr><td>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)</td><td>20,038,458</td><td>22,465,347</td></tr><tr><td>16a Professional fundraising fees (Part IX, column (A), line 11e)</td><td>56,147</td><td>0</td></tr><tr><td>b Total fundraising expenses (Part IX, column (D), line 25) ▶263,062</td><td></td><td></td></tr><tr><td>17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)</td><td>10,361,867</td><td>11,435,554</td></tr><tr><td>18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)</td><td>30,860,717</td><td>34,351,071</td></tr><tr><td>19 Revenue less expenses Subtract line 18 from line 12</td><td>755,286</td><td>261,542</td></tr></table>	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	404,245	450,170	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	20,038,458	22,465,347	16a Professional fundraising fees (Part IX, column (A), line 11e)	56,147	0	b Total fundraising expenses (Part IX, column (D), line 25) ▶263,062			17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	10,361,867	11,435,554	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	30,860,717	34,351,071	19 Revenue less expenses Subtract line 18 from line 12	755,286	261,542
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	404,245	450,170																						
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0																						
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	20,038,458	22,465,347																						
	16a Professional fundraising fees (Part IX, column (A), line 11e)	56,147	0																						
	b Total fundraising expenses (Part IX, column (D), line 25) ▶263,062																								
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	10,361,867	11,435,554																						
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	30,860,717	34,351,071																							
19 Revenue less expenses Subtract line 18 from line 12	755,286	261,542																							
Net Assets or Fund Balances	<table><tr><td></td><td>Beginning of Current Year</td><td>End of Year</td></tr><tr><td>20 Total assets (Part X, line 16)</td><td>25,580,767</td><td>26,700,529</td></tr><tr><td>21 Total liabilities (Part X, line 26)</td><td>8,560,722</td><td>9,382,016</td></tr><tr><td>22 Net assets or fund balances Subtract line 21 from line 20</td><td>17,020,045</td><td>17,318,513</td></tr></table>		Beginning of Current Year	End of Year	20 Total assets (Part X, line 16)	25,580,767	26,700,529	21 Total liabilities (Part X, line 26)	8,560,722	9,382,016	22 Net assets or fund balances Subtract line 21 from line 20	17,020,045	17,318,513												
		Beginning of Current Year	End of Year																						
	20 Total assets (Part X, line 16)	25,580,767	26,700,529																						
	21 Total liabilities (Part X, line 26)	8,560,722	9,382,016																						
22 Net assets or fund balances Subtract line 21 from line 20	17,020,045	17,318,513																							

Part II	Signature Block
----------------	------------------------

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

Sign Here	Signature of officer *****	Date 2011-05-09	
	Type or print name and title MICHAEL ELDER PRESIDENT & CEO		
Paid Preparer Use Only	Print/Type preparer's name ADRIENNE MCKINNEY	Preparer's signature ADRIENNE MCKINNEY	Date
	Firm's name ▶ RSM MCGLADREY INC	Check if self-employed ☐ PTIN	
	Firm's address ▶ 230 NORTH ELM STREET SUITE 1100 GREENSBORO, NC 27401	Firm's EIN ▶ Phone no ▶ (336) 272-4551	

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III ☒

1 Briefly describe the organization’s mission
CHANGING LIVES THROUGH THE POWER OF WORK

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If “Yes,” describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If “Yes,” describe these changes on Schedule O

4 Describe the 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 \$ 21,803,163 including grants of \$ 1,963) (Revenue \$ 21,803,163)
	RETAIL PROGRAM THE RETAIL PROGRAM OFFERS OPPORTUNITIES FOR INDIVIDUALS SEEKING TO DEVELOP AND BUILD THEIR SKILL SETS TO ENHANCE THEIR POTENTIAL FOR FUTURE EMPLOYMENT IN PRODUCTION, CUSTOMER SERVICE, RETAIL AND JANITORIAL CREWS OUR RETAIL STORES PROVIDE SPECIALIZED TRAINING AND HANDS ON EXPERIENCE IN THESE AREAS THROUGH TEMPORARY AND/OR PERMANENT EMPLOYMENT THE AGENCY PROVIDED APPROXIMATELY 146,000 HOURS OF TRAINING, OF WHICH THE RETAIL PROGRAM PROVIDED APPROXIMATELY 46,000 HOURS OF PAID WORK EXPERIENCE RETAIL ALSO EMPLOYED 200 PEOPLE WITH PRIOR BARRIERS TO EMPLOYMENT TOTALING \$4,929,000 IN PAYROLL DOLLARS

4b	(Code) (Expenses \$ 5,732,956 including grants of \$ 400,752) (Revenue \$ 3,238,657)
	GOODWILL PROVIDES A VARIETY OF PROGRAMS THAT ASSESS AND IDENTIFY AN INDIVIDUAL'S ABILITIES, VOCATIONAL INTERESTS, JOB READINESS SKILLS AND TRAINING NEEDS, WHILE OFFERING INDIVIDUAL ASSISTANCE FROM GOODWILL STAFF MEMBERS OTHER JOB TRAINING & SUPPORT PROVIDES INDIVIDUALS WITH SPECIALIZED TRAINING AND SKILL DEVELOPMENT NECESSARY TO GAIN EMPLOYMENT GOODWILL ALSO ASSISTS WITH PAIRING EMPLOYERS WITH EMPLOYMENT SEEKING INDIVIDUALS BY MATCHING COMPATIBLE SKILL SETS, TALENTS, CAPABILITIES, AND EXPERIENCE WITH THE NEEDS OF THE EMPLOYER IN 2010, 11,112 EMPLOYMENT AND TRAINING SERVICES WERE PROVIDED AND 1,441 INDIVIDUALS WERE PLACED IN EMPLOYMENT

4c	(Code) (Expenses \$ 2,078,381 including grants of \$ 32,189) (Revenue \$ 1,569,929)
	GOODWILL'S BUSINESS VENTURE SERVICES IS MADE UP OF VARIOUS PROGRAMS, PRIMARILY CONSISTING OF RECYCLING, EBOOKS AND EMPLOYMENT PLACEMENT SERVICES GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT OFFERS ASSET RECOVERY AND DE-MANUFACTURING SERVICES USING THE HIGHEST INDUSTRY STANDARDS FOR ENVIRONMENTAL SAFETY AND DATA SECURITY THIS COMPUTER RECYCLING PROGRAM HAS DIVERTED TONS OF POTENTIAL WASTE FROM REACHING LANDFILLS THIS MULTIFACETED PROGRAM HELPS GENERATE JOBS, PROVIDES A VALUABLE SERVICE TO THE COMMUNITY, GENERATES REFURBISHED COMPUTER INVENTORY FOR RESALE AND HELPS PRESERVE THE ENVIRONMENT AS PART OF THE EMPLOYMENT PLACEMENT DIVISION, THE GOODWORK STAFFING PROGRAM SERVES AS A FULL SERVICE STAFFING AGENCY THAT PROVIDES TEMPORARY, TEMP TO HIRE, AND DIRECT PLACEMENT EMPLOYEES THE PRIMARY PURPOSE OF GOODWORK STAFFING IS TO WORK WITH PEOPLE WITH EMPLOYMENT BARRIERS AND TO MATCH THEIR SKILLS WITH THE NEEDS OF PROSPECTIVE EMPLOYERS IN 2010, GOODWORK STAFFING PROVIDED MORE THAN 82,000 PAID WORK HOURS AND ASSISTED WITH 2,529 JOB PLACEMENTS IN LIGHT INDUSTRIAL, WAREHOUSE, ADMINISTRATIVE SUPPORT, CUSTOMER SERVICE, AND HOSPITALITY EMPLOYMENT FIELDS

4d	Other program services (Describe in Schedule O) See also Additional Data for Description (Expenses \$ 1,382,736 including grants of \$ 15,266) (Revenue \$ 5,924)
----	---

4e	Total program service expenses \$ 30,997,236
----	--

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	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	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	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
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	No
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	No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a	Yes
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 	11b	No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 	11c	No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	11e	Yes
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. 	11f	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12a	Yes
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 	12b	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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, Parts I and IV	14b	No
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 U S ? If "Yes," complete Schedule F, Parts II and IV	15	No
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 U S ? If "Yes," complete Schedule F, Parts III and IV	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes
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	No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV

Checklist of Required Schedules (continued)

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>	21	Yes	
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>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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>	23	Yes	
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-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	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>	25b		No
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>	26		No
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>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
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>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
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>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> ☐ Yes ☒ No			
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>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
	1a51		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
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.		
	2a1,358		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	Yes	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
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)?		No
b	If "Yes," enter the name of the foreign country: See instructions for 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?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
	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?		No
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?		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes
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?			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

Governance, Management, and Disclosure

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

Section A. Governing Body and Management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	21		
b	Enter the number of voting members included in line 1a, above, who 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?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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	9		No

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?	10a		No
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?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	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	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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?	16b		

Section C. Disclosure	
17	List the States with which a copy of this Form 990 is required to be filed NC , SC
18	Section 6104 requires an organization to make its Form 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. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ANNE N IBEKWE 2122 FREEDOM DRIVE CHARLOTTE, NC 28208 (704) 332-0338

Part VII

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
(1) BEV KOTHE CHAIR	2 00	X		X				0	0	0
(2) DAVID HAGGART VICE CHAIR	1 00	X		X				0	0	0
(3) JIM SKIBBENS SECRETARY/TREASURER	1 00	X		X				0	0	0
(4) JB ABDULLAH DIRECTOR	1 00	X						0	0	0
(5) RENEE ALEXANDER SHERROD DIRECTOR	1 00	X						0	0	0
(6) ANDY ARNETTE DIRECTOR	1 00	X						0	0	0
(7) BLAS ARROYO DIRECTOR	1 00	X						0	0	0
(8) WAYNE DOZIER DIRECTOR	1 00	X						0	0	0
(9) DOUG ESAMANN DIRECTOR	1 00	X						0	0	0
(10) REGGIE ISSAC DIRECTOR	1 00	X						0	0	0
(11) CHERYL KELLER DIRECTOR	1 00	X						0	0	0
(12) JOHN QUINN DIRECTOR	1 00	X						0	0	0
(13) JENNIFER SCHWARZ DIRECTOR	1 00	X						0	0	0
(14) TONY SMITH DIRECTOR	1 00	X						0	0	0
(15) LYNN MURRAY DIRECTOR	1 00	X						0	0	0
(16) FRANCES QUEEN DIRECTOR	1 00	X						0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
(17) HENRY LOMAX JR DIRECTOR	1 00	X						0	0	0
(18) TWYLA MCDERMOTT DIRECTOR	1 00	X						0	0	0
(19) SHERI MCGIRT DIRECTOR	1 00	X						0	0	0
(20) LAURA HAMPTON DIRECTOR	1 00	X						0	0	0
(21) LOU HAWKINS DIRECTOR	1 00	X						0	0	0
(22) CHIP HAYNES DIRECTOR	1 00	X						0	0	0
(23) MARILYNN BOWLER DIRECTOR	1 00	X						0	0	0
(24) LARITA BARBER VP FUND DEVELOPMENT	50 00			X				131,787	0	10,479
(25) ANNE IBEKWE VP FINANCIAL SERVICES	55 00			X				120,184	0	16,120
(26) MIA HINES VP HUMAN RESOURCES	55 00			X				91,384	0	21,872
(27) BO HUSSEY VP MARKETING	60 00			X				93,892	0	17,815
(28) BARBARA MAIDA-STOLLE VP RETAIL SERVICES	55 00			X				135,900	0	20,395
(29) PAULETTE GRIFFIN VP WORKFORCE DEVELOPMENT	55 00			X				129,186	0	21,547
(30) ROBIN CARSON VP BUSINESS VENTURES	60 00			X				123,481	0	19,072
(31) GARY BARRETT VP ORGANIZATIONAL SUPPORT	55 00			X				145,736	0	17,237
(32) MICHAEL ELDER PRESIDENT & CEO	55 00			X				239,943	0	38,160
(33) CHRISTOPHER JACKSON VP STRATEGIC PLANNING	50 00			X				15,598	0	0
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,227,091	0	182,697

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization7

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
PMC HOLDINGS INC 4400-A STUART ANDREW BVLD CHARLOTTE, NC 28217	RENTAL OF REAL PROPERTY	252,771
BENBROOKE FREEDOM PARTNERS LLC PO BOX 60137 CHARLOTTE, NC 28260	RENTAL OF REAL PROPERTY	186,284
MRD DEVELOPMENT LLC PO BOX 936 ALBERMARLE, NC 28002	RENTAL OF REAL PROPERTY	186,000
VERNON L FAIRCLOTH JR 1012 EAST BVLD CHARLOTTE, NC 28203	RENTAL OF REAL PROPERTY	182,500
COLLEGE PROPERTIES 13900 CONLAN CIRCLE STE 240 CHARLOTTE, NC 28277	RENTAL OF REAL PROPERTY	141,794

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization7

Part VIII

Statement of Revenue

					(A)	(B)	(C)	(D)		
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a	175,600	7,712,300					
	b	Membership dues	1b							
	c	Fundraising events	1c	1,000						
	d	Related organizations	1d							
	e	Government grants (contributions)	1e							
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	7,535,700						
	g	Noncash contributions included in lines 1a-1f \$		7,186,068						
	h	Total. Add lines 1a-1f								
	Program Service Revenue	2a	Business Code						21,803,163	21,803,163
RETAIL PROGRAM			453310							
b		GOV SVCE FEES & GRANTS			624310	3,706,514				
c		ENVIRONMENTAL ENTERPRI			624310	577,962				
d		GOODWORK STAFFING			624310	499,014				
e		WORKFORCE DEVELOPMENT			624310	31,020				
f		All other program service revenue								
g		Total. Add lines 2a-2f			26,617,673					
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)			238,622			238,622		
	4	Income from investment of tax-exempt bond proceeds . .								
	5	Royalties								
	6a	(i) Real			18,000			18,000		
		18,000								
		(ii) Personal								
	b	Less rental expenses								
	c	Rental income or (loss)			18,000					
	d	Net rental income or (loss)								
	7a	(i) Securities			596,465	1,146		-3,143		
		596,465								
		(ii) Other								
	b	Less cost or other basis and sales expenses			598,462					
	c	Gain or (loss)			-1,997	-1,146				
	d	Net gain or (loss)								
	8a	Gross income from fundraising events (not including \$ 1,000 of contributions reported on line 1c) See Part IV, line 18			53,080	3,639		3,639		
		b	Less direct expenses						49,441	
		c	Net income or (loss) from fundraising events . .							
9a	Gross income from gaming activities See Part IV, line 19									
	b	Less direct expenses								
	c	Net income or (loss) from gaming activities . . .								
10a	Gross sales of inventory, less returns and allowances									
	a									
	b	Less cost of goods sold								
c	Net income or (loss) from sales of inventory . . .									
Miscellaneous Revenue				Business Code	25,522			25,522		
11a	OTHER INCOME			624310						
b										
c										
d	All other revenue									
e	Total. Add lines 11a-11d			25,522						
12	Total revenue. See Instructions			34,612,613	26,617,673	0	282,640			

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	32,187	32,187		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	417,983	417,983		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,409,787	579,783	706,233	123,771
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	16,893,531	15,783,836	1,093,396	16,299
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	817,024	640,941	174,843	1,240
9	Other employee benefits	1,572,769	1,568,829	3,060	880
10	Payroll taxes	1,772,236	1,591,192	168,949	12,095
a	Fees for services (non-employees)				
	Management	1,094,950	816,989	218,979	58,982
b	Legal	29,874	18,658	11,216	
c	Accounting	53,925	33,681	20,244	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	13,048	8,149	4,899	
g	Other				
12	Advertising and promotion	269,585	119,568	126,385	23,632
13	Office expenses	2,776,076	2,582,801	178,407	14,868
14	Information technology				
15	Royalties				
16	Occupancy	4,822,665	4,775,534	45,641	1,490
17	Travel	486,852	467,679	18,876	297
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	64,040	47,638	12,206	4,196
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,541,847	1,447,015	92,014	2,818
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	MEMBERSHIP DUES AND SUP	172,543	7,667	164,092	784
b	MISCELLANEOUS	78,035	28,952	47,566	1,517
c	AWARDS AND RECOGNITION	32,114	28,154	3,767	193
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	34,351,071	30,997,236	3,090,773	263,062
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720) 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)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			30,750	1	30,950
	2	Savings and temporary cash investments			4,330,513	2	3,759,398
	3	Pledges and grants receivable, net			88,160	3	91,571
	4	Accounts receivable, net			629,608	4	704,594
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees <i>Complete Part II of Schedule L</i>				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) <i>Schedule L</i>				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			2,399,550	8	2,487,763
	9	Prepaid expenses and deferred charges			298,595	9	334,928
	10a	Land, buildings, and equipment <i>cost or other basis Complete Part VI of Schedule D</i>	10a	25,236,393			
	b	Less accumulated depreciation	10b	12,050,900	13,048,950	10c	13,185,493
	11	Investments—publicly traded securities			4,643,573	11	5,898,405
	12	Investments—other securities <i>See Part IV, line 11</i>				12	
	13	Investments—program-related <i>See Part IV, line 11</i>				13	
	14	Intangible assets				14	
	15	Other assets <i>See Part IV, line 11</i>			111,068	15	207,427
	16	Total assets. Add lines 1 through 15 (must equal line 34)			25,580,767	16	26,700,529
Liabilities	17	Accounts payable and accrued expenses			2,739,924	17	3,348,940
	18	Grants payable				18	
	19	Deferred revenue			4,818	19	66,334
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability <i>Complete Part IV of Schedule D</i>				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>				22	
	23	Secured mortgages and notes payable to unrelated third parties			5,581,519	23	5,621,753
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities <i>Complete Part X of Schedule D</i>			234,461	25	344,989
	26	Total liabilities. Add lines 17 through 25			8,560,722	26	9,382,016
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			15,398,657	27	15,994,086
	28	Temporarily restricted net assets			1,621,388	28	1,324,427
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here ☐ 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			17,020,045	33	17,318,513
	34	Total liabilities and net assets/fund balances			25,580,767	34	26,700,529

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	34,612,613
2	Total expenses (must equal Part IX, column (A), line 25)	2	34,351,071
3	Revenue less expenses Subtract line 2 from line 1	3	261,542
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	17,020,045
5	Other changes in net assets or fund balances (explain in Schedule O)	5	36,926
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	17,318,513

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 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	Yes	
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 separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated 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?	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT INC

Employer identification number
56-0844639

Part I

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	5,892,059	6,014,319	9,111,214	7,141,339	7,712,300	35,871,231
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	5,892,059	6,014,319	9,111,214	7,141,339	7,712,300	35,871,231
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						35,871,231

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	5,892,059	6,014,319	9,111,214	7,141,339	7,712,300	35,871,231
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	159,552	255,909	211,023	224,732	256,622	1,107,838
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)	50,286	26,080	18,153	63,040	25,522	183,081
11 Total support (Add lines 7 through 10)						37,162,150
12 Gross receipts from related activities, etc (See instructions)					12	113,434,521
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	96 530 %
15 Public Support Percentage for 2009 Schedule A, Part II, line 14	15	96 750 %
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
17a 10%-facts-and-circumstances test—2010. 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 ▶		
b 10%-facts-and-circumstances test—2009. 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 ▶		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶		

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here 						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization 		
b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization 		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions 		

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME OTHER INCOME TAX REFUNDS, COMMISSIONS, CASH OVERAGE/SHORTAGE, MISC REVENUES

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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

2010

Open to Public
Inspection

Name of the organization

GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT INC

Employer identification number

56-0844639

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? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No	

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

1

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

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–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
2a	Total number of conservation easements
2b	Total acreage restricted by conservation easements
2c	Number of conservation easements on a certified historic structure included in (a)
2d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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 Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2010

Part III

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

3

Using the organization's 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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the 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	Investment earnings or 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

b

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

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

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		4,963,247		4,963,247
b Buildings		11,074,874	5,967,211	5,107,663
c Leasehold improvements		715,334	440,578	274,756
d Equipment		8,089,884	5,643,111	2,446,773
e Other		393,054		393,054
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				13,185,493

Part XI

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	34,612,613
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	34,351,071
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	261,542
4	Net unrealized gains (losses) on investments	4	36,926
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 - 8	9	36,926
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	298,468

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	34,748,249
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	36,926
b	Donated services and use of facilities	2b	49,269
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	49,441
e	Add lines 2a through 2d	2e	135,636
3	Subtract line 2e from line 1	3	34,612,613
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	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	34,612,613

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	34,449,781
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	49,269
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	49,441
e	Add lines 2a through 2d	2e	98,710
3	Subtract line 2e from line 1	3	34,351,071
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	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	34,351,071

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, 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.

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	MANAGEMENT EVALUATED GOODWILL'S TAX POSITIONS AND CONCLUDED THAT GOODWILL HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS
PART XII, LINE 2D - OTHER ADJUSTMENTS		RECLASSIFICATION OF FUNDRAISING EXPENSES
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RECLASSIFICATION OF FUNDRAISING EXPENSES

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT INC	Employer identification number 56-0844639
--	--

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☐ Mail solicitations

b ☐ Internet and e-mail solicitations

c ☐ Phone solicitations

d ☐ In-person solicitations

e ☐ Solicitation of non-government grants

f ☐ Solicitation of government grants

g ☐ Special fundraising events
- 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. Form 990-EZ filers are not required to complete this table.

(i) Name and address 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.

Revenue		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		LUNCHEON			(Add col (a) through col (c))
		(event type)	(event type)	(total number)	
1	Gross receipts	54,080			54,080
2	Less Charitable contributions	1,000			1,000
3	Gross income (line 1 minus line 2)	53,080			53,080
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes	848		848
	6	Rent/facility costs	34,350		34,350
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	14,243		14,243
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			
					3,639

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.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

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? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No

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

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide 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?

☐ Yes ☐ No

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

Name

Address

16 Gaming manager information

Name

Gaming manager compensation \$

Description of services provided

☐ Director/officer

☐ Employee

☐ 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?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
------------	-----------------	-------------

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT INC

Employer identification number
56-0844639

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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. Part II can be duplicated if additional space is needed. ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) WISH PROGRAM CO CRISIS ASSISTANCE MINISTRY DBA MECKLENBURG COUNCIL 500 A SPRATT STREET CHARLOTTE, NC 28206	51-0431450	501(C)(3)	32,187				TRANSPORTATION ASSISTANCE

2

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

1

3

Enter total number of other organizations

0

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use 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
(1) JOB TRAINING - WORKFORCE INVESTMENT ACT	242	415,202			

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 WISH PROGRAM PROVIDES A QUARTERLY BREAKDOWN OF TRANSPORTATION NEEDS, VENDOR USED AND PARTICIPANT WHO RECEIVED FUNDING RECEIPTS ARE MAINTINED WITHIN PARTICIPANTS FILES
OTHER INFORMATION	PART IV	THROUGH JOB TRAINING GOODWILL PROVIDES SERVICES FOR PEOPLE WITH DISADVANTAGES, SUCH AS WELFARE DEPENDENCY, HOMELESSNESS AND LACK OF EDUCATION OR WORK EXPERIENCE, AS WELL AS THOSE WHO ARE PHYSICALLY, MENTALLY AND EMOTIONALLY CHANLLENGED THE JOB TRAINING GIVES PARTICIPANTS THE SKILLS AND TRAINING NEEDED TO FIND AND KEEP JOBS CASH ASSISTANCE FOR THIS PROGRAM IS PAID ON AN INDIVIDUAL BASIS FOR THOSE WHO PARTICIPATE IN AND COMPLETE THE PROGRAM

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT INC

Employer identification number

56-0844639

Part I

Questions Regarding Compensation

		Yes	No
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		
	☐ First-class or charter travel ☐ Travel for companions ☒ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
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?	2	Yes
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		
	☐ Compensation committee ☒ Independent compensation consultant ☒ Form 990 of other organizations ☒ Written employment contract ☒ Compensation survey or study ☒ 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 from the organization or a related organization?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only 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?	5a	No
b	Any related organization?	5b	No
	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?	6a	Yes
b	Any related organization?	6b	No
	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	7	No
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	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) BARBARA MAIDA-STOLLE	(i) (ii)	115,948 0	19,952 0	0 0	8,909 0	11,486 0	156,295 0	0 0
(2) PAULETTE GRIFFIN	(i) (ii)	129,186 0	0 0	0 0	10,263 0	11,284 0	150,733 0	0 0
(3) GARY BARRETT	(i) (ii)	142,691 0	0 0	3,045 0	10,899 0	6,338 0	162,973 0	0 0
(4) MICHAEL ELDER	(i) (ii)	228,467 0	4,824 0	6,652 0	18,053 0	20,107 0	278,103 0	0 0
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part IIISupplemental Information

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.

Identifier	Return Reference	Explanation
	PART I, LINE 6	GOODWILL PROVIDES A PERFORMANCE PAY COMPONENT TO COMPENSATION IN ADDITION TO A BASE SALARY FOR RETAIL SERVICES IN ORDER TO BE CONSISTENT WITH BEST PRACTICES IN MERCHANDISING AND RETAIL COMMUNITIES. PERFORMANCE PAY IS ISSUED AT THE DISCRETION OF GOODWILL. GOODWILL HAS SET CRITERIA FOR DETERMINING THE PAYMENT OR NON-PAYMENT OF PERFORMANCE PAY AND RESERVES THE RIGHT TO CHANGE THE CRITERIA AT ITS DISCRETION WITHOUT NOTICE. THE PERFORMANCE PAY IS BASED ON ACHIEVING PERFORMANCE THRESHOLD FACTORS WHICH INCLUDE INCREASE OF NET INCOME OVER PRIOR PERIOD NET INCOME, AND THE RELATIONSHIP OF MISSION HOURS (PERSONS WITH BARRIERS TO EMPLOYMENT) PERFORMED COMPARED TO TOTAL RETAIL PAYROLL HOURS. THE AMOUNT OF PERFORMANCE BASED PAY IS SET NOT TO EXCEED ESTABLISHED PERCENTAGE THRESHHOLD PER AGREEMENT.

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT INC

Employer identification number
56-0844639

Part I

Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2

Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958

\$

3

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

\$

Part II

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total					\$					

Part III

Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV

Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) DAVID HAGGART	DAVID HAGGART IS THE VICE CHAIR OF THE BOARD OF DIRECTORS	575,000	IN NOVEMBER 2010 THE ORGANIZATION ACQUIRED PROPERTY LOCATED AT RIVERVIEW COMMONS SHOPPING CENTER, 1922 MOUNT GALLANT ROAD, ROCK HILL, SOUTH CAROLINA VIA ASSIGNMENT OF CONTRACT AGREEMENT BETWEEN PIEDMONT COMPANIES, INC AND GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT, INC THE PROPERTY WAS ORIGINALLY HELD BY CK RIVERVIEW COMMONS, LLC WHERE A GOODWILL BOARD MEMBER, DAVID HAGGART IS EMPLOYED AND HAS AUTHORITY TO BIND BUSINESS TRANSACTIONS ON BEHALF OF CK RIVERVIEW COMMONS, LLC A FULL DISCLOSURE OF MR HAGGARTS RESPONSIBILITIES WITH BOTH GOODWILL INDUSTRIES AND CK RIVERVIEW COMMONS, LLC WAS MADE TO CONCERNED PARTIES IN ADVANCE OF THE ACQUISITION OF THE PROPERTY		No

Part V

Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
------------	------------------	-------------

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT INC

Employer identification number
56-0844639

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		7,078,997	COMPARABLE MERCHANDISE
6 Cars and other vehicles .	X	84	107,071	EXPERT OPINION
7 Boats and planes				
8 Intellectual property . .				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests .				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other . .				
15 Real estate—Residential .				
16 Real estate—Commercial				
17 Real estate—Other . .				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts . .				
23 Scientific specimens . .				
24 Archeological artifacts .				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	

30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	Yes	No
b	If "Yes," describe the arrangement in Part II		No
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	No
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	Yes	
b	If "Yes," describe in Part II		
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
THIRD PARTY USE	PART I, LINE 32B	GOODWILL HAS AN AGREEMENT WITH A THIRD PARTY KNOWN AS NATIONAL CHARITY SERVICES INC THEY PROVIDE A FULL 24/7 CALL CENTER THAT MANAGES ALL RELATED ISSUES WITH DONATED VEHICLES THEIR RESPONSIBILITIES ALSO INCLUDE PREPARING AND FILING OF FORM 1098-C

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT INC	Employer identification number 56-0844639
--	--

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE BOARD OF DIRECTORS SHALL HAVE THE POWERS AND DUTIES NECESSARY OR APPROPRIATE FOR THE ADMINISTRATION OF THE AFFAIRS OF THE CORPORATION ALL POWERS OF THE CORPORATION, EXCEPT THOSE SPECIFIED, GRANTED, OR RESERVED TO THE MEMBERS BY LAW, THE ARTICLES OF INCORPORATION, OR THE BYLAWS, SHALL BE VESTED IN THE DIRECTORS

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		THE BOARD OF DIRECTORS MAY ELECT ADDITIONAL MEMBERS TO THE CORPORATION, TERMS OF AND QUALIFICATIONS FOR SUCH ADDITIONAL MEMBERS SHALL BE DETERMINED BY THE BOARD OF DIRECTORS ALL MEMBERS IN GOOD STANDING AT THE TIME OF THE ANNUAL MEETING SHALL BE ELIGIBLE TO VOTE IN THE ELECTION OF DIRECTORS THE BOARD OF DIRECTORS SHALL ELECT ANNUALLY A CHAIRMAN, VICE-CHAIRMAN, AND SECRETARY/TREASURER OF THE CORPORATION AT THEIR FIRST MEETING FOLLOWING THE ANNUAL MEETING OF THE MEMBERSHIP THE PRESIDENT IS ELECTED BY THE BOARD OF DIRECTORS OF THE CORPORATION THE PRESIDENT DOES NOT HAVE VOTING RIGHTS A VACANCY MAY BE FILLED BY THE BOARD OF DIRECTORS A VACANCY OCCURS WHEN AN ELECTED DIRECTOR SEPARATES FROM THE BOARD, WHEN THE MEMBERSHIP FAILS TO ELECT A FULL SLATE OF DIRECTORS, OR WHEN A SEAT HAD BEEN DECLARED VACANT DUE TO EXCESSIVE ABSENCES PROVIDED BY THE BYLAWS

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		OUR TAX PREPARERS REVIEW THE 990 WITH THE AUDIT COMMITTEE, AND ANSWER ANY QUESTIONS THEY MAY HAVE EACH BOARD MEMBER IS THEN PROVIDED A COPY OF THE 990 FOR REVIEW ONCE THE REVIEW IS COMPLETE THE PRESIDENT/CEO WILL SIGN THE FORM FOR SUBMISSION TO IRS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY BY PROVIDING COPIES OF THIS POLICY AND PROCEDURES TO ALL BOARD MEMBERS VIA THE EXECUTIVE ASSISTANT, AND TO MEMBERS OF MANAGEMENT BY THE HUMAN RESOURCES DEPARTMENT DURING NEW EMPLOYEE INTAKE, AND ANNUALLY, THEREAFTER EACH PERSON IS REQUIRED TO REVIEW AND SIGN THE DOCUMENT, ACKNOWLEDGING THEIR WILLINGNESS TO ABIDE BY THIS POLICY THESE STATEMENTS ARE FILED IN THE EXECUTIVE ASSISTANT'S OFFICE COPIES ARE FILED IN INDIVIDUAL PERSONNEL FILES FOR MANAGEMENT STAFF

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF DIRECTORS HAS THE SOLE AUTHORITY AND RESPONSIBILITY FOR ESTABLISHING AND CHANGING THE TOTAL COMPENSATION AND BENEFITS OF THE PRESIDENT AND THE BENEFITS AND TOTAL COMPENSATION RANGES FOR OTHER HIGHLY COMPENSATED POSITIONS (VICE PRESIDENTS), APPLYING THE SAME PAY PHILOSOPHY THAT IS UTILIZED FOR ALL OTHER EMPLOYEES IN THE ORGANIZATION. THE BOARD ESTABLISHES AND MONITORS THE PERFORMANCE AND TOTAL COMPENSATION OF THE PRESIDENT/CEO. THE BOARD IS RESPONSIBLE FOR ANNUALLY CONDUCTING A FORMAL PERFORMANCE REVIEW OF THE PRESIDENT, AT WHICH TIME ADJUSTMENTS TO TOTAL COMPENSATION MAY BE CONSIDERED. QUESTIONS ABOUT THE PROCESS OR SPECIFICS OF THE PRESIDENT'S COMPENSATION PACKAGE ARE DIRECTED TO THE CHAIR OF THE BOARD. THE BOARD CONDUCTS AN ANNUAL REVIEW OF THE SALARY RANGES AND BENEFITS FOR ALL HIGHLY COMPENSATED POSITIONS (PRESIDENT AND VICE PRESIDENTS) UTILIZING THE SAME PRINCIPLES THAT GOVERN ALL EMPLOYEE SALARIES. THE BOARD REVIEWS INFORMATION ON COMPARABLE SALARIES WITHIN GOODWILL INDUSTRIES INTERNATIONAL AFFILIATES AND OTHER APPROPRIATE EXTERNAL MARKET SURVEYS SPECIFIC TO THE NOT-FOR-PROFIT INDUSTRY. PERTAINING TO COMPANIES WITH SIMILAR REVENUE BASE PERIODICALLY, AN OUTSIDE CONSULTANT IS ENGAGED TO ASSESS THE REASONABLENESS, COMPETITIVENESS AND CONSISTENCY WITH COMPENSATION "BEST PRACTICES" OF TOTAL COMPENSATION FOR THE PRESIDENT AND VICE PRESIDENTS AND TO MAKE RECOMMENDATIONS TO THE BOARD. ANY ADJUSTMENT TO THE SALARY RANGES AND BENEFITS MADE IS CONSISTENT WITH THE ORGANIZATION'S COMPENSATION POLICY.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS ARE POSTED ON THE ORGANIZATION'S WEBSITE AND OTHER LINKS. THEY ARE ALSO MADE AVAILABLE TO THE PUBLIC UPON REQUEST. THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 36,926

Identifier	Return Reference	Explanation
	FORM 990, PART XI, LINE 2C, AUDIT COMMITTEE	THE AUDIT COMMITTEE'S PROCESS OF AUDIT EVALUATION HAS NOT CHANGED FROM THE PRIOR YEAR

Form

4562

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2010

Attachment
Sequence No 67

Department of the Treasury
Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

Name(s) shown on return GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT INC	Business or activity to which this form relates FORM 990 PAGE 10	Identifying number 56-0844639
--	---	--------------------------------------

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount See the instructions for a higher limit for certain businesses	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 .	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	1,541,847

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	1,541,847
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No						24b If "Yes," is the evidence written? ☐ Yes ☐ No		
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation/ deduction	(i) Elected section 179 cost
25Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25		
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1							29	

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) A mortization period or percentage	(f) A mortization for this year
42 A mortization of costs that begins during your 2010 tax year (see instructions)					
43 A mortization of costs that began before your 2010 tax year				43	
44 Total. Add amounts in column (f) See the instructions for where to report				44	

Additional Data

Software ID:

Software Version:

EIN: 56-0844639

Name: GOODWILL INDUSTRIES OF THE SOUTHERN PIEDMONT
INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(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			
BEV KOTHE CHAIR	2 00	X		X				0	0	0
DAVID HAGGART VICE CHAIR	1 00	X		X				0	0	0
JIM SKIBBENS SECRETARY/TREASURER	1 00	X		X				0	0	0
JB ABDULLAH DIRECTOR	1 00	X						0	0	0
RENEE ALEXANDER SHERROD DIRECTOR	1 00	X						0	0	0
ANDY ARNETTE DIRECTOR	1 00	X						0	0	0
BLAS ARROYO DIRECTOR	1 00	X						0	0	0
WAYNE DOZIER DIRECTOR	1 00	X						0	0	0
DOUG ESAMANN DIRECTOR	1 00	X						0	0	0
REGGIE ISSAC DIRECTOR	1 00	X						0	0	0
CHERYL KELLER DIRECTOR	1 00	X						0	0	0
JOHN QUINN DIRECTOR	1 00	X						0	0	0
JENNIFER SCHWARZ DIRECTOR	1 00	X						0	0	0
TONY SMITH DIRECTOR	1 00	X						0	0	0
LYNN MURRAY DIRECTOR	1 00	X						0	0	0
FRANCES QUEEN DIRECTOR	1 00	X						0	0	0
HENRY LOMAX JR DIRECTOR	1 00	X						0	0	0
TWYLA MCDERMOTT DIRECTOR	1 00	X						0	0	0
SHERI MCGIRT DIRECTOR	1 00	X						0	0	0
LAURA HAMPTON DIRECTOR	1 00	X						0	0	0
LOU HAWKINS DIRECTOR	1 00	X						0	0	0
CHIP HAYNES DIRECTOR	1 00	X						0	0	0
MARILYNN BOWLER DIRECTOR	1 00	X						0	0	0
LARITA BARBER VP FUND DEVELOPMENT	50 00			X				131,787	0	10,479
ANNE IBEKWE VP FINANCIAL SERVICES	55 00			X				120,184	0	16,120

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(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			
MIA HINES VP HUMAN RESOURCES	55 00			X				91,384	0	21,872
BO HUSSEY VP MARKETING	60 00			X				93,892	0	17,815
BARBARA MAIDA-STOLLE VP RETAIL SERVICES	55 00			X				135,900	0	20,395
PAULETTE GRIFFIN VP WORKFORCE DEVELOPMENT	55 00			X				129,186	0	21,547
ROBIN CARSON VP BUSINESS VENTURES	60 00			X				123,481	0	19,072
GARY BARRETT VP ORGANIZATIONAL SUPPORT	55 00			X				145,736	0	17,237
MICHAEL ELDER PRESIDENT & CEO	55 00			X				239,943	0	38,160
CHRISTOPHER JACKSON VP STRATEGIC PLANNING	50 00			X				15,598	0	0

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code	) (Expenses \$	794,871	including grants of \$ 10,540) (Revenue \$ 4,939)
OCCUPATIONAL SKILLS TRAINING GOODWILL WORKS CLOSELY WITH LOCAL EMPLOYERS TO DEVELOP IN-DEPTH PROGRAMS THAT PREPARE PEOPLE FOR JOBS IN SPECIFIC INDUSTRIES SUCH AS BANKING, CALL CENTERS AND CUSTOMER SERVICE, HOSPITALITY AND CONSTRUCTION THIS PROGRAM SERVICE IS PARTIALLY FUNDED BY THE UNITED WAY IN 2010, OCCUPATIONAL SKILLS TRAINING DELIVERED SERVICES TO 571 INDIVIDUALS AND PLACED 216 PEOPLE IN EMPLOYMENT			
(Code	) (Expenses \$	587,865	including grants of \$ 4,726) (Revenue \$ 985)
CAREER DEVELOPMENT SERVICES MATCHES INDIVIDUAL SKILLS AND ABILITIES WITH THE NEEDS OF PROSPECTIVE EMPLOYERS, AND PROVIDES JOB READINESS AND LIFE SKILLS TRAINING TO HELP PREPARE INDIVIDUALS FOR THE WORLD OF WORK RETENTION STRATEGIES ASSIST PARTICIPANTS IN MAINTAINING EMPLOYMENT AND EXPLORING CAREER DEVELOPMENT OPPORTUNITIES IN 2010, CAREER DEVELOPMENT SERVICES DELIVERED SERVICES TO 6,280 INDIVIDUALS AND PLACED 420 PEOPLE IN EMPLOYMENT			