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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)

OMB No 1545-0047

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

Open to Public

A Fo	or the 2	2012 cal	endar year, or tax year beginni	ng 10-01-2012 , 2012, and ending	09-30-	2013			<u> </u>	
		pplicable	C Name of organization GOODWILL INDUSTRIES OF KENTU				D Emplo	yer ident	tification number	
┌ Ad	dress ch	ange	Doing Business As				61-04	75284		
∏ Na	me char	nge	Doing Business As							
	tıal retur			mail is not delivered to street address) Ro	oom/suite		E Telepho	ne numb	er	
	rmınated		1325 SOUTH FOURTH STREET				(502)	272-17	700	
	nended r		City or town, state or country, and LOUISVILLE, KY 40208	ZIP + 4			(==7			
Г Ар	plication	pending	,				G Gross r	eceipts \$	23,900,194	
			F Name and address of pr ROLAND R BLAHNIK	ncipal officer		H(a) Is th		return f	or □ Yes 🔽 No	
			1325 SOUTH FOURTH ST	REET		affilia	ites) 1 es J• No	
			LOUISVILLE,KY 40208						ed? TYes TNo	
Ta	ax-exem	pt status	✓ 501(c)(3)	(insert no)		If "N	o," attach	a list (see instructions)	
	ebsite	:. ► WW	W GOODWILLKY ORG			H(c) Grou	ıp exempt	ion num	ber ►	
						I. v c.		22 14 6		
	m of org		Corporation Trust Association	on Other -		L Year of fo	mation 19	23 M S	State of legal domicile KY	
	1 E	Briefly d GOODW	escribe the organization's miss /ILL INDUSTRIES OF KENTUC	ion or most significant activities KY INC 'S (GOODWILL) MISSION						
Governance		CREATI	ON, PLACEMENT, AND OTHE	AND MAINTAIN EMPLOYMENT T R TRAINING GOODWILL ACCON IARY 501(C)(3) ORGANIZATION	MPLISH					
ŝ	2 0	Check th	nis box দ if the organization d	iscontinued its operations or dispo	osed of r	more than 2	5% of its	net ass	ets	
න් ර								1 . 1		
Activities &	1			ning body (Part VI, line 1a) of the governing body (Part VI, lin				3	16	
₹ Ş	1			calendar year 2012 (Part V, line 2				5	107	
4	6 Total number of volunteers (estimate if necessary)							6	1,237	
	7a ⊺	Γotal un	related business revenue from l	Part VIII, column (C), line 12 .				7a	0	
	ь	Net unre	lated business taxable income	from Form 990-T, line 34				7b	0	
						Pric	r Year		Current Year	
ā	8			ine 1h)			7,898,2		5,620,135	
Revenue	9 10			line 2g)			14,841,2		14,840,250	
ž	11			, lines 5, 6d, 8c, 9c, 10c, and 11e			77,		25,756	
	12			1 (must equal Part VIII, column (A						
	42			+ + + + + + + + + + + + + + + + + + +			22,946,5		20,571,283	
	13 14			t IX, column (A), lines 1-3) IX, column (A), line 4)				0	0	
	15		·	, , ,,						
\$		Salaries, other compensation, employee benefits (Part IX, column (A 5-10)					7,456,731		8,030,043	
Expenses	16a	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 173,570					6,363		8,481	
五										
	17 18			lines 11a-11d, 11f-24e) ust equal Part IX, column (A), line			5,440,3		5,444,656 13,483,180	
	19		·	18 from line 12			10,043,0		7,088,103	
Net Assets or Fund Balances							g of Curre 'ear		End of Year	
ess Bak	20						105,629,6		110,852,954	
end Grad	21						40,044,3		38,184,718	
	22			t line 21 from line 20			65,585,2	298	72,668,236	
Unde my k	nowled	Ities of Ige and		camined this return, including acco mplete Declaration of preparer (ot						
		****	**			20	014-02-14			
Sigr	า	I B	ature of officer				ate			
Here ROLA			AND R BLAHNIK PRESIDENT							
		<u> </u>	e or print name and title	Dronarada signatura	I p-2	, ,	. –	DTIN		
Pai	A	L F	Print/Type preparer's name REBECCA L PHILLIPS CPA	Preparer's signature	Date	I CITE	eck if -employed	PTIN P000240	55	
	u ·pare		rimn's name MOUNTJOY CHILTON	MEDLEY LLP		Fim	n's EIN 🕨 27	7-1235638	3	
	Pare Onl		Firm's address ► 462 S FOURTH ST SU	ITE 2600		Pho	ne no (502) 749-190	00	
J 36	, UIII	ا "د	LOUISVILLE, KY 4020	23445						

Par	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
	WILL'S MISSION IS TO HELP PEOPLE WITH DISABILITIES OR OTHER DISADVANTAGES ACHIEVE AND MAINTAIN DYMENT TO GAIN A BETTER QUALITY OF LIFE
2	Old the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	f "Yes," describe these new services on Schedule O
3	Old the organization cease conducting, or make significant changes in how it conducts, any program services?
	f "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code) (Expenses \$ 7,153,783 including grants of \$) (Revenue \$ 11,300,285)
	GOODWILL INDUSTRIES OF KENTUCKY, INC (GOODWILL) PROVIDES SUPPORT SERVICES FOR ITS FOUR NON-PROFIT 501(C)(3) SUBSIDIARIES, AND IN CONJUNCTION WITH THESE SUBSIDIARIES COLLECTIVELY PROVIDED JOBS FOR MORE THAN 1,275 EMPLOYEES AT THE CLOSE OF FISCAL YEAR 2013 OVERALL, THESE 1,275 PEOPLE EXEMPLIFIED THE ORGANIZATION'S MISSION BECAUSE 80% OF THEM REPORTED HAVING A DISABILITY OR OTHER DISADVANTAGE THESE SUPPORT SERVICES ALLOWED THE RELATED ORGANIZATIONS TO REMAIN COST-EFFICIENT, EFFECTIVE, AND MISSION-FOCUSED AS THEY CREATED MORE THAN 2,465 PLACEMENTS OF INDIVIDUALS WITH DISABILITIES OR OTHER DISADVANTAGES INTO JOBS, PAID MORE THAN \$17,830,000 IN MISSION-RELATED WAGES AND SERVED MORE THAN 15,400 PEOPLE WHICH INCLUDES GOODWILL PROVIDING INFORMATION AND SERVING REFERRALS
4b	(Code) (Expenses \$ 3,011,539 including grants of \$) (Revenue \$ 1,805,209)
.5	GOODWILL INDUSTRIES OF KENTUCKY, INC SPECIALIZED WORKFORCE DEVELOPMENT PROGRAMS DELIVERED JOB PLACEMENT AND RETENTION SERVICES, COUNSELING, SKILLS TRAINING, ASSESSMENTS, AND JOB COACHING TO PEOPLE WITH DISABILITIES OR OTHER DISADVANTAGES, ADVANCING THEIR VOCATIONAL OPPORTUNITIES, AND ASSISTING THEM IN OBTAINING AND MAINTAINING EMPLOYMENT IN FY 2013, THESE SPECIALIZED PROGRAMS MADE 900 JOB PLACEMENTS DELIVERED 4,829 SERVICES, AND PROVIDED INFORMATION AND SERVICE REFERRALS TO 7,402 PEOPLE WHO CONTACTED GOODWILL FOR ASSISTANCE
	(Code) (Expenses \$ 1,696,163 including grants of \$) (Revenue \$ 1,683,618)
	GOODWILL INDUSTRIES OF KENTUCKY, INC (GOODWILL) EMPLOYS PERSONS TO PROVIDE JANITORIAL AND CUSTODIAL SERVICES UNDER CONTRACTS THESE SERVICES ARE PERFORMED WITH A WORKFORCE COMPRISED OF MORE THAN 75% OF PERSONS WITH SIGNIFICANT DISABILITIES THIS PROGRAM IS CONSISTEN WITH GOODWILL'S MISSION THESE CONTRACTS EMPLOYED 55 PERSONS, SERVED 55 PERSONS, AND PAID \$454,838 IN MISSION-RELATED WAGES
	(Code) (Expenses \$ 161,575 including grants of \$) (Revenue \$ 51,138)
	GOODWILL INDUSTRIES OF KENTUCKY ALSO PROVIDED JOB OPPORTUNITIES IN ITS GOOD SHRED DOCUMENT DESTRUCTION PROGRAM, WHICH EMPLOYED 5 PEOPLE AND PAID \$17,824 IN MISSION-RELATED WAGES
	Other program services (Describe in Schedule O)
	(Expenses \$ 161,575 including grants of \$) (Revenue \$ 51,138)
4e	Total program service expenses ► 12,023,060

Part IV Checklist of Required Schedule
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			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 $A^{\bullet \bullet}$	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	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^{\bullet}	3		Νo
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	Yes	
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	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 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[4]{2}$	10	Yes	
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			
а	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	Yes	
е	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 and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	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 United States? 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 United States? 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 $11e^7$ 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? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1° If "Yes," complete Schedule I, Parts I and II	21		No
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? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

- 11	Statements Regarding Other 1R5 Fillings and Tax Compliance			г
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 83			.40
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
	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			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
)	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			
ı	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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 as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	7-		NI
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	H		
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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		
	Sponsoring organizations maintaining donor advised funds.	-		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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		
,	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14a		I N

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
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		Νo
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	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete 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	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did 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?			
а	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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ►KY
- 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 made these available. Check all that apply
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►GOODWILL INDUSTRIES OF KENTUCKY INC 1325 SOUTH FOURTH STREET LOUISVILLE, KY (502)272-1700

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

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

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

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

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) (B) (C) (D) (E)									(E)	
(A) Name and Title	(B) Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	İnstitutional Trustee	Officei	Key employee	Highest compensated employee	omer	MISC)	MISC)	organization and related organizations
(1) FAITH P MERCKE	1 00	х		Х				0	0	0
CHAIRPERSON	1 00							Ü		
(2) ROBERT N SHAW	1 00	х		х				0	0	0
VICE CHAIRPERSON (3) EMILY LEDFORD LAWRENCE	1 00									
VICE CHAIRPERSON	1 00	х		х				0	0	0
(4) DAVID H HINTON	1 00	х		Х				0	0	0
TREASURER	1 00								_	
(5) ELLIE KERSTETTER	1 00	×		х				0	0	0
SECRETARY (6) MIKE CARPENTER	1 00									
BOARD MEMBER	1 00	×						О	0	0
(7) LINDA SCHOLLE COWAN	1 00									
BOARD MEMBER	1 00	х						0	0	0
(8) DR J PRICE FOSTER	1 00									
BOARD MEMBER	1 00	X						0	0	0
(9) DANIEL HALL	1 00									
BOARD MEMBER	1 00	Х						0	0	0
(10) DWIGHT L HAYGOOD JR	1 00									
BOARD MEMBER	1 00	X						0	0	0
(11) JEANNA JONES	1 00									
BOARD MEMBER	1 00	X						0	0	0
(12) CHARLES F LAMBERT III	1 00									
BOARD MEMBER	1 00	×						0	0	0
(13) JEFFREY V MCGOWAN	1 00							_	_	
BOARD MEMBER	1 00	X						0	0	0
(14) MARK D RORER	1 00	.,								
BOARD MEMBER	1 00	X						0	0	0
(15) ALLEN D ROSE	1 00	v							_	•
BOARD MEMBER	1 00	Х					L_	0	0	0
(16) RON SANTELLA	1 00	V						0	0	
BOARD MEMBER	1 00	Х							0	0
(17) ROLAND R BLAHNIK	29 00			Х				321,961	0	89,612
PRESIDENT	19 00							321,901		
										Form 990 (2012)

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

	(A) Name and Title Av hou wed		person is both an officer and a director/trustee)					ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estir amount compe from	F) nated of other nsation n the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	and re	ization elated zations
(18)	ERIN GOLD	5 00			х				186,820		0	22,575
	PRESIDENT BLUEGRASS	41 00							,			
` '	MARSHA BERRY	16 00			x				168,022		o	16,955
	PRESIDENT BEARGRASS DAVID COBB	29 00 24 00										
` '	PRESIDENT DEVELOPMENT	19 00			Х				126,181		o	18,342
	KIM BURSE	22 00										
VICE-	PRESIDENT ADMINISTRATIVE SERVICES	21 00			X				126,142		0	14,487
(22)	OHN WADE	8 00			Х				125,884		0	14,350
	PRESIDENT WESTERN 32 00											
	(RISTEL FRYMAN	14 00			x				84,913		o	16,047
VICE-	/ICE-PRESIDENT CUMBERLAND 26 00											
					_	-						
1b	Sub-Total			٠.			P				I	
c	Total from continuation sheets to Pa	rt VII, Section A					►					
d	Total (add lines 1b and 1c)						•		1,139,923	0		192,368
2	Total number of individuals (including \$100,000 of reportable compensation)				ed a	bove	e) who	rec	eived more than			
											Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual									d employee	3	No
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual									Yes			
5	Did any person listed on line 1a receiver services rendered to the organization								_	ndividual for	;	No
S	ection B. Independent Contrac	tors										
1									r			
(A) (B) Name and business address Description of services								(C) Compensation				
	Haire die								Безсприк	51 55141665	Сотпре	
							_				Ī	

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization \blacktriangleright 0

Part V	••	Statement of Revenue Check if Schedule O contains a respo	nco to any question	un thic Part VIII			_
		Check if Schedule of Contains a respo	nse to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
	1a	Federated campaigns 1a					
ons, Gifts, Grants Similar Amounts	b	Membership dues 1b	,				
ا ۾ وي _ٽ	С	Fundraising events 10	:				
fš,	d	Related organizations 1d					
<u>.</u> 19. Gi							
ns,	е						
를 'a	f	All other contributions, gifts, grants, and similar amounts not included above	286,704				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines		į	į		
Contribution and Other	h	1a-1f \$ Total. Add lines 1a-1f		5,620,135			
ة ت		Total. Add filles Id II	· · · •	5,523,223			
e E	2a	INTERCOMPANY RENT	Business Code	F 000 717	F 000 717		
wer	za b	MANAGEMENT FEE	561499	5,980,717	5,980,717		
選 	C	WORKFORCE DEVELOPMENT	561499	4,733,934	4,733,934		
Š	d	NISH CONTRACT & GOOD SHRED	624310 561700	1,805,209	1,805,209		
Program Serwce Revenue	u e	STATE REVENUE FOR CONTRUCTION	561700	1,734,236 586,154	1,734,236 586,154		
ran	f	All other program service revenue	361499	300,134	300,134		
ွို	•						
-	g			14,840,250			
	3	Investment income (including divider and other similar amounts)		114,053			114,053
	4	Income from investment of tax-exempt bond	proceeds 🕨				
	5	Royalties	🕨				
	_	(i) Real	(II) Personal				
	6a b	Gross rents 3,600 Less rental 0					
	_	expenses					
	С	Rental income 3,600 or (loss)					
	d	Net rental income or (loss)	, · · · · · · · · · · · · · · · · · · ·	3,600			3,600
	7a	(i) Securities Gross amount	(II) O ther				
	/a	from sales of 3,300,000 assets other than inventory					
	b	Less cost or other basis and 3,328,911					
		sales expenses					
	C C	Gain or (loss) -28,911		-28,911			-28,911
a a	d 8a	Net gain or (loss) Gross income from fundraising events (not including		20,311			20,511
Other Revenue		\$ of contributions reported on line 1c) See Part IV, line 18					
ther F	b	Less direct expenses b					
ō	c	Net income or (loss) from fundraising	events				
	9a	Gross income from gaming activities See Part IV, line 19					
	L	loss direct expenses b					
	b c	Less direct expenses b Net income or (loss) from gaming act					
		Gross sales of inventory, less returns and allowances					
		а					
		Less cost of goods sold b					
}	С	Net income or (loss) from sales of inv Miscellaneous Revenue	Business Code				
	11a	MISCELLANEOUS	900099	22,156			22,156
	ь	IIIOCELLANEOOO		·			<u> </u>
	c			 			
	d	All other revenue					
	e	Total. Add lines 11a-11d					
	12	Total revenue. See Instructions .	.	22,156			
		. Jean revenue. Jee mistructions .	• • • •	20,571,283	14,840,250	0	110,898

Form	990 (2012)				Page 10
	Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns Al				
_	Check if Schedule O contains a response to any question in this Pa		(B)		 (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and	1 022 020	1,461,503	461,527	
6	key employees Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	1,923,030	1,461,303	401,327	
7	Other salaries and wages	4,277,496	3,936,734	224,784	115,978
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	249,602	221,696		9,026
9	Other employee benefits	1,159,206	, , , , , , , , , , , , , , , , , , ,	 	18,542
10	Payroll taxes	420,709	368,850	 	10,065
11	Fees for services (non-employees)	120,100	000,000	,	
 а	Management				
b	Legal	110 210		119,319	
_	-	119,319		 	
C	Accounting	29,723		29,723	
d	Lobbying	14,434		14,434	
e	Professional fundraising services See Part IV, line 17	8,481			8,481
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	340,562	340,562		
12	Advertising and promotion	126,016	113,415	6,280	6,321
13	Office expenses	391,493	359,895	 	2,982
14	Information technology	158,219	136,187	22,032	_,
15	Royalties	130,213	130,107	22,032	
16	Occupancy	627,213	544,290	82,923	
17	Travel	216,281	196,877	17,595	1,809
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	210,201	190,077	17,393	1,009
19	Conferences, conventions, and meetings	62,370	50,728	11,551	91
20	Interest	469,355	465,965	· ·	
21	Payments to affiliates	,	.55,555	3,330	
22	Depreciation, depletion, and amortization	2,350,079	2,278,149	71,930	
23	Insurance	2,330,073	2,270,113	71,930	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	MISCELLANEOUS	377,334	365,140	12,194	
b	DUES	162,258	125,232	36,751	275
c					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	13,483,180	12,023,060	1,286,550	173,570
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

1 Cash—mon-interest-bearing Bigining of year End of year	Fal	τX	Check if Schedule O contains a response to any question in th	ıs Par	: x			
2 Savings and temporary cash investments 19,8/18.651 2 15,519.028		_						` '
3 Pledges and grants receivable, net 268,776 3 386,192		1	Cash—non-interest-bearing			13,394,054	1	13,584,891
A Accounts receivable, net 243.777 4 836,129		2	Savings and temporary cash investments			19,818,651	2	15,519,938
Solution Color Color		3	Pledges and grants receivable, net			408,716	3	395, 152
## Part		4	Accounts receivable, net			243,772	4	836,129
1		5	employees, and highest compensated employees Complete P		5			
9 Prepaid expenses and deferred charges 405,003 9 427,001	ets	6	section $4958(f)(1)$), persons described in section $4958(c)(3)$ employers and sponsoring organizations of section $501(c)(9)$	id contributing ary employees'		_		
9 Prepaid expenses and deferred charges 405,003 9 427,001	% %	7	Notes and loans receivable net			330 833		0
9	4					000,000		
10a					406 503		427 031	
1		_	Land, buildings, and equipment cost or other basis			100,000		121,001
11 Investments—publicly traded securities 11 5.542.652 12 1nvestments—other securities See Part IV, line 11 87,426 12 27,173 1 13 1 13 1 13 1 13 1 1		Ь		10b	18,231,254	62,584,564	10c	64,398,488
12 Investments—other securities See Part IV, line 11 3 3 3 3 3 3 3 3 3		11	·			11	5,542,652	
13 Investments—program-related See Part IV, line 11 13 14 15 16 16 16 17 16 17 16 17 16 17 16 17 17		12		87,426	12	27,173		
14		13			13			
15			· -				14	
Total assets. Add lines 1 through 15 (must equal line 34) 105,629,609 16 110,852,954 17 2,417,899 18 Grants payable and accrued expenses 2,570,349 17 2,417,899 18 Grants payable 18 19 Deferred revenue 19 19 19 19 19 19 19 1						8.355.090		10.121.500
17								
18 Grants payable 18 18 19 Deferred revenue 19 19 19 19 19 19 19 1								
19 Deferred revenue 19 19 36,680,135 20 35,548,822 21 Escrow or custodial account liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21				_,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
20 Tax-exempt bond liabilities								
21 Escrow or custodial account liability Complete Part IV of Schedule D					36 680 135		35 548 822	
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				33,033,133				
24 Unsecured notes and loans payable to unrelated third parties	_⊈		Loans and other payables to current and former officers, direc		21			
24 Unsecured notes and loans payable to unrelated third parties	耍						22	
24 Unsecured notes and loans payable to unrelated third parties	ï	23				23		
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D						24		
26 Total liabilities. Add lines 17 through 25		25	Other liabilities (including federal income tax, payables to rela	ırd parties,				
Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets				,	25			
lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets		26				40,044,311	26	38,184,718
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds				d complete				
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	lan	27	Unrestricted net assets		65,012,666	27	72,559,537	
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	<u>8</u>	28	Temporarily restricted net assets			484,641	28	25,721
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	됟	29	Permanently restricted net assets	87,991	29	82,978		
30 Capital stock or trust principal, or current funds				here 🟲	┌ and			
33 Total net assets or fund balances		30	Capital stock or trust principal, or current funds			30		
33 Total net assets or fund balances	Şet	31	Paid-in or capital surplus, or land, building or equipment fund				31	
33 Total net assets or fund balances	ΑŞ	32	Retained earnings, endowment, accumulated income, or other	funds			32	
34 Total liabilities and net assets/fund balances	<u>क</u>	33	Total net assets or fund balances			65,585,298	33	72,668,236
	~	34	Total liabilities and net assets/fund balances			105,629,609	34	110,852,954

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		20,5	571,283
2	Total expenses (must equal Part IX, column (A), line 25)	2		13,4	83,180
3	Revenue less expenses Subtract line 2 from line 1	3			88,103
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			585,298
5	Net unrealized gains (losses) on investments	5		<u> </u>	-5,165
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		72.6	68,236
Par	t XII Financial Statements and Reporting				•
	Check if Schedule O contains a response to any question in this Part XII				. ᅜ
				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?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			_
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the laudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b	Yes	

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As Filed Data -

DLN: 93493048011474

OMB No 1545-0047

Employer identification number

Public Charity Status and Public Support

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

GOODWILL INDUSTRIES OF KENTUCKY INC

Department of the Treasury Internal Revenue Service

Total

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.

Inspection

									61-04752			
Par				blic Charity Sta						nstructions.		
	rganı: —			te foundation becaus			-					
1	_		•	on of churches, or a				ection 170(l	o)(1)(A)(i).			
2	_			in section 170(b)(1			•					
3	<u> </u>	•		perative hospital se	_							
4	1	hospita	ıl's name, cı	h organization opera ity, and state								
5	Г	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	ᆫ	describ	ed in sectio	at normally receives on 170(b)(1)(A)(vi).	(Complete P	art II)		_	ental unit or fi	rom the gene	eral public	
8	<u> </u>		-	described in section			-	-				
9	ı	=		at normally receives			7.7		· ·	•	=	
				ities related to its e	•	-			` ,			
		•		oss investment inco				•		tax) from bu	sinesses	
	_			ganızatıon after June 								
10	<u> </u>	-		ganized and operated	•		•		. , , ,			
11	ı	one or the box	more public that descri Type I	ganized and operated ly supported organiz bes the type of supp b Type II c	ations descr porting organ Type II	ibed in secti ization and c I - Function	on 509(a)(1) complete line ally integrate	or section s 11e throu d d	509(a)(2) S gh 11h Type III - No	ee section 5 on-functiona	09(a)(3). Check	
e	Γ	other the section	han foundatı n 509(a)(2)	ox, I certify that the ion managers and ot	her than one	or more pub	licly support	ed organızat	tions describ	ed in section	1 509(a)(1) or	
f		check	this box	received a written d					, , ,	III supporti	ng organization,	
g			August 17, 2 ng persons?	2006, has the organ	ization accep	oted any gift	or contributi	on from any	of the			
				rectly or indirectly o	controls, eith	er alone or t	ogether with	persons des	scribed in (ii)		Yes No	
		and (III) below, the	governing body of th	ne supported	organization	1?			11g		
		(ii) A fa	amıly memb	er of a person descr	ıbed ın (ı) abı	ove?				11g(
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g(
h		Provide	the followi	ng information about	the supporte	ed organizati	ion(s)					
(i) Name supporte organizat		ted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above	(iv) Is the organization in col (i) listed in your governing		(v) Did you the organiz in col (i) o suppor	zation of your	(vi) Is to organization col (i) organization col (ii) organization col (iii) organization col (iiii) organization col (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	ion in anized	(vii) A mount of monetary support	
or IRC section document?												
				(see instructions))		1		ı		<u> </u>		
					Yes	No	Yes	No	Yes	No		

Page 2

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) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total

1 Gifts, grants, contributions, and

Cal	endar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
1	membership fees received (Do not include any "unusual grants")	5,691,890	6,554,570	7,238,366	8,446,802	5,620,135	33,551,763
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	5,691,890	6,554,570	7,238,366	8,446,802	5,620,135	33,551,763
5	The portion of total contributions by each person (other than a						<u> </u>
	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						33,551,763
_	ection B. Total Support						
_	endar year (or fiscal year	T					
Cui	beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	A mounts from line 4		444	7 220 266	0.446.003		33,551,763
8	Amounts nom me 4	5,691,890	6,554,570	7,238,366	8,446,802	5,620,135	33,331,703
	Gross income from interest,	5,691,890	6,554,570	7,238,366	8,446,802	5,620,135	33,331,703
	Gross income from interest, dividends, payments received on						
J	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	326,635	113,192	122,388	132,866	117,653	812,734
9	Gross income from interest, dividends, payments received on securities loans, rents, royalties						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly						
9	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part						
9	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 7	326,635	113,192	122,388	132,866	117,653	812,734
9	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 7 through 10)	326,635 18,556	113,192 30,845	122,388	132,866	117,653 22,156	812,734 489,032
9 10 11 12	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 7 through 10) Gross receipts from related activities	326,635 18,556 es, etc (see instr	113,192 30,845 uctions)	122,388 34,749	132,866 382,726	22,156	489,032 34,853,529
9 10 11	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 7 through 10)	326,635 18,556 es, etc (see instr	30,845 uctions) on's first, second	122,388 34,749 . third, fourth, or fi	132,866 382,726 fth tax year as a	22,156 117,653	489,032 34,853,529

Section C. Computation of Public Support Percentage

14	Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	96 270 %
15	Public support percentage for 2011 Schedule A, Part II, line 14	15	81 050 %

16a 33 1/3% support test—2012. 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

| 33 1/396 support test = 2011 | If the organization did not check a how on line 13 or 16a, and line 15 is 33 1/396 or more, check this

b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2012. 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—2011. 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.

8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support 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 (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	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						
11	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)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,	 	
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493048011474

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

Political Campaign and Lobbying Activities

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

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

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

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** GOODWILL INDUSTRIES OF KENTUCKY INC 61-0475284 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(;	a)		(b)		
activ		Yes	No		Amour	it
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?		Νo			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		1		
c	Media advertisements?		Νo	1		
d	Mailings to members, legislators, or the public?		Νo			
e	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
i	O ther activities?	Yes			1	.4,434
j	Total Add lines 1c through 1i				1	.4,434
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo			
b	If "Yes," enter the amount of any tax incurred under section 4912			1		
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5),	or s	ectio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess					

Part IV Supplemental Information

political expenditure next year?

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and

Taxable amount of lobbying and political expenditures (see instructions)

I dentifier	Return Reference	Explanation
EXPLANATION OF LOBBYING ACTIVITIES	,	DEVELOPMENT AND GENERATION OF SUPPORT FOR 1) LEGISLATION DESIGNED TO FOSTER EMPLOYMENT OF PERSONS WITH DISABILITIES OR OTHER DISADVANTAGES AT THE STATE AND FEDERAL LEVELS OF GOVERNMENT 2) LEGISLATION REGULATING DONATED CLOTHING BOXES AT THE LOCAL LEVEL OF GOVERNMENT

4

5

DLN: 93493048011474

OMB No 1545-0047

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

ame of the organization		Employer identification number
OODWILL INDUSTRIES OF KENTUCKY INC		61-0475284
organizations Maintaining Donor Ad organization answered "Yes" to Form 990), Part IV, line 6.	inds or Accounts. Complete if the
	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate contributions to (during year)		
Aggregate grants from (during year)		
Aggregate value at end of year		
Did the organization inform all donors and donor advis funds are the organization's property, subject to the o		or advised Yes No
Did the organization inform all grantees, donors, and oused only for charitable purposes and not for the bene conferring impermissible private benefit?		
art II Conservation Easements. Complete	f the organization answered "Yes" to	Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	n or education) Preservation of an Preservation of a c	ertified historic structure
easement on the last day of the tax year	a quanned conservation contribution in the	
	-	Held at the End of the Year
Total number of conservation easements	-	2a
Total acreage restricted by conservation easements		2b
Number of conservation easements on a certified hist Number of conservation easements included in (c) ac historic structure listed in the National Register	` '	2d
Number of conservation easements modified, transfer	L	
the tax year	red, released, extinguished, or terminated	a by the organization during
·		
Number of states where property subject to conservat		_
Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	ling of violations, and Yes No
Staff and volunteer hours devoted to monitoring, insper-	ecting, and enforcing conservation easem	ents during the year
A mount of expenses incurred in monitoring, inspectin ▶ \$	g, and enforcing conservation easements	during the year
Does each conservation easement reported on line 2 (and section $170(h)(4)(B)(II)^7$	d) above satisfy the requirements of sect	tion 170(h)(4)(B)(i)
In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easem	ne footnote to the organization's financial ents	statements that describes
rt III Organizations Maintaining Collection Complete if the organization answered "\"		or Other Similar Assets.
If the organization elected, as permitted under SFAS: works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education, c	or research in furtherance of public
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar assoservice, provide the following amounts relating to the	116 (ASC 958), to report in its revenue s ets held for public exhibition, education, c	tatement and balance sheet
(i) Revenues included in Form 990, Part VIII, line 1		► \$
(ii) Assets included in Form 990, Part X		► \$
If the organization received or held works of art, histo following amounts required to be reported under SFAS		• •
Revenues included in Form 990, Part VIII, line 1		▶ \$
Assets included in Form 990, Part X		► \$

Par	Urganizations Maintaining Co	liections of Art	t, HIS	storicai	۱r	easures, or O	tne	r Similar As	sets (co	ontinued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other reco	ds, cl	heck any	of t	he following that a	are a	significant use	of its	
а	Public exhibition		d	┌ Lo	and	or exchange progr	ams			
b	Scholarly research		е	┌ ot	her					
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ain hov	w thev fu	rthe	r the organization	's ex	cempt purpose i	n	
•	Part XIII					_			''	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								Yes	□ No
Par	t IV Escrow and Custodial Arrang		-							,
	Part IV, line 9, or reported an an									
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	edıary	for conti	rıbu	tions or other ass	ets	not	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing table	2	-				
						_		An	ount	
С	Beginning balance					_	1 c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?	•					Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anation h	as b	een provided in P	art)	XIII		
Pa	rt V Endowment Funds. Complete									
		(a)Current year	(b)) Prior year		b (c) Two years back	(d)	Three years back	(e) Four y	ears back
1a	Beginning of year balance	89,271		74,	020	74,300	1	69,529		69,922
b	Contributions	25					_			1,225
С	Net investment earnings, gains, and losses	-76		15,	251	-280		4,771		-1,618
d	Grants or scholarships							,		
e	Other expenditures for facilities									
	and programs									
f	Administrative expenses						_			
g	End of year balance	89,220		89,	271	74,020		74,300		69,529
2	Provide the estimated percentage of the curr	ent year end balan	ce (lır	ne 1g, col	lumi	n (a)) held as				
а	Board designated or quasi-endowment ►									
b	Permanent endowment ► 93 000 %									
c	Temporarily restricted endowment ► 7 0	00 %								
	The percentages in lines 2a, 2b, and 2c show	ıld equal 100%								
За	Are there endowment funds not in the posses	ssion of the organiz	ation	that are I	held	and administered	d for	the		
	organization by								Yes	No
	(i) unrelated organizations				•		•	3a(No
b	(ii) related organizations If "Yes" to 3a(ii), are the related organization						•	3a(3l	_	NO
4	Describe in Part XIII the intended uses of th						•		<u> </u>	
	t VI Land, Buildings, and Equipme					.0.				
	Description of property			(a) Cos basis (in	tore	other (b)Cost or of		(c) Accumulated depreciation	(d) Bo	ok value
									1	
	Land		•	<u> </u>		19,020				9,020,689
	Buildings		•			41,538		9,121,62		2,416,392
	Leasehold improvements		•			2,216		1,689,36		526,913
	Equipment		•	<u> </u>		10,200		7,420,26	1	2,780,576
		/ 5 000 Dort	•	1 (5)		9,653				9,653,918
iota	l. Add lines 1a through 1e <i>(Column (d) must e</i>	quai Form 990, Part	x, colu	ımn (B), I	ıne .	1U(C).)	•	🕨	1 6	4,398,488

Part VIII Investments—Other Securities. Se	<u>e Form 990, Part X, line 12</u>	2.	
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)		Cost or end-of	-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. S			
(a) Description of investment type	(b) Book value		d of valuation
		Cost or end-or	-year market value
	_		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X,			
(a) Desc	ription		(b) Book value
(1) BOND ISSUANCE COSTS, NET OF AMORTIZATION	N .		455,261
(2) DEPOSITS			48,922
(3) DUE FROM RELATED TAX-EXEMPT ORGANIZATIO	NS		9,617,317
Total. (Column (b) must equal Form 990, Part X, col.(B) line			10,121,500
Part X Other Liabilities. See Form 990, Part			
1 (a) Description of liability	(b) Book value		
Federal income taxes			
OTHER NON-CURRENT LIABILITIES	64,036		
DERIVATIVE FINANCIAL INSTRUMENT	154,271		
DERIVATIVE TINANCIAE INSTROMENT	154,271		
	+		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	218,307		
2. Fin 48 (ASC 740) Footnote In Part XIII, provide the t	ext of the footnote to the orga	nızatıon's fınancıal statem	nents that reports the

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue	<u>oer Re</u>	eturn
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)]	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Dart	VII Decemblishing of European may Audited Financial Ctatements With European		Dotum
гене	Reconciliation of Expenses per Audited Financial Statements With Expenses	<u>s per</u>	Return
1	Total expenses and losses per audited financial statements	per 1	Return
			Return
1	Total expenses and losses per audited financial statements		Return
1 2	Total expenses and losses per audited financial statements		Return
1 2 a	Total expenses and losses per audited financial statements		Return
1 2 a b	Total expenses and losses per audited financial statements		Return
1 2 a b c	Total expenses and losses per audited financial statements		Return
1 2 a b c d	Total expenses and losses per audited financial statements	1	Return
1 2 a b c d e	Total expenses and losses per audited financial statements	2e	Return
1 2 a b c d e	Total expenses and losses per audited financial statements A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	2e	Return
1 2 a b c d e 3	Total expenses and losses per audited financial statements A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	2e	Return
1 2 a b c d e 3 4	Total expenses and losses per audited financial statements	2e	Return

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, 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		GOODWILL INDUSTRIES OF KENTUCKY, INC IS EXEMPT FROM INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE ("IRC") GOODWILL RECOGNIZES UNCERTAIN INCOME TAX POSITIONS USING THE "MORE-LIKELY-THAN-NOT" APPROACH AS DEFINED IN THE ASC NO LIABILITY FOR UNCERTAIN TAX POSITIONS HAS BEEN RECORDED IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS GOODWILL'S 2009 TO 2012 TAX YEARS REMAIN OPEN AND SUBJECT TO EXAMINATION
		PART V, LINE 4 THE PERMANENT ENDOWMENT PROVIDES INVESTMENT GROWTH AND INCOME FUNDS THAT ARE TO BE USED TOWARDS TUITION FOR SCHOLARSHIP ASSISTANCE FOR PERSONS WITH DISABILITIES THE TEMPORARY ENDOWMENT IS USED FOR GENERAL OPERATIONAL NEEDS THAT ASSIST IN THE FULFILLMENT OF THE COMPANY'S MISSION

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DLN: 93493048011474

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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.

Compensation Information

Open to Public Inspection

Name of the organization GOODWILL INDUSTRIES OF KENTUCKY INC **Employer identification number**

61-0475284

· C	Questions Regarding Compensation			1
			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed i 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding thes			
	First-class or charter travel Housing allowance or residence for person			
	Travel for companions Payments for business use of personal re			
	Tax idemnification and gross-up payments Health or social club dues or initiation fee			
	Discretionary spending account Personal services (e.g., maid, chauffeur, c	:hef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding paymer	nt or		
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	ain 1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all of	icers,		
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain i	n Dart III		
		"Pait III		
	✓ Compensation committee ✓ Written employment contract ✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations Form 990 of other organizations Form 990 of other organizations	ommittee		
	prover by the board of compensation of	Jiiiiiittee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filir	ng organization		
	or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
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			
	· · · · · · · · · · · · · · · · · · ·	_		l
а	•	5a		No
b	, ,	5b		No
6	If "Yes," to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
0	compensation contingent on the net earnings of			
а		6a	Yes	
b		6b	Yes	\vdash
U	If "Yes," to line 6a or 6b, describe in Part III	OD	1 63	\vdash
7		.		
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] ,		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was		+	
-	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes,"	describe		
	ın Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in R	egulations		
	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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	· · · · · · · · · · · · · · · · · · ·	(C) Retirement and	` '	(E) Total of columns	• •
		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)ROLAND R BLAHNIK PRESIDENT	(i) (ii)	268,590 0	46,370 0	7,001 0	61,292 0	28,320 0	411,573 0	0
(2)ERIN GOLD VICE- PRESIDENT BLUEGRASS	(i) (ii)	159,487 0	27,333 0	0 0	0	22,575 0	209,395 0	0
(3)MARSHA BERRY VICE-PRESIDENT BEARGRASS	(i) (ii)	150,175 0	17,847 0	0	0	16,955 0	184,977 0	0

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Also complete this part for any addition	onal information	
Identifier	Return Reference	Explanation
	PART I, LINE 4B	ROLAND BLAHNIK, PRESIDENT, IS A PARTICIPANT IN A SUPPLEMENTAL RETIREMENT PLAN ESTABLISHED BY GOODWILL INDUSTRIES OF KENTUCKY, INC UNDER IRS CODE SECTION 457(B) THE DEFERRED COMPENSATION IS PAYABLE, IN A LUMP SUM, TO ROLAND BLAHNIK AT THE AGE OF 65 OR UPON CERTAIN OTHER EVENTS AS STATED IN THE PLAN AGREEMENT DURING THE YEAR ENDED SEPTEMBER 30, 2013, THE DEFERRED COMPENSATION WAS PAID IN FULL TO ROLAND BLAHNIK IN THE AMOUNT OF \$472,739
	PART I, LINE 6	GOODWILL INDUSTRIES OF KENTUCKY, INC HAS AN INCENTIVE COMPENSATION PLAN WHICH IS A PART OF THE OVERALL COMPENSATION PROGRAM THE GOAL OF THE PLAN IS TO FOCUS ECONOMIC INCENTIVES ON PROGRAM RESULTS AND THE AREAS IN WHICH GOODWILL OPERATES "BUSINESSES" THE PLAN FOCUSES ON THE CORE TO OBTAINING THE ORGANIZATION'S MISSION AND THE ECONOMIC STABILITY OF THE COMPANY OFFICER PARTICIPANTS MAY EARN UP TO 20% ABOVE THEIR BASE PAY BY MEETING SIX ESTABLISHED CRITERIA RELATED TO MISSION WAGES, PLACEMENTS OF PERSONS WITH DISABILITIES OR OTHER DISADVANTAGES, AGENCY ECONOMIC STABILITY, THE DONATED GOODS PROGRAM SUCCESS, DIVISION (AREAS OF PARTICIPANTS' RESPONSIBILITY) ECONOMIC SUCCESS, AND MAINTENANCE OF PROPERTIES AND EQUIPMENT THE AGENCY ECONOMIC STABILITY AND DIVISION SUCCESS ENTAILS MEETING FISCAL YEAR NET EARNING GOALS/BUDGET AMOUNTS

Schedule J (Form 990) 2012

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DLN: 93493048011474 OMB No 1545-0047

Open to Public

Inspection

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

Employer identification number

	ne of the organization ODWILL INDUSTRIES OF KENTU	JCKY INC									61-0475284						
P:	art I Bond Issues																
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(1	f) Description	n of purpose	(g) De	efeased	beha	On alf of uer		Pool ncing		
						!				Yes	No	Yes	No	Yes	No		
A	KY ECONOMIC DEVELOPMENT FINANCE AUTHOR	61-0600439		03-25-2010	28,0	00,000	САР	PITAL PROJE		x		х		x			
В	KY ECONOMIC DEVELOPMENT FINANCE AUTHOR	61-0600439	49126MAG2	12-20-2007	10,0					APITAL PROJECTS & JRRENT REFUNDING			х		x		х
Pa	rt III Proceeds						_			'							
				/	A	\longrightarrow	В			С	\longrightarrow		D				
1	Amount of bonds retired					2,451,1	178					\longrightarrow					
	A mount of bonds legally defeas	sed			<u> </u>							\longrightarrow					
3	Total proceeds of issue				<u> </u>	28,000,0	000 10,000,000				\longrightarrow						
4	Gross proceeds in reserve fund						\rightarrow					\longrightarrow					
5	Capitalized interest from proce				<u> </u>		\rightarrow					\longrightarrow					
6	Proceeds in refunding escrows				<u> </u>		\longrightarrow					\longrightarrow					
7	Issuance costs from proceeds				<u> </u>	221,838					\longrightarrow						
8	Credit enhancement from proce									\longrightarrow							
9	Working capital expenditures fr	<u> </u>								\longrightarrow							
10	Capital expenditures from proc	ceeds			<u> </u>	19,967,1	198	1	0,000,000			\longrightarrow					
11	O ther spent proceeds				<u> </u>	7,810,9	964										
12	O ther unspent proceeds				<u> </u>		$ \bot $										
13	Year of substantial completion	1			20		$ \longrightarrow $	201							1		
				,	Yes	No	\longrightarrow	Yes	No	Yes	N	lo l	Yes	+	No		
14	Were the bonds issued as part	of a current refundir	ng issue?		Х	<u> </u>	$ \bot $		Х								
15	Were the bonds issued as part	of an advance refun	iding issue?		<u> </u>	×			Х								
16	Has the final allocation of proce	eeds been made?			Х			Х									
17	Does the organization maintain allocation of proceeds?	n adequate books an	nd records to suppo	rt the final	Х			Х									
Pa	rt IIII Private Business Us	se															
l					——	Α	\longrightarrow	B			<u>C</u>			D			
	Was the organization a partner	r in a narthershin or	· a member of an II	C which owned	Yes	No	\dashv	Yes	No	Yes	N	lo	Yes	+	No		
1	was the organization a partner	ill a partifers inp, or	a Illelliber of all LE.	c, willeli owiled ,	1	X	1	1 1	х								

Are there any lease arrangements that may result in private business use of bond-

property financed by tax-exempt bonds?

financed property?

Х

Sche	dule K (Form 990) 2012									Page 2
Par	Private Business Use (Continued)									
				A		В		C		D
_	Are there any management or convice centracts that may recult in arrivate	huainasa usa [Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private of bond-financed property?	business use		X		X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina property?									
С	Are there any research agreements that may result in private business use financed property?	e of bond-		х		×				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?									
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government			0 00000%		0 00000%		%		%
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government			0 00000%		0 00000%		%		%
6	Total of lines 4 and 5			0 00000%		0 00000%		%		%
7	Does the bond issue meet the private security or payment test?			X		Х				
8a	Has there been a sale or disposition of any of the bond financed property to nongovernmental person other than a 501(c)(3) organization since the bor issued?			х	Х					
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections								
9	Has the organization established written procedures to ensure that all none bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?			х		х				
Par	t IV Arbitrage	•				•		•	•	•
		Α.			В		С		D	
		Yes	No	Yes	No	Ye	s	No	Yes	No
1	Has the issuer filed Form 8038-T?		Х		Х					
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?		Х		Х					
b	Exception to rebate?	X			Х					
С	No rebate due?		Х	X						
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed					·	·	·		
3	Is the bond issue a variable rate issue?	Х		X						
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х		Х					
b	Name of provider									
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was a hedge terminated?									
_									_	

SCHEDULE K SUPPLENTAL

INFORMATION

Part IV Arbitrage (Continued)

		A B		С		D				
			Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in contract (GIC)?	a guaranteed investment		х		Х				
b	Name of provider									
С	Term of GIC									
d	Was the regulatory safe harbor for value of the GIC satisfied?	or establishing the fair market								
6	Were any gross proceeds investor period?	ed beyond an available temporary		X		Х				
7	Has the organization established written procedures to monitor the requirements of section 148?			х		×				
Pa	rt V Procedures To Unde	rtake Corrective Action								
			Α		В		С		D	
			Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?			Х		х					
Pa	art VI Supplemental Info	ormation. Complete this part to pr	ovide addition	ial informati	on for respor	ises to ques	tions on Sche	edule K (see	instructions)	
	Identifier	Return Reference				Explan	ation			

PART IV, LINE 2C, COLUMN B DATE OF REBATE COMPUTATION 06/01/2011

Schedule K (Form 990) 2012

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

2012

Open to Public Inspection

Name of the organization GOODWILL INDUSTRIES OF KENTUCKY INC **Employer identification number**

61-0475284

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	UPON COMPLETION OF THE DRAFT FORM 990 RETURN, THE DOCUMENT, ALL ATTACHED SCHEDULES, AND ACCOMPANY ING EXPLANATION SHEETS ARE PRESENTED TO THE GOODWILL INDUSTRIES OF KENTUCKY AUDIT COMMITTEE FOR REVIEW AND APPROVAL ELECTRONIC COPIES ARE SENT AHEAD OF THE MEETING AFTER OBTAINING THE AUDIT COMMITTEE'S APPROVAL, AN ELECTRONIC COPY IS THEN E-MAILED TO THE GOODWILL INDUSTRIES OF KENTUCKY, INC. BOARD OF DIRECTORS PRIOR TO A REGULAR OR SPECIAL BOARD MEETING BOARD MEMBERS ARE ABLE TO REVIEW THE DOCUMENTS AHEAD OF TIME AND POSE QUESTIONS PRIOR TO OR AT THE MEETING A HIGH-LEVEL REVIEW OF THE RETURN IS GIVEN AT THE BOARD MEETING AND AMPLE OPPORTUNITY IS PROVIDED FOR MEMBERS TO HAVE ANY QUESTIONS ANSWERED. THE FORM 990 IS PRESENTED FOR APPROVAL AT A BOARD OF DIRECTORS MEETING.
	FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY, GOODWILL INDUSTRIES OF KENTUCKY, INC. ASKS ITS OFFICERS AND DIRECTORS TO COMPLETE A QUESTIONNAIRE WHICH DEFINES AND DESCRIBES THE COMPANY'S CONFLICTS OF INTEREST POLICY AND ASKS IF THERE WERE BUSINESS TRANSACTIONS THAT HAVE OCCURRED OR PERSONAL RELATIONSHIPS WHICH CAUSE A CONFLICT. THE COMPANY ALSO HAS AN ANONY MOUS TIP LINE THAT CAN BE USED FOR PERSONS TO REPORT SUSPECTED CONFLICTS THAT WOULD VIOLATE COMPANY POLICY.
	FORM 990, PART VI, SECTION B, LINE 15	A COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS OF GOODWILL INDUSTRIES OF KENTUCKY, INC REVIEWED THE CONTRACT FOR THE PRESIDENT/CEO AS WELL AS THE SALARIES FOR VICE PRESIDENTS. THE COMMITTEE ENGAGED AN OUTSIDE COUNSEL FOR THE CONTRACT, SUPPLEMENTAL RETIREMENT BENEFIT, AND SALARY REVIEW. THE COMMITTEE REVIEWED COMPARATIVE DATA PROVIDED BY OUTSIDE COUNSEL. THE COMMITTEE BROUGHT ITS RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE OF THE BOARD FOR REVIEW AND APPROVAL. THE VICE PRESIDENTS' (OTHER OFFICERS) COMPENSATION WAS ALSO REVIEWED BY THE PRESIDENT/CEO. HE REVIEWED OUTSIDE COUNSEL DATA AND UTILIZED A REGRESSION THAT PROJECTED MEDIAN COMPENSATION FOR GOODWILL EXECUTIVES (COMPARISON GOODWILL EXECUTIVE COMPENSATION WAS OBTAINED FROM GOODWILL INTERNATIONAL MEMBER SERVICES.) THE RECOMMENDED SALARIES WERE PRESENTED TO THE COMPENSATION COMMITTEE.
	FORM 990, PART VI, SECTION C, LINE 19	IN AN EFFORT TO MAKE ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC, GOODWILL INDUSTRIES OF KENTUCKY, INC. PLACES EACH YEAR'S 990 TAX RETURN AND ANNUAL REPORT ON ITS WEBSITE. THE ANNUAL REPORT IS ALSO BROADLY DISTRIBUTED IN COMMUNITIES IN WHICH THE COMPANY OPERATES. GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY ARE PROVIDED TO THOSE WHO REQUEST THEM
	FORM 990, PART XII, LINE 2C	THE AUDIT IS REVIEWED AND APPROVED BY THE ADMINISTRATIVE OFFICE STAFF THE AUDIT IS THEN PRESENTED TO THE AUDIT COMMITTEE FOR FULL REVIEW AND APPROVAL THE AUDIT COMMITTEE REPORTS TO THE BOARD OF DIRECTORS THE RESULTS OF THE AUDIT AND THE BOARD APPROVES THE FINAL AUDIT THE SELECTION OF THE INDEPENDENT ACCOUNTING FIRM IS CONDUCTED THROUGH THE AUDIT COMMITTEE WITH FINAL APPROVAL BY THE BOARD OF DIRECTORS

DLN: 93493048011474

2012

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization
GOODWILL INDUSTRIES OF KENTUCKY INC

Employer identification number
61-0475284

				61-04	75284		
Part I Identification of Disregarded Entities (Co	omplete if the organization	answered "Yes" to	Form 990, Pa	art IV, line 3	3.)		
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year asse	ets	(f) Direct controlling entity	
Part II Identification of Related Tax-Exempt Orgor more related tax-exempt organizations dur	ing the tax year.)						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sec	ction Public ch	e) anty status 501(c)(3))	(f) Direct controlling entity	(g) Section 51 (13) conti entity
(A) COODWILL TEMPORARY CERUTECE OF VEHICLEY THE	MISSION EMPLOYMENT	107	504(6)(2)	1705.0		CMIK	Yes
(1) GOODWILL TEMPORARY SERVICES OF KENTUCKY INC	MISSION EMPLOYMENT	KY	501(C)(3)	LINE 9		GWIK	Yes
1325 SOUTH FOURTH STREET							
LOUISVILLE, KY 40208 61-1316311							
(2) INDEPENDENT INDUSTRIES INC	MISSION EMPLOYMENT	KY	501(C)(3)	LINE 9		GWIK	Yes
1325 SOUTH FOURTH STREET							
LOUISVILLE, KY 40208							
43-2017147 (3) GOODWILL INDUSTRIES WORKS INC	MISSION EMPLOYMENT	KY	501(C)(3)	LINE 11A,	I	GWIK	Yes
1325 SOUTH FOURTH STREET							
LOUISVILLE, KY 40208 75-3157787							
(4) GOODWILL OF KENTUCKY CARS TO WORK INC	AUTO ACCESS FOR MISSION-RELATED PERSONS	KY	501(C)(3)	LINE 9		GWIK	Yes
1325 SOUTH FOURTH STREET	THESE TON NELTHER PERSONS						
LOUISVILLE, KY 40208 45-0830218							

(a) Name, address, and EIN o related organization	(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)	entity	Direct Predominant controlling entity unrelated, excluded from tax under	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percenta ownersh
					sections 512- 514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo	ration is a cor	or Trust (poration or	Complete if trust during	the organı the tax ye	zatıon ar ar.)	iswere	d "Ye	s" to Form	990,	Part	:IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controll entity	(e) Type of enti (C corp, S corp, or trust)		total Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
											Yes		No

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No		
1 D	iring the tax year, did the orgranization engage in any of the following transactions with one or more rela	ted organizations lis	sted in Parts II-IV?						
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	Yes			
b	Gift, grant, or capital contribution to related organization(s)				1b		No		
c	Gift, grant, or capital contribution from related organization(s)				1 c	Yes			
d	Loans or loan guarantees to or for related organization(s)				1d		No		
e	Loans or loan guarantees by related organization(s)				1e		No		
f	Dividends from related organization(s)				1f		No		
g	Sale of assets to related organization(s)				1g		No		
h	Purchase of assets from related organization(s)				1h		No		
i Exchange of assets with related organization(s)									
j Lease of facilities, equipment, or other assets to related organization(s)									
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No		
ı	Performance of services or membership or fundraising solicitations for related organization(s)				11	Yes			
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m	Yes			
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes			
0	Sharing of paid employees with related organization(s)				10	Yes			
р	Reimbursement paid to related organization(s) for expenses				1р		No		
q	Reimbursement paid by related organization(s) for expenses				1q	Yes			
r	Other transfer of cash or property to related organization(s)				1r		No		
s	Other transfer of cash or property from related organization(s)				1s		No		
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete th								
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount II	nvolved			
ee A	ditional Data Table								

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

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Software ID: Software Version:

EIN: 61-0475284

Name: GOODWILL INDUSTRIES OF KENTUCKY INC

Schedule R (Form 990) 2012

Page **5**

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation
	PART II, LINE 1, COLUMN B	PROVIDES EMPLOYMENT AND TRIAL EMPLOYMENT FOR MISSION PURPOSES
	PART II, LINE 2, COLUMN B	PROVIDES WORK AND DAY ACTIVITY FOR MISSION PURPOSES
	PART II, LINE 3, COLUMN B	PROVIDES EMPLOYMENT FOR MISSION PERSONS
GOODWILL OF KENTUCKY CARS TO WORK, INC	'	PROVIDES ACCESS TO TRANSPORTATION FOR MISSION PERSONS

---> Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-s)	(c) A mount Involved	(d) Method of determining amount involved
GOODWILL INDUSTRIES WORKS INC	А	5,980,717	FAIR VALUE
GOODWILL INDUSTRIES WORKS INC	С	5,333,431	BOARD OF DIRECTORS
GOODWILL INDUSTRIES WORKS INC	L	4,066,148	MANAGEMENT AGREEMENT
GOODWILL INDUSTRIES WORKS INC	Q	986,692	ACTUAL EXPENSES
GOODWILL TEMPORARY SERVICES OF KENTUCKY INC	L	572,749	MANAGEMENT AGREEMENT
GOODWILL TEMPORARY SERVICES OF KENTUCKY INC	Q	636,398	ACTUAL EXPENSES
GOODWILL OF KENTUCKY CARS TO WORK INC	L	65,956	MANAGEMENT AGREEMENT
GOODWILL OF KENTUCKY CARS TO WORK INC	Q	76,375	ACTUAL EXPENSES
GOODWILL TEMPORARY SERVICES OF KENTUCKY INC	М	312,054	INVOICES