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DLN: 93493316045754

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

			C Name of organization	ig 01-01-2013 , 2013, and ending .	12-31-20		D Emplo	ver iden	tification number
	eck if a _l Iress ch	pplicable iange	GOODWILL INDUSTRIES OF CENTRA	AL TEXAS			•	-	
_	me chai	_	Doing Business As				/4-13	22808	•
	ial retui	=							
	minate		Number and street (or P O box if i 1015 NORWOOD PARK BLVD	mail is not delivered to street address) Rooi	n/suite		E Telepho		
_ Am	ended i	return	City or town, state or province, cou	ıntry, and ZIP or foreign postal code			(512)	637-7	112
☐ App	olication	pending	AUSTIN, TX 78753				G Gross r	eceipts \$	59,773,731
			F Name and address of pri	ncıpal officer	H(-	a) Is this			
			GERALD DAVIS 1015 NORWOOD PARK BL	VD			linates?		┌ Yes 🗸 No
			AUSTIN,TX 78753		н	b) Are all	subordi	nates	┌ Yes ┌ No
					_ `	ınclude	ed?		
		npt status		(insert no) 4947(a)(1) or 527	_				(see instructions)
			/W AUSTINGOODWILL ORG		H(exempt		
	n of org rt I		Corporation Trust Association	on Other 🗠	L	Year of form	nation 19	58 M :	State of legal domicile TX
Га			-	on or most significant activities					
Governance	9	GOODW SERVIC	ILL INDUSTRIES OF CENTRA	L TEXAS (GICT) IS DEDICATED T R PEOPLE WITH BARRIERS TO EM					
룓									
Ē.	-								
	2 (Check th	nis box 🔰 if the organization d	iscontinued its operations or dispos	ed of mo	re than 25	% of its	net ass	sets
Activities &	з г	Number	of voting members of the govern	ning body (Part VI, line 1a)				з	16
Ę	4 1	Number	of independent voting members	of the governing body (Part VI, line	1b) .		Ē	4	16
<u> </u>	5	Total nu	mber of individuals employed in	calendar year 2013 (Part V, line 2a				5	3,046
4.			•	necessary)			•	6	1,003
				Part VIII, column (C), line 12			•	7a	0
	ь	Net unre	lated business taxable income	from Form 990-T, line 34				7b	0
		C = = +==	h	4 h	-	Prior	Year 43,038,:	100	Current Year
ā				ons and grants (Part VIII, line 1h)					47,229,081 8,956,652
Revenue	10	_	Program service revenue (Part VIII, line 2g)			5,260,984 -4,764			48,706
2	11		revenue (Part VIII, column (A)		404,4		2,121,098		
	12			L (must equal Part VIII, column (A)	, line		40.600.6		50 255 527
	12						48,698,8 503,		58,355,537
	13 14			IX, column (A), line 4)			503,	0	1,075,979
(f)	15	Saları	es, other compensation, employ	ee benefits (Part IX, column (A), lin			27.205		
Expenses	16a	5-10) Profes		, column (A), line 11e)	–	•	27,295,	0	32,774,418
⊕	ь		ndraising expenses (Part IX, column (I						<u>-</u>
ш	17			lines 11a-11d, 11f-24e)	╸. ⊢	:	18,189,	396	21,558,713
	18			ust equal Part IX, column (A), line 2	_		45,988,	-	55,409,110
	19	Reven	ue less expenses Subtract line	18 from line 12			2,710,4	160	2,946,427
Net Assets or Fund Balances					E	Beginning Ye		nt	End of Year
SS et	20	Total	assets (Part X, line 16)		.		19,266,	599	54,519,537
ag F	21	Total	liabilities (Part X, line 26) .		[:	34,519,8	349	35,558,088
žZ	22	Netas	sets or fund balances Subtract	t line 21 from line 20		:	14,746,	750	18,961,449
Pai	rt II	Sign	ature Block						
my kı	nowled	dge and		amined this return, including accommplete Declaration of preparer (oth					
		****					4-11-10		
Sign		<u>'</u>	ature of officer			Dat	e		
Here	2		ALD DAVIS PRESIDENT/CEO or print name and title						
		17	Print/Type preparer's name	Preparer's signature	Date	Charl	√ If	PTIN	_
Paid	4	L	AURA G MCNUTT		1	self-e	mployed	P00022	
	a pare		irm's name 🕨 WEAVER AND TIDWEL	L LLP		Firm's	s EIN 🟲 7!	5-078631	.6
	Onl		ırm's address ► 9311 SAN PEDRO AVE	SUITE 1400		Phone	e no (210) 737-10	42

SAN ANTONIO, TX 78216

May the IRS discuss this return with the preparer shown above? (see instructions) .

1 01111	330 (2013)					raye 2
Par	Statement of Check if Schedule			lishments o any line in this Part	III	
1	Briefly describe the org	anızatıon's mıs	sion	·		
AND					ISSION OF PROVIDING JOB IVE TO HELP CLIENTS GENI	
2	Did the organization und the prior Form 990 or 99				r which were not listed on	
	If "Yes," describe these					, ,
3	Did the organization ceaservices?			t changes in how it co	onducts, any program	
4	Describe the organization	on's program se c)(3) and 501(rvice accomplishm c)(4) organizations	are required to repor	ree largest program services, t the amount of grants and allo	
4a	(Code) (Expenses \$	35,142,926	ıncludıng grants of \$) (Revenue \$	265)
	MISSION BY PROCESSING, F AUSTIN GICT OFFERS DIFF STORES, GOODWILL OUTLET	ESELLING OR RECERENT PRODUCTS STORE, AND THE SERVICES AND PR	YCLING DONATIONS OF TO THE COMMUNITY T GOODWILL COMPUTER ROGRAMS STORES ALS	F GENTLY USED GOODS, CO THROUGH THREE DISTINCT WORKS STORE SELECT L O PROVIDE EMPLOYMENT A	FACE OF GOODWILL IN THE COMMUI OMPUTERS OR VEHICLES THROUGH A IT TYPES OF RETAIL LOCATIONS INCLU OCATIONS ALSO HOUSE JOB HELP CE AND TRAINING OPPORTUNITIES AS W EMPLOYMENT	43 LOCATIONS IN AND AROUND JDING GOODWILL RETAIL ENTERS, WHICH ASSIST
4b	(Code) (Expenses \$	9 105 476	ıncludıng grants of \$	1,075,979) (Revenue \$	6,467,279)
70	WORKFORCE DEVELOPMENT PARTICIPANTS ACHIEVE A LI ENSURE EACH PARTICIPANT BARRIERS TO EMPLOYMENT SUCCESSFUL AND DESIRED THE FOUR MAJOR SERVICES DISABILITIES, JOB SOURCE, ADULTS WITH BARRIERS TO ADVANCED AGE, CRIMINAL ID DEVELOPMENT SERVICES T	SERVICESGICT'S EVEL OF INDEPEND PROGRESSES TO EACH YEAR PART OUTCOMES PROG AREAS ARE YOU WHICH SERVES A EMPLOYMENT BA BACKGROUNDS AN HEY ASSISTED IN (WORKFORCE DEVELOP DENCE NEEDED TO SUC REACH HIS OR HER FU ICIPANTS ARE REGULA GRAMS ARE AVAILABLE T TH SERVICES, WHICH S DULTS WITH BARRIERS DULTS WITH BARRIERS ID LANGUAGE BARRIERS OBTAINING PERMANENT	MENT PROGRAMS ARE THE CEED IN THE WORKPLACE JIL POTENTIAL GICT PROV RLY ASSESSED AND MEASU TO ALL ELIGIBLE PERSONS, SERVES YOUTH AGES 14 - 5 TO EMPLOYMENT, AND GO NT INCLUDE A LACK OF E S IN 2013, THIS DIVISION I EMPLOYMENT FOR 1,693	E ESSENSE OF THE MISSION THEY A E AND IN LIFE THEY FOCUS ON MEET VIDES THOUSANDS OF JOB-RELATED OF JRED BY PROFESSIONAL, DEDICATED REGARDLESS OF RACE, GENDER, AC 21, COMMUNITY REHABILITATION, WO DOD CAREER ACADEMY, WHICH RUN DUCATION AND TRAINING, UNEMPLO SERVED 8,388 INDIVIDUALS WITH 9 PERSONS WITH BARRIERS TO EMPLO FOR AN AVERAGE WAGE OF \$10 84/F	RE DESIGNED TO HELP ING INDIVIDUAL NEEDS, AND SERVICES FOR PEOPLE WITH STAFF TO ACHIEVE SE, DISABILITY, OR RELIGION WHICH SERVE ADULTS WITH S VOCATIONAL TRAINING FOR WMENT, AT-RISK YOUTH, D,744 WORKFORCE DYMENT 118 INDIVIDUALS
4 c	(Code) (Expenses \$	2,535,084	including grants of \$) (Revenue \$	2,489,108)
	DIVISION CURRENTLY INCLU	JDES A MATTRESS PRIAL CONTRACTS	RECYCLING TRANSITION IN 2013 12 INDIVIDUA	DNAL PROGRAM USING REG	OF TWO DIVISIONS IN OUR ORGANIZ CENTLY INCARCERATED INDIVIDUALS SE PROGRAMS THE STAFFING SERVI	LIVING IN A HALFWAY HOUSE
	(Code) (Expenses \$	583,789	ıncludıng grants of \$) (Revenue \$	<u> </u>
	•	SERVICESENVIRO	NMENTAL BUSINESS SEI	RVICES PROVIDES EMPLOY	MENT AND TRAINING OPPORTUNITIE	s for people with barriers
4d	Other program service:			£ &	\/Payanus #	1
	(Expenses \$	583,789	including grants o	1 \$) (Revenue \$	J
4e	Total program service e	expenses 🟲	47,367,275			

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see 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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	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	Yes	
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? <i>If "Yes," complete Schedule D, Part V</i>	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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI 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
	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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	—		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or 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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	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 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		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? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
_		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	Yes	
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? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? 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	

-	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	.l No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 120		165	140
	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	
a	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	
	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" to line 3b, 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		N
)	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			
	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?	70		
	1. 165, to fine 50 of 50, and the organization metrorin 0000-1.	5c		L
1	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	Yes	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			N.
	contract?	7e 7f		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
	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.	بّ		
	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 10b	•		
	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	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	Į į		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

Check if Schedule O contains a response or note to any line in this Part VI							<u>.</u> ア

	ction 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	1a	16						
	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	1b	16						
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?	siness •	relationship with any	2		No			
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No			
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4	Yes				
5	Did the organization become aware during the year of a significant diversion of the o	rganız	ation'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 pow more members of the governing body?			7a		No			
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?		members, stockholders,	7b		No			
8	Did the organization contemporaneously document the meetings held or written active year by the following	ons u	ndertaken during the						
а	a The governing body?								
ь		8b	Yes						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No			
Se	ection B. Policies (This Section B requests information about policies not	requ	ired by the Internal R	eveni	ue Cod	e.)			
					Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			10a	Yes	No No			
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization	tıvıtıe	s of such chapters,	10a 10b	Yes				
b	If "Yes," did the organization have written policies and procedures governing the act	tıvıtıe on's e	s of such chapters, xempt purposes?	10b	Yes				
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its	tıvıtıe on's e ts gov	s of such chapters, xempt purposes? erning body before filing	10b					
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e ts gov • • •	s of such chapters, exempt purposes? erning body before filing 	10b					
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to all members of its the form?	tivitie on's e ts gov • • Form 9	s of such chapters, exempt purposes? erning body before filing	10b	Yes				
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual	tivitie on's e ts gov Form 9 ly inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a	Yes				
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e ts gov Form 9 ly inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes Yes				
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	tivitie on's e ts gov Form 9 ly inte the p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c	Yes Yes Yes				
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy?	tivitie on's e ts gov Form 9 ! the p 	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes				
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FOId the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a rev	tivitie on's e ts gov form 9 ly inte the p the p iew ar	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes				
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the	tivitie on's e ts gov form 9 ly inte the p the p ithe p ithe p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes				
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	tivitie on's e ts gov form 9 ly inte the p the p ithe p ithe p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes				
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e ts gov form 9 ly inte the p lew ar ne deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes				
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e ts gov form 9 ly inte the p the p in the p or sim or sim	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No			
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FDI of the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?	tivitie on's e ts gov form 9 ly inte the p the p iew arine deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No			
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take organization in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	tivitie on's e ts gov form 9 ly inte the p the p iew arine deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No			
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organ participation in joint venture arrangements under applicable federal tax law, and take	tivitie on's e ts gov form 9 ly inte the p the p iew arine deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No			

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

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 ►TRACY LINTZ 1015 NORWOOD PARK BLVD
 AUSTIN,TX 78753 (512)637-7112

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

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

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

- ◆ 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) Name and Title	(B) Average hours per week (list any hours	more pers	than on is	one bot	not box h ar or/tr	offic ustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	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)	from the organization and related organizations
(1) MARK FINGER	1 00	х						0	0	0
CHAIRMAN								Ŭ		
(2) YVONNE SUTTLES	1 00	х						0	0	0
VICE CHAIR	1.05						_			
(3) TED DELISI DIRECTOR	1 00	х						0	0	0
(4) ANNE MORGAN	1 00									
SECRETARY		X						0	0	0
(5) PAULA CAMPBELL	1 00	х						0	0	0
TREASURER		^						0	U	U
(6) FRANCINE BRECKENRIDGE	1 00	Х						0	0	0
DIRECTOR (7) LES GAGE	1.00					-				
DIRECTOR	1 00	×						0	0	0
(8) CINDY GOLDSBERRY	1 00	<u> </u>								
DIRECTOR		X						0	0	0
(9) ALI KHATAW	1 00	х						0	0	0
DIRECTOR										
(10) JAMIE LAGARDE	1 00	x						0	0	0
DIRECTOR								Ĭ		
(11) YVONNE VANDYKE	1 00	x						0	0	0
DIRECTOR								Ů		
(12) CARL HANSEN	1 00	x						0	0	0
DIRECTOR								Ů		
(13) ERICA SAENZ	1 00	х						0	0	0
DIRECTOR								<u> </u>		
(14) ISSAM BAKIR	1 00	х						0	0	0
DIRECTOR										
(15) GWEN GREENE	1 00	х						0	0	0
DIRECTOR							L	<u> </u>		
(16) MICHAEL LUSTINA	1 00	Ų								
DIRECTOR		X						0	0	0
(17) GERALD L DAVIS	40 00			.,				F.5. 1	_	
PRESIDENT & CEO	1 00			X				568,437	0	106,415
-	1 00						_			Form 990 (2013)

Part VII

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot	not box h ar or/tr	office	er er	(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 organization
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	MISC)	MISC)	and related organizations
(18) CATHY F RUDZINSKI	40 00			Х				250,124	0	67,180
CFO	1 00								-	
(19) ANDREA SALINAS CAO	40 00				х			212,344	0	75,485
(20) MARK HIEMSTRA	40 00 1 00				х			204,963	0	61,592
(21) MICHAEL WILLARD CMS	40 00				х			181,918	0	44,167
(22) BRETT BARTSCHI	40 00				х			181,883	0	12,923
VP OF RETAIL (23) DODIE BROWN	40 00					Х		149,047	0	27,726
VP OF FINANCIAL SERVICES (24) CHRISTINE BANKS	40 00					x		142,338	0	34,802
VP EBS (25) MELVIN CAPLER	1 00									,
VP COMMERCIAL SVS	40 00					х		0	130,966	25,185
(26) TRACI BERRY VP COMMUNITY ENGAGEMENT	40 00					х		147,805	0	35,918
(27) CARMEN ZAYAS VP ORGANIZATIONAL DEV	40 00					х		113,361	0	24,949
1b Sub-Total		<u> </u>	•		<u> </u>	<u> </u>				
c Total from continuation sheets to Part d Total (add lines 1b and 1c)				٠.		-		2,152,220	130,966	516,342
Total number of individuals (including b \$100,000 of reportable compensation				d al	oove	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 "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		No

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
BURT WATTS 9737 GREAT HILLS TRAIL AUSTIN TX 78759	CONSTRUCTION	4,848,887
PCD NETWORK SOLUTIONS PO BOX 17245 CRESCENT SPRINGS KY 41017	COMPUTER NETWORK	239,415
ABM BUILDING PO BOX 951997 DALLAS TX 75395	HVAC MAINTENANCE	217,883
ACC 9101 TUSCANY WAY AUSTIN TX 78754	EDUCATION	216,262
ASI PROTECTION SERVICES PO BOX 270212 AUSTIN TX 78727	SECURITY SERVICES	206,169

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 ►12

	4	9		
	3			
1			•	

Form 99								Page 9
Part V	/##	Statement o	f Revenue ule O contains a respor	ise or note to any lin	ne in this Part VIII			Г
		Check if Selected	are o contains a respon	ise of noce to diffy in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
2 £	1a	Federated camp	paigns 1a	4,905				
rant	b	Membership du	es 1b					
ē, Ē	С	Fundraising eve	ents 1c	365,118				
iffs Far	d	Related organiz	rations 1d					
s, G imil	е	Government grants	s (contributions) 1e					
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	46,859,058				
ntrik d Ot	g	1a-1f \$	ons included in lines	46,287,918				
<u>ပ</u> ြ	h	Total. Add lines	s 1 a - 1 f	· · · · •	47,229,081			
ë	_			Business Code				
Program Serwce Revenue	2a	WORKFORCE DEV		624310	6,467,279	6,467,279		
<u>윤</u>	b	ASSISTED EMPLOY		561300	2,489,108	2,489,108		
Š	d	ASSISTED EMPLOY	RETAIL	453310	265	265		
<u> </u>	e							
<u> </u>	f	All other progra	ım service revenue					
چ ک		-		<u>-</u>	0.056.652			
	g 3	Total. Add lines	ome (including divident	►	8,956,652			
		and other simila	aramounts)	•	12,394			12,394
	4		tment of tax-exempt bond p	proceeds •				
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	152,732	3,250				
	ь	Less rental expenses	174,251	0				
	С	Rental income or (loss)	-21,519	3,250				
	d	' '	me or (loss)		-18,269			-18,269
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory		52,266				
	b	Less cost or		15.054				
		other basis and sales expenses		15,954				
	C	Gain or (loss)		36,312	36,312			36,312
	d 8a	Gross income fi	rom fundraising		30,312			30,312
Other Revenue		events (not incl \$365,	luding ,118 s reported on line 1c) se 18					
ī.	ь	less direct evi	a penses b	43,662				
₹	c		(loss) from fundraising		-43,066			-43,066
	9a	Gross income fi	rom gaming activities	· ·				
		See Part IV, lin	e 19 a l					
	b	Less direct ex	penses b					
	С		loss) from gaming activ	/ities -				
	10a	Gross sales of						
		returns and allo	owances . a	2,862,908				
	ь	Less cost of go	oods sold b	1,184,327				
	С	Net income or (loss) from sales of inve		1,678,581			1,678,581
		Miscellaneous	s Revenue	Business Code				
	11a	MANAGEMENT		900099	190,057			190,057
	b	MISCELLANEC		900099	137,886			137,886
	C	GAIN/LOSSES		900099	88,924			88,924
	d e		ue s 11a-11d	<u> </u>	86,985			86,985
	e			•	503,852			
	12	Total revenue.	See Instructions		58,355,537	8,956,652	(2,169,804

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All			iete column (A)	
	Check if Schedule O contains a response or note to any line in this		(B)	(c)	<u> </u>
	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 $$ See Part IV $,$ line 21 $$	15,000	15,000		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	1,060,979	1,060,979		
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 key employees	1,711,382	584,146	1,103,761	23,475
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	25,942,687	22,532,853	3,060,148	349,686
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	232,854	186,399	39,943	6,512
9	Other employee benefits	2,813,560	2,425,364	352,462	35,734
10	Payroll taxes	2,073,935	1,766,365	282,112	25,458
11	Fees for services (non-employees)				
а	Management				
b	Legal	58,092	14,397	43,695	
c	Accounting	58,370	8,381	49,989	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,020,343	1,945,430	992,716	82,197
12	Advertising and promotion	973,675	962,117	9,540	2,018
13	Office expenses	3,329,654	2,861,197	394,346	74,111
14	Information technology	297,942	203,762	91,264	2,916
15	Royalties	237,312	203,702	31,201	2,310
16	Occupancy	6,044,989	5,580,281	464,439	269
17	Travel	764,242	607,899	133,903	22,440
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	704,242	007,033	133,303	22,440
19	Conferences, conventions, and meetings	41,822	15,334	21,878	4,610
20	Interest	130,774	32,423	98,351	.,020
21	Payments to affiliates	162,024	, :20	162,024	
22	Depreciation, depletion, and amortization	2,658,348	1,807,492	847,108	3,748
23	Insurance	320,717	220,339	99,641	737
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	PURCHASED GOODS	1,156,926	1,132,180	23,546	1,200
b	COST ALLOCATIONS	898,964	2,080,590	-1,227,577	45,951
c	MERCHANT FEES	596,493	595,546	301	646
d	EQUIPMENT MAINTENANCE	582,887	504,688	68,431	9,768
e	All other expenses	462,451	224,113	192,709	45,629
25	Total functional expenses. Add lines 1 through 24e	55,409,110	47,367,275	7,304,730	737,105
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

Pai	rt X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	972,464	1	1,421,349
	2	Savings and temporary cash investments	261,954	2	252,017
	3	Pledges and grants receivable, net	934,267	3	261,559
	4	Accounts receivable, net	627,936	4	1,362,082
Assets	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		5	
				6	
SSI	7	Notes and loans receivable, net		7	
•	8	Inventories for sale or use	577,748	8	550,347
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 64,742,046			
	ь	Less accumulated depreciation 10b 15,901,553	44,246,033	10c	48,840,493
	11	Investments—publicly traded securities	340,696	11	504,313
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	1,305,501	15	1,327,377
	16	Total assets. Add lines 1 through 15 (must equal line 34)	49,266,599	16	54,519,537
	17	Accounts payable and accrued expenses	4,257,451	17	4,575,164
	18	Grants payable		18	
	19	Deferred revenue	8,329	19	1,662
	20	Tax-exempt bond liabilities	20,629,228	20	20,840,495
S.	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>ge</u>		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	0.024.044	3.5	40 440 707
	2.	D	9,624,841	25	10,140,767 35,558,088
	26	Total liabilities. Add lines 17 through 25	34,519,649	26	35,556,066
ű	2.7	lines 27 through 29, and lines 33 and 34.	14,579,472	¸	18,750,554
<u>ಣ</u> ಪ	27	Unrestricted net assets	14,579,472		210,895
ã	28	Temporarily restricted net assets	107,278	28	210,695
Fund Balance	29	Permanently restricted net assets		29	
重		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
0	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
\$ S \$	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	14,746,750	33	18,961,449
ź	34	Total liabilities and net assets/fund balances	49,266,599	34	54,519,537
	1		1 .5,255,555		5.,5.10,007

Par	t XI Reconcilliation of Net Assets			<u> </u>	
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		58,3	355,537
2	Total expenses (must equal Part IX, column (A), line 25)	2		55,4	09,110
3	Revenue less expenses Subtract line 2 from line 1	3		2,9	46,427
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		14,7	46,750
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		1,2	68,272
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		18,9	61,449
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	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 or	1		
	☐ 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 ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e 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 required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

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As Filed Data -

DLN: 93493316045754

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

lame	of	the	organi	zat	ion	
OODW	/ILL	INDU	JSTRIES	OF	CENTRAL	TEXAS

Employer identification number

74-1322808

	rt I			blic Charity Sta te foundation becaus						nstructions	
1	Ji gaili			on of churches, or a	· ·		-	•	•		
2	<u>'</u>		•	•				ection 170(i	D)(1)(A)(I).		
	<u>'</u>			in section 170(b)(1			•	170/b)/1)	(A)(:::)		
3	<u> </u>			perative hospital se	_					/4\/ A \/:::\	
4	ı			n organization operat ty, and state	tea in conjun	ction with a	nospital desc	cribed in se	ction 170(B)((I)(A)(III).	enter the
5	\vdash			erated for the benefi	t of a college	or universit	tv owned or o	perated by	a governmen	tal unit desc	ribed in
-		_	•	A)(iv). (Complete P	_		-,	p = . = . =	- g		
6	\vdash			local government or		al unit desc	ribed in secti	on 170(b)(1	L)(A)(v).		
7	, V			at normally receives	_					rom the aen	eral public
-	•	_		n 170(b)(1)(A)(vi).		•	опречено	go			o. a. p a b c
8	\sqcap	A comr	nunity trust	described in section	170(b)(1)(A)(vi) (Con	nplete Part II)			
9	\sqcap	An orga	anization th	at normally receives	(1) more th	an 331/3% o	f its support	from contrib	outions, mem	ıbershıp fees	s, and gross
		receipt	s from activ	ities related to its e	xempt function	ons—subjec	t to certain e	xceptions, a	and (2) no mo	ore than 331	/3% of
		ıts sup	port from gr	oss investment inco	me and unrel	ated busine	ss taxable ın	come (less	section 511	tax) from bu	ısınesses
		acquire	ed by the org	janızatıon after June	30,1975 S	ee section 5	509(a)(2). (C	omplete Pa	rt III)		
10	Γ	Anorga	anızatıon or	ganized and operated	dexclusively	to test for p	oublic safety	See sectio	n 509(a)(4).		
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated									
e f g	l	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?									
				irectly or indirectly o governing body of th			_	persons de	scribed iii (ii) 11g	Yes No
		•		er of a person descri		-	1.				(ii)
			•	lled entity of a perso	• •		ahove?			11g	
h				ng information about		., .,				119	(,
(i) Name of supported organization		rted	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	(iv) Is to organization col (i) listo your gove docume	on in ted in rning	(v) Did you the organi in col (i) o suppor	zation f your	(vi) Is organizat col (i) org in the U	ion in janized	(vii) A mount of monetary support
				instructions))	Yes	No	Yes	No	Yes	No	
Tota	I										

instructions

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 (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do 32,183,188 36,157,170 37,895,257 43,038,180 47,229,081 196,502,876 not include any "unusual grants ") 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 32,183,188 36,157,170 37,895,257 43,038,180 47,229,081 196,502,876 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 196,502,876 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (a) 2009 (f) Total beginning in) 🟲 32,183,188 36,157,170 37,895,257 43,038,180 47,229,081 Amounts from line 4 196,502,876 Gross income from interest, dividends, payments received on 5,943 securities loans, rents, royalties 34,970 2,542 11,533 168,376 223,364 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 503,852 503.852 capital assets (Explain in Part IV) 11 Total support (Add lines 7 197,230,092 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 99 630 % Public support percentage for 2012 Schedule A, Part II, line 14 15 99 950 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ┡┰ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. 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 - 2013. 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 - 2012. 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

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

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I 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

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	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						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(1) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, 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)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, 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 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, 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)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, 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 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, 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 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, 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 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, 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 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, 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 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, 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 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, 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 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. 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

Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).						
	Facts And Circumstances Test						
Retu	ırn Reference	Explanation					
		Schodulo A / Form 000 o	000 E7) 201				

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493316045754

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) 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 CENTRAL TEXAS 74-1322808 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 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-

section 4911 tax for this year?

┌ Yes ┌ No

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

Check	▶ □	if the filing	organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address,	EIN,
		expenses	and share of excess lobbying expenditures)	

B Check ► If the filing organization checked box A and "limited control" provisions apply

encek i , ii the lilling enganization encekea sa	xxx and minica control provisions appri		
Limits on Lobbying I (The term "expenditures" means a		(a) Filing organization's totals	(b) Affiliated group totals
Total lobbying expenditures to influence public of	opinion (grass roots lobbying)		
Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	70,756	
Total lobbying expenditures (add lines 1a and 1	b)	70,756	
O ther exempt purpose expenditures		55,556,266	
Total exempt purpose expenditures (add lines 1	c and 1d)	55,627,022	
Lobbying nontaxable amount Enter the amount columns	1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
Grassroots nontaxable amount (enter 25% of li	ne 1f)	250,000	
Subtract line 1g from line 1a If zero or less, ent	er -0 -	0	
Subtract line 1f from line 1c If zero or less, ente	er - O -	0	
If there is an amount other than zero on either li	ne 1h or line 1i, did the organization file Form 472	0 reporting	

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

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) Total beginning in) Lobbying nontaxable amount 1,000,000 1,000,000 1,000,000 3,000,000 Lobbying ceiling amount 4,500,000 (150% of line 2a, column(e)) 70,756 Total lobbying expenditures 4,407 13,746 88,909 Grassroots nontaxable amount 250,000 250,000 250,000 750,000 Grassroots ceiling amount 1,125,000 (150% of line 2d, column (e)) Grassroots lobbying expenditures

	Part II-B Complete if the organization is exempt under section filed Form 5768 (election under section 501(h)).					
For e	r each "Yes" response to lines 1a through 1ı below, provide in Part IV a detailed descri	ption of the lobbying	(8	a)	(1	b)
	tivity.		Yes	No	Amo	ount
1 a	legislation, including any attempt to influence public opinion on a legislative r through the use of					
b c	b Paid staff or management (include compensation in expenses reported on line	es 1c through 1ı)?				
d	d Mailings to members, legislators, or the public?					
e	e Publications, or published or broadcast statements?					
f	f Grants to other organizations for lobbying purposes?					
g	g Direct contact with legislators, their staffs, government officials, or a legislati	ive body?				
h i		ımılar means?				
j	•			1		
2a	.	on 501(c)(3)?				
b						
C	, , , , , , , , , , , , , , , , , , , ,			İ		
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for	-				
Par	art III-A Complete if the organization is exempt under section 501(c)(6).	on 501(c)(4), section 5	01(c)(5), c	or sect	ion
	301(0)(0).				Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by membe	rs?		Г	1	111
2					2	
3					3	
Pai	art III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 a line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not inclease for which the section 527(f) tax was paid).	lude amounts of political	20			
a	•		2a			
b			2b 2c			
с 3		a saction 163(a) duas	3			
4						
•	does the organization agree to carryover to the reasonable estimate of nonde political expenditure next year?	•	4			
5	, , , , , , , , , , , , , , , , , , , ,		5			
P	Part IV Supplemental Information					
	Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line Part II-B, line 1 Also, complete this part for any additional information	e 5, Part II-A (affiliated grou	p lıst),	Part II	-A , line	2, and
	Return Reference Explanation					

201104410 0 (101111 330 01 330 12) 2013	i age -i	
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

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DLN: 93493316045754

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

ilcina	Trevenide General		Tilopece	
	me of the organization DDWILL INDUSTRIES OF CENTRAL TEXAS		Employer identification numbe	r
-	Our animation and the latest the	wheel Francis - Other City -	74-1322808	C.U
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990	, Part IV, line 6.		
		(a) Donor advised funds	(b) Funds and other accou	nts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		or advised Yes	┌ No
6	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the benef			_ N-
.	conferring impermissible private benefit?	· II II III/ III	<u> </u>	No
	rt II Conservation Easements. Complete if		o Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation	<u>—</u>	historically important land area	
	Protection of natural habitat	<u> </u>	certified historic structure	
	Preservation of open space	, Trassituation of a		
_	·		h - 6 6 h	
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a qualified conservation contribution in t	ne form of a conservation	
	,,		Held at the End of the	Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified histo	oric structure included in (a)	2c	
d	Number of conservation easements included in (c) acq historic structure listed in the National Register	quired after 8/17/06, and not on a	2d	
3	Number of conservation easements modified, transferr	red, released, extinguished, or terminate	d by the organization during	
	the tax year 🕨			
4	Number of states where property subject to conservat	ion easement is located ▶	<u> </u>	
5	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	dling of violations, and Yes	┌ No
6	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	nents during the year	
	<u>*</u>			
7	A mount of expenses incurred in monitoring, inspecting \$\blue{\sigma}\$ \blue{\sigma}\$	g, and enforcing conservation easements	s during the year	
8	Does each conservation easement reported on line 2(of and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of sec	tion 170(h)(4)(B)(i)	┌ No
9	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financial		
Par	Complete if the organization answered "Y		or Other Similar Assets.	
1a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	ets held for public exhibition, education,	or research in furtherance of publ	
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ets held for public exhibition, education,		ıc
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$	
	(ii) Assets included in Form 990, Part X		▶ - \$	
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS		'	
а	Revenues included in Form 990, Part VIII, line 1	, , , , , , , , , , , , , , , , , , , ,	▶ - \$	

b Assets included in Form 990, Part X

Par [·]	Organizations Maintaining Co	llections of Art,	Hist	orica	al Trea	asures, or C)the	r Similar Ass	ets (c	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other record	ls, che	ck an	y of the	following that	are a	ı sıgnıficant use	of its	
а	Public exhibition		d	Γ ι	oan or	exchange prog	rams	3		
b	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how	they	further t	the organization	n's ex	xempt purpose in		
5	During the year, did the organization solicit o							_	_	_
Do	assets to be sold to raise funds rather than t								Yes	✓ No
Pal	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						eu Y	es to form 95	, ,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						sets		Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the f	followi	ng tal	ole	_				
						-		Amo	ount	
С	Beginning balance						1c			
d	Additions during the year					-	1d			
e	Distributions during the year						1e			
f	Ending balance					L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					Г	Yes	Г No
ь	If "Yes," explain the arrangement in Part XII	I Check here if the	explar	nation	has be	en provided in	Part	XIII		
Pa	rt V Endowment Funds. Complete									
1a	Beginning of year balance	(a)Current year 340,697	(b) Pi	nor yea	7,998	(c)Two years back 213,64	+ • •	Three years back 106,197	(e) Four y	years back 102,184
ь	Contributions	100,000			.,,,,,,	100,00	+	100,000		
c	Net investment earnings, gains, and losses				+		+			
_		69,190		3	2,699	5,64	3	7,444		4,013
d	Grants or scholarships						-			
е	Other expenditures for facilities and programs									
f	Administrative expenses	5,574								
g	End of year balance	504,313		34	0,697	307,99	8	213,641		106,197
2	Provide the estimated percentage of the cur	ent year end balanc	e (lıne	1g, c	olumn ((a)) held as				
а	Board designated or quasi-endowment 🕨	100 000 %								
b	Permanent endowment ►									
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld agual 100%								
За	Are there endowment funds not in the posses		tion th	nat ar	a hald a	nd administers	d for	the		
Ja	organization by	ssion of the organiza	cion ci	iat ai	e nera a	na aummistere	u ioi	tile	Yes	No
	(i) unrelated organizations							За(i	_	No
_	(ii) related organizations							3a(ii)	No
b	If "Yes" to 3a(II), are the related organization	·					•	Зь		
4 Par	Describe in Part XIII the intended uses of the triangle of triangle of the triangle of triangl					newared 'Ve	s' to	Form 990 Par	+ T\/	ıne
1.6	11a. See Form 990, Part X, line		ne org	garnz	ation c	mswered re.	3 10	101111 330, Fai	(10,1	
	Description of property				ost or oth investme			(c) Accumulated depreciation	(d) B	ook value
1a	Land		1			10,838	3,535			10,838,535
b	Buildings		.			29,513	3,669	3,783,849		25,729,820
c	Leasehold improvements		. [12,840),227	5,774,995		7,065,232
а	Equipment		_ [44.54	9,615	6,342,709		5,206,906
u	Equipment I I I I I I I I		·			11,549	,	3,3 .2,. 33		3,200,900
e	Other						,			48,840,493

Part VII Investments—Other Securities. Con See Form 990, Part X, line 12.	mplete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
(a) Description of security or category	(b)Book value	(c) Method of va	
(Including name of security) (1)Financial derivatives		Cost or end-of-year	market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	emplete if the evention	a anamarad 'Vas' ta Fa	una 000 Dawk IV line 11e
Part VIII Investments—Program Related. Conservation See Form 990, Part X, line 13.	ompiete ii the organization	Tanswered tes to ro	orm 990, Part IV, line IIC.
(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year	
		Cost of ella of year	market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	n answered 'Yes' to Form 990	」)Part IV line 11d See F	Form 990 Part X line 15
(a) Descr			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1			
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25.	anızatıon answered 'Yes' to	o Form 990, Part IV, l	ine 11e or 11f. See
1 (a) Description of liability	(b) Book value		
Federal income taxes			
457 DEFERRED COMPENSATION	273,686		
INTERCOMPANY	8,778,597		
RENT ACCRUAL SL INTEREST RATE SWAP	944,231 144,253		
INTEREST RATE SWAF	144,233		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	10,140,767		

PART X, LINE 2

Fai		wered 'Yes' to Form 990, Part IV, line 12a.	ei ke	turn Complete II		
1		ner support per audited financial statements	1			
2	A mounts included on line 1 b	out not on Form 990, Part VIII, line 12				
а	Net unrealized gains on inves	stments				
b	Donated services and use of	facilities				
С	Recoveries of prior year gran	its 2c				
d) 2d				
e	Add lines 2a through 2d		2e			
3	Subtract line 2e from line 1		3			
4	Amounts included on Form 9	90, Part VIII, line 12, but not on line 1				
а	Investment expenses not inc	cluded on Form 990, Part VIII, line 7b . 4a				
b	Other (Describe in Part XIII)				
С	Add lines 4a and 4b		4c			
5		nd 4c. (This must equal Form 990, Part I, line 12)	5			
Part	XII Reconciliation of I	Expenses per Audited Financial Statements With Expenses	per	Return. Complete		
		nswered 'Yes' to Form 990, Part IV, line 12a.				
1	Total expenses and losses p	er audited financial statements	1			
2	Amounts included on line 1 b	out not on Form 990, Part IX, line 25				
а	Donated services and use of	facilities				
b	Prior year adjustments .	<u>2b</u>				
С	Otherlosses	<u>2</u> c				
d	Other (Describe in Part XIII)				
e	Add lines 2a through 2d .		2e			
3	Subtract line 2e from line 1		3			
4	Amounts included on Form 9	90, Part IX, line 25, but not on line 1:				
а		cluded on Form 990, Part VIII, line 7b 4a				
b	•)				
c			4c			
5		and 4c. (This must equal Form 990, Part I, line 18)	5			
Part	Supplemental In	formation				
Part		or Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, I, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		e any additional		
	Return Reference	Explanation				
PART III, LINE 1A COLLECTIONS, ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SING GOODWILL'S INCEPTION OF THE ENVIRONMENTAL BUSINESS SERVICES COMUSEUM, ARE NOT RECOGNIZED AS ASSETS ON THE STATEMENT OF FINANCE PURCHASES OF COLLECTION ITEMS ARE RECORDED AS DECREASES IN UNRASSETS IN THE YEAR IN WHICH THE ITEMS ARE ACQUIRED OR AS TEMPORA PERMANENTLY RESTRICTED NET ASSETS IF THE ASSETS USED TO PURCHAS ARE RESTRICTED BY DONORS CONTRIBUTED COLLECTION ITEMS ARE NOT THE FINANCIAL STATEMENTS PROCEEDS FROM DEACCESSIONS OR INSURARECOVERIES ARE REFLECTED AS INCREASES IN THE APPROPRIATE NET ASSETS.						
PART	III, LINE 4	THE ENVIRONMENTAL BUSINESS SERVICES COMPUTER MUSEUM COLLECTION IS MADE UP OF COMPUTERS AND COMPUTER RELATED EQUIPMENT OF HISTORICAL SIGNIFICANCE ACQUIRED THROUGH DONATIONS THE COLLECTION IS HELD FOR EDUCATIONAL, RESEARCH AND CURATORIAL PURPOSES AS WELL AS KEEPING THE EQUIPMENT OUT OF THE LANDFILL EACH OF THE ITEMS IS CATALOGED, PRESERVED, CARED FOR, AND ACTIVITIES VERIFYING THE EXISTENCE AND ASSESSMENT OF THE CONDITION AND HISTORICAL				
PΔRT	V, LINE 4	SIGNIFICANCE ARE CONTINUALLY PERFORMED THE ENDOWMENT FUND IS INTENDED TO FUND MISSION SERVICES	INT	HE FIITURE		

FOR FEDERAL TAX PURPOSES

GICT AND SUBSIDIARIES FOLLOW THE ACCOUNTING GUIDANCE RELATED TO UNCERTAIN TAX POSITIONS USING THAT GUIDANCE, TAX PROVISIONS INITIALLY NEED TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS WHEN IT IS MORE-LIKELY-THAN-NOT THE POSITION WILL BE SUSTAINED UPON EXAMINATION BY THE TAX AUTHORITIES AS OF DECEMBER 31, 2013, GICT AND SUBSIDIARIES HAVE NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS GICT AND SUBSIDIARIES TAX YEARS 2010 TO 2013 REMAIN SUBJECT TO EXAMINATION

•	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93493316045754

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OODWILL INDUSTRIES OF C	ENTRAL TEYAS				Employer idei	ith cation number
ODWIEL INDOSTRIES OF C	ENTRAL TEXAS				74-1322808	
	tivities. Complete s are not required				to Form 990, Part IV	, line 17.
Indicate whether the organ	nızatıon raısed funds t	through an	y of the f	following activities Che	eck all that apply	
Mail solicitations			e	☐ Solicitation of non	n-government grants	
☐ Internet and email sol	ıcıtatıons		f	Solicitation of gov	ernment grants	
Phone solicitations			g	☐ Special fundraisin	g events	
☐ In-person solicitations	s					
Did the organization have or key employees listed in						Г Yes Г No
If "Yes," list the ten highe to be compensated at leas			undraisei	rs) pursuant to agreem	ents under which the fu	ndraiser is
(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
al			.			
List all states in which the registration or licensing	organization is regis	tered or lic	censed to	solicit contributions o	r has been notified it is	exempt from

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contribut					
		, , , , , , , , , , , , , , , , , , ,	(a) Event #1 HALL OF HONOR (event type)	(b) Event #2	(c) O ther events (total number)	(d) Total events (add col (a) through col (c))		
Φ_3	1	Cross resemble	365,714		(cocar namber)	365,714		
Revenue	2	Gross receipts Less Contributions						
<u>&</u> 	3	Gross income (line 1 minus line 2)	365,118			365,118		
	4	Cash prizes						
"	5	Noncash prizes						
Expenses	6	Rent/facility costs	6,743	3		6,743		
<u>8</u>	7	Food and beverages .	27,225	5		27,225		
Direct -	8	Entertainment						
古	9	Other direct expenses .	9,694	1		9,694		
	10	Direct expense summary Add lin	es 4 through 9 in column	(d)		(43,662)		
	11	Net income summary Subtract li	ne 10 from line 3, columr	(d)		-43,066		
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than		
Revenue	1	Gross revenue	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))		
		Cash prizes						
Expenses		Non-cash prizes						
		Rent/facility costs						
Direct	5	Other direct expenses						
		Volunteer labor	┌ Yes%	┌ Yes% ┌ No		_		
		Direct expense summary Add line Net gaming income summary Subt	-	•				
9 a b	Is t If"l	er the state(s) in which the organization licensed to operate No," explain	gaming activities in eac	n of these states?				
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes b If "Yes," explain								

						1:
Does	s the organization operate gaming activity	ties with nonmember	rs?		T Yes T No	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gaming	g [,]			· Fyes [– No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility					%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special e	vents books and reco	ords	
	Name ▶					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by t	the organization 🟲 \$		· · 「Yes「	– No
	amount of gaming revenue retained by	the third party 🟲 \$ _				
C	If "Yes," enter name and address of th	e thırd party				
	Name ▶					
	Address ►					
16	Gaming manager information					
	Name 🕨					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	T Employee	☐ Independent cor	ntractor		
17	Mandatory distributions					
а	Is the organization required under stat	e law to make charit	able distributions from the gaming	g proceeds to		
	retain the state gaming license?				┌ Yes 「	— No
b	Enter the amount of distributions requi	red under state law (distributed to other exempt organi	ızatıons or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	∕ear ⊳ \$			
Pai		5b, 15c, 16, and 1	xplanations required by Part I 7b, as applicable. Also compl			and
	Return Reference		Explanat	ıon		
		<u> </u>	<u> </u>		rm 990 or 990-	7) 2012

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

GOODWILL INDUSTRIES OF CENTRAL TEXAS

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

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

► Attach to Form 990

OMB No 1545-0047

DLN: 93493316045754

Inspection

Employer identification number

GOODWILL INDUSTRIES OF						74-1322808	
1 Does the organization mathe selection criteria use 2 Describe in Part IV the o	aintain records to sub d to award the grants	orassistance?			lity for the grants or as:	sistance, and	∀ Yes ⊢
Part II Grants and Otl	her Assistance t IV, line 21, for any	o Governments and received recipient that received	Organizations in ed more than \$5,000	the United States). Part II can be dup	s. Complete if the or plicated if additional	ganızatıon answered space ıs needed.	l "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) TRAVIS COUNTY SHERRIFS OFFICE PO BOX 1748 AUSTIN,TX 78767	74-6000192		15,000	0			INMATE PROGRAMS
2 Enter total number of sec	tion 501(c)(3) and g	overnment organizations	listed in the line 1 tabl	e			1

Enter total number of other organizations listed in the line 1 table

ī	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990,	Part IV, line 22.
	Part III can be duplicated if additional space is needed.	

(a)Type of grant or assistance	e (b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance	
See Additional Data Table						
Part IV Supplemental In	formation. Provide the inf	ormation required in Pa	art I, line 2, Part III, col	umn (b), and any other a	dditional information.	
	Explanation					

Part IV Supplemental II	Hornation. Frovide the information required in Fart 1, line 2, Fart 111, column (b), and any other additional information.
Return Reference	Explanation
	DETAIL SUPPORT IS MAINTAINED BY THE ORGANIZATION FOR ASSISTANCE PROVIDED TO INDIVIDUALS THESE CONFIDENTIAL RECORDS ARE MAINTAINED BY INDIVIDUAL AND DOCUMENT THE CRITERIA USED TO DETERMINE THE ASSISTANCE AND THE PROGRAM UNDER WHICH THE ASSISTANCE IS PAID GRANTS ARE SEGREGATED BY ACCOUNT NUMBER SO THAT FUNDS ARE NOT COMINGLED GRANT EXPENSES AND INVOICES ARE REVIEWED AND AUTHORIZED BY BOTH PROGRAM AND ACCOUNTING MANAGEMENT SUB-GRANTEE FUNDS ARE MONITORED BY FINANCE STAFF

Software ID: Software Version:

EIN: 74-1322808

Name: GOODWILL INDUSTRIES OF CENTRAL TEXAS

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

rorm 990, Schedule 1, Part III, Gran					
(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
	·	,			
CHILD CARE	24	91,662			
COMMUNITY VOICEMAIL	349	1,745			
EDUCATION	353	12,010			
BACKGROUND CHECK	7	175			
FOOD	365	6,549			
GOAL ATTAINMENT	1390	32,408			
INCENTIVE	421	11,936			
JOBPLACEMENT	1142	26,834			
JOB RETENTION	2317	54,013			
MEDICAL	144	6,415			
PERSONAL NEEDS	590	30,467			
SCHOOL SUPPLIES	70	3,638			
SHELTER	70	20,024			
TRAINING	677	571,250			
TRANSPORTATION	6252	109,527			
	'		•		

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	, (f) Description of non-cash assistance
UTILITIES	45	10,844			
GAS	130	2,601			
LAP TOP GOAL ATTAINMENT	11		3,707	FMV	COMPUTER LAP TOP
ID FEES	89	2,088			
WORK CLOTHES	1660	45,770			
GED RELATED INCENTIVE	246	6,356			
USB FLASH DRIVE	47		277	7 FMV	PARTICIPANTS RECEIVED USB DRIVES
LEATHER PADFOLIO - GOAL ATTAINMENT	24	319			
OBTAIN CERTIFICATION	92	7,644			
MISCELLANEOUS	1	2,720			

GOODWILL INDUSTRIES OF CENTRAL TEXAS

DLN: 93493316045754

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. **Employer identification number**

Open to Public Inspection

	74-1322808			
Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	▼ Travel for companions			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
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 in Part III			
	▼ Compensation committee ▼ Written employment contract			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a	Yes	
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			
а	The organization?	5a		Νo
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5b		Νo
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or 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 in Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations			INU

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)(1)-(111) 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 o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2013

Part IIII Supplemental Information

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

Return Reference	Explanation				
PART I, LINE 1A	PAYMENT FOR SPOUSAL TRAVEL FOR TWO BOARD MEMBERS TO THE GOODWILL INDUSTRIES INTERNATIONAL DELEGATE ASSEMBLY IN 2013, THE CHAIRMAN ALLOWED THE CEO TO FLY FIRST CLASS TO AUSTRALIA FOR A MEETING				
PART I, LINE 3	THE VP OF ORGANIZATIONAL DEVELOPMENT COLLATED DATA FROM EXECUTIVE COMPENSATION SALARY SURVEYS (LOCAL, STATE AND NATIONAL DATA), 990'S AND INFORMATION RECEIVED FROM GOODWILL INDUSTRIES INTERNATIONAL'S ANNUAL EXECUTIVE COMPENSATION SURVEY THE INFORMATION WAS PRESENTED TO THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS WHO DETERMINED THE SALARIES OF THE CEO AND HIGHLY COMPENSATED STAFF THEIR RECOMMENDATIONS WERE PRESENTED AND APPROVED BY THE FULL BOARD				
PART I, LINES 4A-B	CARMEN ZAYAS RECEIVED A SEVERANCE PAYMENT OF \$11,884 80 GERALD DAVIS PARTICIPATED IN A 457F AND B PLAN \$0 WAS PUT IN THE 457F PLAN AND \$17,000 INTO THE 457B DAVIS RECEIVED A PAYOUT OF \$134,459 36 FROM THE 457F PLAN				

Schedule J (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 74-1322808

Name: GOODWILL INDUSTRIES OF CENTRAL TEXAS

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule J, Par	τ 1	1 - Officers, Direc	tors, Trustees, Ke	y Employees, and	nighest compens	sated Employees		
(A) Name		(B) Breakdown of	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
GERALD L DAVIS PRESIDENT & CEO	(ı) (ıı)	'	88,262	165,729	83,460 0	22,955 0	674,852 0	106,858 0
CATHY F RUDZINSKI CFO	(ı) (ıı)	: I	54,197 0	2,631	58,851 0	8,329 0	317,304	58,782 0
ANDREA SALINAS CAO	(I)	.	49,372 0 0	-4,574 0	51,033 0	24,452 0	287,829	53,972 0
MARK HIEMSTRA COO	(ı) (ıı)	·	7 37,913 0	5,563	47,888 0	13,704 0	266,555	41,916 0
MICHAEL WILLARD CMS	(ı) (ıı)	`I	7 37,550 0	261	43,045 0	1,122 0	226,085	37,550 0
BRETT BARTSCHI VP OF RETAIL	(ı) (ıı)	'	31,950	4,275	4,388 0	8,535 0	194,806 0	36,165 0
DODIE BROWN VP OF FINANCIAL SERVICES	(ı) (ıı)	'	27,395 0 0	796	26,660 0	1,066 0	176,773	28,7 45 0
CHRISTINE BANKS VP EBS	(ı) (ıı)		25,957 0	-107 0	26,353 0	8,449 0	177,140	29,271 0
MELVIN CAPLER VP COMMERCIAL SVS	(I) (II)		0 17,993	0 3 5,104	0 24,189	0 996	0 156,151	0 21,028
TRACI BERRY VP COMMUNITY ENGAGEMENT	(I)		28,453	-952	27,030 0	8,888 0	183,723	26,094 0

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(Form 990)

2

financed property?

Department of the Treasury

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.

►Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

DLN: 93493316045754

Open to Public Inspection

Schedule K (Form 990) 2013

Internal Revenue Service Name of the organization **Employer identification number** GOODWILL INDUSTRIES OF CENTRAL TEXAS 74-1322808 Part I **Bond Issues** (h) On (i) Pool (g) Defeased behalf of financing (c) CUSIP # (a) Issuer name (b) Issuer EIN (d) Date issued (e) Issue price (f) Description of purpose ıssuer Yes No Yes No Yes No NEWARK CULTURAL **EDUCATION** 26-3769964 12-20-2012 20,947,305 BUILDING AND STRUCTURES Χ Χ Χ Part II **Proceeds** В С D Α Amount of bonds retired Amount of bonds legally defeased 2 3 Total proceeds of issue 20,947,305 4 Gross proceeds in reserve funds 5 Capitalized interest from proceeds 6 Proceeds in refunding escrows Issuance costs from proceeds 7 197,808 Credit enhancement from proceeds 8 Working capital expenditures from proceeds 9 Capital expenditures from proceeds 10 20,749,497 Other spent proceeds 11 Other unspent proceeds 12 Year of substantial completion 13 2012 Yes No Yes Yes No Yes No No Were the bonds issued as part of a current refunding issue? Х 14 Were the bonds issued as part of an advance refunding issue? 15 Х Has the final allocation of proceeds been made? Х 16 Does the organization maintain adequate books and records to support the final 17 Χ allocation of proceeds? **Private Business Use** Part III C Α В D Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned Χ property financed by tax-exempt bonds?

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

Χ

	Titate basiness ose (continued)								
			Α	i	В		С	Г	D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		х						
ь	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?		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		0 240 %						
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5		0 240 %						
7	Does the bond issue meet the private security or payment test?		Х						
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		х						
ь	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 sections 1 141-12 and 1 145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?		x						

Part IV Arbitrage

261	ulv Arbitrage								
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		Х						
2	If "No" to line 1, did the following apply?								
а	Rebate not due yet?		Х						
b	Exception to rebate?		Х						
С	No rebate due?		Х						
	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							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	х							
b	Name of provider	BANCO BILB	ΑO						
С	Term of hedge	10 00000	0000000						
d	Was the hedge superintegrated?		Х						
е	Was the hedge terminated?		Х						
		-					Sc	hedule K (Forn	1 990) 2013

Part IV Arbitrage (Continued)

Return Reference

		А		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		х						
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		х						
7	Has the organization established written procedures to monitor the requirements of section 148?		x						
Pa	rt V Procedures To Undertake Corrective Action								
		А		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						
P	art VI Supplemental Information. Provide additional inform	nation for resi	ponses to au	l lestions on S	L chedule K (s	ee instructio	ns).		

Explanation

Schedule K (Form 990) 2013

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DLN: 93493316045754

Open to Public

OMB No 1545-0047

SCHEDULE M (Form 990)

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Noncash Contributions

► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

GOODWILL INDUSTRIES OF CENTRAL TEXAS

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection **Employer identification number**

74-1322808

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	Pa	Till Types of Property							
1 Art—Works of art			Check If	Number of contributions	Noncash contribution amounts reported on Form 990, Part VIII, line	Method of de	etermın		ts
2 Art—Historical treasures 3 Art—Fractional interests	1	Art—Works of art			- 5				
3 Art—Fractional interests 4 Books and publications 5 Clothing and household goods 43,274,175 SALES 5 Clothing and household goods 43,274,175 SALES 43,274,175 SALES 7 Boats and planes 5 X 81 79,655 SALES 8 Intellectual property 9 Securities—Publicity traded 1 Securities—Publi									
4 Books and publications . X 2,934,088 SALES 5 Clothing and household goods									
5 Clothing and household godds			X		2 934 088	SALES			
goods		*							
8 Intellectual property	_	=	Х		10,211,210				
8 Intellectual property . 9 Securities—Publichy traded	6	Cars and other vehicles	Х	81	79,655	SALES			
9 Securities—Publicity traded .	7	Boats and planes							
10 Securities—Closely held stock 11 Securities—Pathership, LLC, or trust interests or trust interestical ones in trust interestical ones in trust interestical or trust	8								
11 Securities—Partnership, LLC, or trust interests	9	Securities—Publicly traded .							
or trust interests	10	Securities—Closely held stock .							
13 Qualified conservation contribution—listoric structures	11								
contribution—Historic structures	12	Securities—Miscellaneous							
contribution—Other	13	contribution—Historic							
16 Real estate—Commercial	14								
17 Real estate—Other	15	Real estate—Residential .							
18 Collectibles	16	Real estate—Commercial							
19 Food inventory	17	Real estate—Other							
20 Drugs and medical supplies . 21 Taxidermy	18	Collectibles							
1 Taxidermy	19	Food inventory							
Historical artifacts	20	Drugs and medical supplies .							
23 Scientific specimens	21	Taxıdermy							
24 Archeological artifacts	22	Historical artifacts							
25 Other \(\bigcup \) Oth	23	Scientific specimens							
26 Other \(\) Oth	24	Archeological artifacts							
27 Other ▶ ()	25	O ther ▶ ()							
Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	26	O ther ►()							
Number of Forms 8 2 8 3 received by the organization during the tax year for contributions for which the organization completed Form 8 2 8 3, Part IV, Donee Acknowledgement									
for which the organization completed Form 8283, Part IV, Donee Acknowledgement									
During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	29					29			
it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?								Yes	No
for exempt purposes for the entire holding period?	30a						1 1		
b If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash and part II 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,		it must hold for at least three ye	ars from the	e date of the initial contribu	ition, and which is not requi	red to be used	1 1		
31 Yes 32a Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a N 33a If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,		for exempt purposes for the enti	re holding p	eriod?			30a		No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	b	If "Yes," describe the arrangem	ent in Part I	I					
contributions?	31	Does the organization have a gif	t acceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,	32a		e third parti	es or related organizations	to solicit, process, or sell i	noncash • • •	32a		No
	b	If "Yes," describe in Part II							
		If the organization did not report	an amount	ın column (c) for a type of	property for which column (a) is checked,			

Part II Supplem

Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference

Explanation

Schedule M (Form 990) (2013)

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DLN: 93493316045754

OMB No 1545-0047

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

SCHEDULE 0

(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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization GOODWILL INDUSTRIES OF CENTRAL TEXAS

Employer identification number

74-1322808

990 Schedule O. Supplemental Information

A, LINE 4 BE OPERATIONAL IN 2014 FORM 990, PART VI, SECTION B, LINE 11 A DRAFT OF THE 990 IS SENT TO THE CFO, WHO SENDS OUT THE DRAFT VIA EMAIL TO THE BOARD OF DIRECTORS THE 990 IS REVIEWED WITH THE FINANCE COMMITTEE AND APPROVED BY THE BOARD PRIOR TO FILING THE RETURN FORM 990, PART VI, SECTION B, LINE 12C BOARD OF DIRECTORS ATTEST TO RELATIONSHIPS ANNUALLY AND RECUSE THEMSELVES FROM VOTING IF A CONFLICT ARISES EMPLOYEES SIGN A CORPORATE COMPLIANCE DOCUMENT ANNUALLY THAT DISCUSSES C ONFLICT OF INTEREST IN DETAIL FORM 990, PART VI, SECTION B, LINE 15 ANNUAL SURVEYS ARE DONE BY THE VP OF ORGANIZATIONAL DEVELOPMENT COMPARING TOP LEVEL SALARI ES WITH COMPARABLE WAGES IN THE FOR PROFIT AND NON-PROFIT SECTIONS THIS INFORMATION IS PRESENTED TO THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS WHO THEN REPORTS AND MAKES RECOMMENDATION TO THE FULL BOARD FORM 990, PART VI, SECTION C, LINE 19 GOVERNING DOCUMENTS AND POLICIES WOULD BE DISCLOSED UPON REQUEST ANNUAL FINANCIAL STATEMENTS ARE POSTED ON THE WEBSITE	Return Reference	Explanation
RECIORS THE 590 IS REVIEWED WITH THE FINANCE COMMITTEE AND A PPROVED BY THE BOARD FRIGR TO FILINS THE RETURN FORM 990, PART VI, SECTION B, LINE 12C SOARD OF DIRECTORS ATTEST TO RELATIONSHIPS ANNUALLY AND REQUSE THEMSELVES FROM VOTING IF A CONFLICT ARISES BUPLOYEES SIGN A CORPORATE COMPLIANCE DOCUMENT ANNUALLY THAT DISCUSSES CONFLICT ARISES BUPLOYEES SIGN A CORPORATE COMPLIANCE DOCUMENT ANNUALLY THAT DISCUSSES CONFLICT ARISES BUPLOYEES SIGN A CORPORATE COMPLIANCE DOCUMENT ANNUALLY THAT DISCUSSES CONFLICT ARISES BUPLOYEES SIGN A CORPORATE COMPLIANCE DOCUMENT ANNUALLY THAT DISCUSSES CONFLICT ARISES BUPLOYEES SIGN A CORPORATE COMPLIANCE DOCUMENT ANNUALLY THAT SALARI ESSAMITE OF THE COMPANIANT OF THE VP OF ORGANIZATIONAL DEVELOPMENT COMPARING TOP LEVEL. SALARI ESSAMITE OF THE COMPANIANT ON THE FOR PROFIT AND NON-PROFIT SECTIONS. THIS INFORMATION IS RESENTED TO THE COMPANIANT ON THE FOR PROFIT AND NON-PROFIT SECTIONS. THIS INFORMATION IS RESENTED TO THE COMPANIANT ON THE FOR PROFIT AND NON-PROFIT SECTIONS. THIS INFORMATION IS RESENTED TO THE VERBEIT. FORM 990, PART VI, SECTION GERALD LOAVIS DEFERRED COMPANIATION INCLUDES \$76,500 IN AT RISK COMPANIATION THAT WAS EAR PROFITED ON THE WEBSITE. FORM 990, PART VII GERALD LOAVIS DEFERRED COMPANIATION INCLUDES \$76,500 IN AT RISK COMPANIATION THAT WAS EARNED IN 2013 AND PAID IN MAY 2014 THE BONUS AMOUNT OF \$30,305 IN STRIKE COMPANIATION THAT WAS EARNED IN 2013 AND PAID IN 2013 BRETTE BONUS AMOUNT OF \$31,950 REPRESENTS AT RISK COMPANIATION THAT WAS EARNED IN 2013 AND PAID IN AY 2014 THE BONUS OF \$27,395 IS AT RISK COMPENSATION THAT WAS EARNED IN 2013 AND PAID IN AY 2014 THE BONUS OF \$27,395 IS AT RISK COMPENSATION THAT WAS EARNED IN 2013 AND PAID IN MAY 2014 THE BONUS OF \$21,404 THE BONUS OF \$21,404 THE BONUS OF \$21,404 THE BONUS OF \$21,304 THE BONUS OF \$28,357 REPRESENTS AT RISK COMPENSATION THAT WAS EARNED IN 2013 AND PAID IN AY 2014 THE BONUS OF \$33,677 REPRESENTS AT RISK COMPENSATION THAT WAS EARNED IN 2013 AND PAID IN 2013 AND PAID IN 2013 AND PAID IN 2013 AND PAID	FORM 990, PART VI, SECTION A, LINE 4	
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FORM 990, PART XI, LINE 9 PY COST ALLOCATION 1,268,272	FORM 990, PART XI, LINE 9	

DLN: 93493316045754

2013

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE R

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization GOODWILL INDUSTRIES OF CENTRAL TEXAS **Employer identification number**

74-1322808

Part I Identification of Disregarded Entities Co	(b)	(c)	(d)	(e)	(f)		
Name, address, and EIN (If applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income E	ind-of-year assets	Direct controlling entity		
Part II Identification of Related Tax-Exempt Or or more related tax-exempt organizations dur	ganizations Complete if tring the tax year.			n Form 990, Pa	art IV, line 34 because it	had one	9
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sectio	n Public charity s (if section 501(d	status Direct controlling c)(3)) entity	Section (13) cor	512(ntroll ty?
(1) GOODWILL TEMPORARY SERVICES INC 1015 NORWOOD PARK BLVD	TEMP PLACEMENT WORKERS W/ BARRIERS	TX	501(C)(3)	LINE 11B, II	GOODWILL INDUSTRIES OF CENTRAL TEXAS	Yes Yes	No
AUSTIN, TX 78753 74-2750379							l
(2) BLUE SOLUTIONS 1015 NORWOOD PARK BLVD	EMPLOYMENT OF DISABLED WORKERS	TX	501(C)(3)	PF	N/A		No
AUSTIN, TX 78753 31-1730721							

Part III	Identification of Related Org because it had one or more rela						ation ansv	vered "Ye	es" on	Form	990, Part	IV, lu	ne 34	ļ		
	(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	entity -	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(h Disprop r allocat	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	/-UBI General in box managi of partne e K-1		General or managing partner?		(k) Percentage ownership
						,			Yes	No		Yes	No			
												_				
													\square			
Part IV	Identification of Related Org line 34 because it had one or mo	ore related organız							wered	d "Yes				IV,		
Na	(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controllir entity	(e) Type of entit (C corp, S corp, or trust)	y Share of income	total Share	(g) e of end- -year ssets		(h) ercentage wnership	Section (b) (continue)	i) on 512 (13) rolled tity?	No.		
							1			-	ĺ	Yes	<u>*</u>	No		
												ı				

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 D	ring the tax year, did the orgranization engage in any of the following transactions with one or more rela	ated organizations li	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)				1c		No
d	Loans or loan guarantees to or for related organization(s)				1d		No
е	Loans or loan guarantees by related organization(s)				1e	Yes	
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)				1 i		No
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	Yes	
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		No
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	Yes	
q	Reimbursement paid by related organization(s) for expenses				1q		No
r	O ther transfer of cash or property to related organization(s)				1r		No
s	Other transfer of cash or property from related organization(s)				1s	Yes	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete t	, <u> </u>					
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount ir	nvolved	
ee A	ditional Data Table						

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

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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

revenue) that was not a related organization. See instructions													
(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 sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	_	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
		·					<u> </u>						

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 74-1322808

Name: GOODWILL INDUSTRIES OF CENTRAL TEXAS

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

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 TEMPORARY SERVICES INC	А	61,779	FMV
GOODWILL TEMPORARY SERVICES INC	Е	20,984,748	GUARANTEE
GOODWILL TEMPORARY SERVICES INC	J	61,779	FMV
GOODWILL TEMPORARY SERVICES INC	М	445,250	FMV
GOODWILL TEMPORARY SERVICES INC	N	61,779	FMV
GOODWILL TEMPORARY SERVICES INC	0	540,721	FMV
GOODWILL TEMPORARY SERVICES INC	Р	283,607	FMV
GOODWILL TEMPORARY SERVICES INC	S	283,607	FMV