

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.**  
**Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

**A For the 2020 calendar year, or tax year beginning** \_\_\_\_\_, **and ending** \_\_\_\_\_

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization: **GOODWILL INDUSTRIES OF SOUTHEASTERN MICHIGAN, INC.**  
 Doing business as \_\_\_\_\_  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: **1357 DIVISION ST**  
 City or town, state or province, country, and ZIP or foreign postal code: **ADRIAN MI 49221-0805**

**D** Employer identification number: **38-1646249**  
**E** Telephone number: **517-263-2135**  
**G** Gross receipts \$: **5,391,525**

**F** Name and address of principal officer:  
**KEITH CHAPMAN**  
**1357 DIVISION ST**  
**ADRIAN MI 49221**

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. See instructions

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) **t** (insert no.)  4947(a)(1) or  527

**J** Website: **WWW.GOODWILLSEMI.ORG** **H(c)** Group exemption number **u** \_\_\_\_\_

**K** Form of organization:  Corporation  Trust  Association  Other **u** \_\_\_\_\_ **L** Year of formation: **1960** **M** State of legal domicile: **MI**

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: GOODWILL PROVIDES EXCEPTIONAL OPPORTUNITIES FOR PEOPLE FACING EMPLOYMENT BARRIERS.		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>14</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>14</b>
	<b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a)	<b>5</b>	<b>406</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>16</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	721,585	742,134
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,387,991	4,609,854
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	28,103	5,501
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,167,795	5,368,937
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	0
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,065,470	2,828,598
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>u</b> 81,007		
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,114,135	2,682,697	
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	7,179,605	5,511,295	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	-11,810	-142,358	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	2,876,715	3,530,263
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	1,694,487	2,490,393
		1,182,228	1,039,870

**Part II Signature Block**

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

**Sign Here**

Signature of officer: **KEITH CHAPMAN** Date: \_\_\_\_\_  
 Type or print name and title: **PRESIDENT AND CEO**

**Paid Preparer Use Only**

Print/Type preparer's name: **BRIAN NOFZINGER** Preparer's signature: **BRIAN NOFZINGER** Date: **04/27/21** Check  if self-employed PTIN: **P00886584**  
 Firm's name: **GROSS, PUCKEY, GRUEL & ROOF, P.C.** Firm's EIN: **38-2962645**  
 Firm's address: **4196 W. MAPLE AVENUE ADRIAN, MI 49221** Phone no.: **517-263-5788**

May the IRS discuss this return with the preparer shown above? See instructions  **Yes**  **No**

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

GOODWILL PROVIDES EXCEPTIONAL OPPORTUNITIES FOR PEOPLE FACING EMPLOYMENT BARRIERS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes  No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes  No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 3,513,009 including grants of \$ ) (Revenue \$ 3,792,121 )

RETAIL SALES OF DONATED GOODS PROVIDE ON THE JOB TRAINING TO PEOPLE WITH DISABILITIES. GOODWILL ACCEPTS CLOTHING AND HOUSEHOLD ITEMS FROM THE PUBLIC AND SELL THE DONATIONS TO OBTAIN REVENUE TO SUPPORT CRITICAL COMMUNITY BASED PROGRAMS AND JOB PLACEMENT SERVICES.

4b (Code: ) (Expenses \$ 346,732 including grants of \$ ) (Revenue \$ 616,357 )

SALVAGE, CONTRACT, AND CUSTOM CREATES EMPLOYMENT AND JOB TRAINING OPPORTUNITIES FOR INDIVIDUALS WITH SIGNIFICANT DISABILITIES OR OTHER CHALLENGES TO EMPLOYMENT. ASSEMBLY, SHREDDING AND PACKAGING WORK IS OBTAINED FROM LOCAL BUSINESSES TO PROVIDE A VARIETY OF WORK EXPERIENCES AND TRAINING ENVIRONMENTS.

4c (Code: ) (Expenses \$ 941,158 including grants of \$ ) (Revenue \$ 825,927 )

WORKFORCE DEVELOPMENT PROVIDES TRAINING, EMPLOYMENT, PLACEMENT AND POST-EMPLOYMENT SUPPORT TO INDIVIDUALS WITH DISABILITIES OR OTHER BARRIERS TO EMPLOYMENT SO THAT THEY CAN FIND AND KEEP GOOD JOBS. GOODWILL WORKS WITH PRISONER RE-ENTRY SERVICES (DEPENING ON CRIME COMMITTED), HOMELESS AND ADJUDICATED YOUTH, AND PEOPLE WITH DISABILITIES. SERVICES ARE ALSO PROVIDED TO INDIVIDUALS WITH SIGNIFICANT DISABILITIES SUCH AS DEVELOPMENTAL DISABILITIS AND AUTISM TO ENABLE THEM TO ENJOY COMMUNITY INTEGRATION, SOCIALIZATION AND NON VOCATIONAL SERVICES. EXPENSES INCLUDE PRORATED ADMINISTRATIVE COSTS.

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses u 4,800,899

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	<b>Section 501(c)(3) organizations.</b> 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		X
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		X
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 I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
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		X
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		X
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		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
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		X
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X

**Part IV Checklist of Required Schedules (continued)**

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

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1a			16
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1b			0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
1c			X

**Part V Statements Regarding Other IRS Filings and Tax Compliance** (continued)

		Yes	No
<b>2a</b>	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		
	<b>2a</b> 406		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
<b>4a</b>	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)?		X
<b>b</b>	If "Yes," enter the name of the foreign country <b>u</b> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	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?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	<b>7d</b>		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>	
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	<b>15</b>	X
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>	X

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>b</b>	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **u** MI
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on 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, address, and telephone number of the person who possesses the organization's books and records **u**

GOODWILL INDUSTRIES OF SOUTHEASTERN 1357 DIVISION ST  
ADRIAN

MI 49221

517-263-2135

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

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 per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KEITH CHAPMAN ..... PRESIDENT AND CEO	40.00 ..... 0.00			X				95,541	0	14,802
(2) JENNIFER BROCKETT ..... SECRETARY	0.50 ..... 0.00	X		X				0	0	0
(3) CHRIS BUDNIK ..... BOARD MEMBER	0.50 ..... 0.00	X						0	0	0
(4) ARELL CHAPMAN ..... BOARD MEMBER	0.50 ..... 0.00	X						0	0	0
(5) CHRIS CLARKE ..... TREASURER	0.50 ..... 0.00	X		X				0	0	0
(6) JOHN DREWS ..... BOARD MEMBER	0.50 ..... 0.00	X						0	0	0
(7) JENNY ENGLE ..... BOARD MEMBER	0.50 ..... 0.00	X						0	0	0
(8) MICHAEL FOX ..... BOARD MEMBER	0.50 ..... 0.00	X						0	0	0
(9) KEVIN FRY ..... VICE CHAIRMAN	0.50 ..... 0.00	X		X				0	0	0
(10) TODD GENTNER ..... CHAIRMAN	0.50 ..... 0.00	X		X				0	0	0
(11) KAITY KAPNICK ..... BOARD MEMBER	0.50 ..... 0.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) CHARLES NOE	0.50									
BOARD MEMBER	0.00	X					0	0	0	
(13) VANESSA OHRMAN	0.50									
BOARD MEMBER	0.00	X					0	0	0	
(14) MICHELE RICE	0.50									
BOARD MEMBER	0.00	X					0	0	0	
(15) PHIL SCHEADLER	0.50									
BOARD MEMBER	0.00	X					0	0	0	
<b>1b Subtotal</b>							<b>95,541</b>		<b>14,802</b>	
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>							<b>95,541</b>		<b>14,802</b>	

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **u** 0

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

**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) Name and business address	(B) Description of services	(C) Compensation

**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 **u** 0



**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>				
	<b>b</b> Membership dues	<b>1b</b>				
	<b>c</b> Fundraising events	<b>1c</b>				
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>	55,800			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	686,334			
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 624,551			
	<b>h Total.</b> Add lines 1a-1f	<b>u</b>	742,134			
<b>Program Service Revenue</b>	<b>2a</b> RETAIL SALES-DONATED GOODS	Business Code	3,167,570	3,167,570		
	<b>b</b> WORKFORCE DEVELOPMENT SERVICE		825,927	825,927		
	<b>c</b> SALVAGE, CONTRACTS & CUSTOMERS		616,357	616,357		
	<b>d</b>					
	<b>e</b>					
	<b>f</b> All other program service revenue					
	<b>g Total.</b> Add lines 2a-2f	<b>u</b>	4,609,854			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)	<b>u</b>	10,401	10,401		
	<b>4</b> Income from investment of tax-exempt bond proceeds	<b>u</b>				
	<b>5</b> Royalties	<b>u</b>				
	<b>6a</b> Gross rents	(i) Real				
		(ii) Personal				
		<b>6a</b>				
	<b>b</b> Less: rental expenses	<b>6b</b>				
	<b>c</b> Rental inc. or (loss)	<b>6c</b>				
	<b>d</b> Net rental income or (loss)	<b>u</b>				
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		<b>7a</b>				
	<b>b</b> Less: cost or other basis and sales exps.	<b>7b</b>	4,900			
	<b>c</b> Gain or (loss)	<b>7c</b>	-4,900			
<b>d</b> Net gain or (loss)	<b>u</b>	-4,900	-4,900			
<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>	27,203				
	<b>b</b> Less: direct expenses	<b>8b</b>	17,688			
	<b>c</b> Net income or (loss) from fundraising events	<b>u</b>	9,515			
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>					
	<b>b</b> Less: direct expenses	<b>9b</b>				
	<b>c</b> Net income or (loss) from gaming activities	<b>u</b>				
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>					
	<b>b</b> Less: cost of goods sold	<b>10b</b>				
	<b>c</b> Net income or (loss) from sales of inventory	<b>u</b>				
<b>Miscellaneous Revenue</b>	<b>11a</b> MISCELLANEOUS	Business Code	1,933	1,933		
	<b>b</b>					
	<b>c</b>					
	<b>d</b> All other revenue					
	<b>e Total.</b> Add lines 11a-11d	<b>u</b>	1,933			
<b>12 Total revenue.</b> See instructions	<b>u</b>	5,368,937	4,617,288	0	0	

**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).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees				
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	2,443,821	1,989,499	406,152	48,170
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
<b>9</b> Other employee benefits	189,534	155,489	28,006	6,039
<b>10</b> Payroll taxes	195,243	161,579	30,478	3,186
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management	37,634	19,484	18,150	
<b>b</b> Legal				
<b>c</b> Accounting				
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
<b>12</b> Advertising and promotion				
<b>13</b> Office expenses	64,714	54,042	2,041	8,631
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	852,049	834,027	17,734	288
<b>17</b> Travel	146,040	142,372	3,644	24
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	1,822	976	846	
<b>20</b> Interest	68,686	53,342	15,124	220
<b>21</b> Payments to affiliates	58,650	58,650		
<b>22</b> Depreciation, depletion, and amortization	245,005	230,753	14,252	
<b>23</b> Insurance	111,783	88,493	22,295	995
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> PURCHASES OF INVENTORY	739,919	739,919		
<b>b</b> SUPPLIES	112,802	100,493	12,192	117
<b>c</b> MISC	108,233	80,369	15,136	12,728
<b>d</b> MAINTENANCE AND REPAIRS	58,899	53,289	5,275	335
<b>e</b> All other expenses	76,461	38,123	38,064	274
<b>25</b> Total functional expenses. Add lines 1 through 24e	5,511,295	4,800,899	629,389	81,007
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part 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
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing	315,169	<b>1</b>	1,010,573
	<b>2</b> Savings and temporary cash investments	442,511	<b>2</b>	443,836
	<b>3</b> Pledges and grants receivable, net		<b>3</b>	
	<b>4</b> Accounts receivable, net	260,631	<b>4</b>	114,647
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		<b>6</b>	
	<b>7</b> Notes and loans receivable, net		<b>7</b>	
	<b>8</b> Inventories for sale or use	51,662	<b>8</b>	48,716
	<b>9</b> Prepaid expenses and deferred charges	93,520	<b>9</b>	124,127
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 3,897,070		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 2,228,221	1,586,656	<b>10c</b> 1,668,849
	<b>11</b> Investments—publicly traded securities	119,515	<b>11</b>	119,515
	<b>12</b> Investments—other securities. See Part IV, line 11		<b>12</b>	
	<b>13</b> Investments—program-related. See Part IV, line 11		<b>13</b>	
	<b>14</b> Intangible assets		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11	7,051	<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33)	2,876,715	<b>16</b>	3,530,263	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	263,683	<b>17</b>	186,867
	<b>18</b> Grants payable		<b>18</b>	
	<b>19</b> Deferred revenue	29,400	<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties	1,324,945	<b>23</b>	1,302,666
	<b>24</b> Unsecured notes and loans payable to unrelated third parties		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	76,459	<b>25</b>	1,000,860
	<b>26 Total liabilities.</b> Add lines 17 through 25	1,694,487	<b>26</b>	2,490,393
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions	1,062,713	<b>27</b>	920,355
	<b>28</b> Net assets with donor restrictions	119,515	<b>28</b>	119,515
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds		<b>31</b>	
	<b>32 Total net assets or fund balances</b>	1,182,228	<b>32</b>	1,039,870
<b>33 Total liabilities and net assets/fund balances</b>	2,876,715	<b>33</b>	3,530,263	

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	5,368,937
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	5,511,295
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	-142,358
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	1,182,228
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	1,039,870

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>2c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
<b>3b</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 on Schedule O and describe any steps taken to undergo such audits		

**SCHEDULE A**  
(Form 990 or 990-EZ)

**Public Charity Status and Public Support**

OMB No. 1545-0047

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

**2020**

Department of the Treasury  
Internal Revenue Service

**u Attach to Form 990 or Form 990-EZ.**

**Open to Public Inspection**

**u Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization	GOODWILL INDUSTRIES OF SOUTHEASTERN MICHIGAN, INC.	Employer identification number	38-1646249
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**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: .....
- 10  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3						
<b>5</b> 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)						
<b>6</b> Public support. Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>11 Total support.</b> Add lines 7 through 10						

**12** Gross receipts from related activities, etc. (see instructions) 12

**13 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

**14** Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f)) 14 %

**15** Public support percentage from 2019 Schedule A, Part II, line 14 15 %

**16a 33 1/3% support test—2020.** 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—2019.** 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—2020.** 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

**b 10%-facts-and-circumstances test—2019.** 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	659,693	437,223	743,748	742,134	751,649	3,334,447
<b>2</b> 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	5,249,993	5,674,931	6,184,918	6,387,991	4,609,854	28,107,687
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	5,909,686	6,112,154	6,928,666	7,130,125	5,361,503	31,442,134
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						31,442,134

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6	5,909,686	6,112,154	6,928,666	7,130,125	5,361,503	31,442,134
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	191	412	462	28,103	5,501	34,669
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b	191	412	462	28,103	5,501	34,669
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	106,334	153,344	32,600	17,415	1,933	311,626
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	6,016,211	6,265,910	6,961,728	7,175,643	5,368,937	31,788,429
<b>14 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	<b>15</b>	98.91 %
<b>16</b> Public support percentage for 2019 Schedule A, Part III, line 15	<b>16</b>	98.85 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage for 2019 Schedule A, Part III, line 17	<b>18</b>	%

- 19a 33 1/3% support tests—2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		





**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7  Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	
6 Other distributions (describe in Part VI). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2020 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015 .....			
b From 2016 .....			
c From 2017 .....			
d From 2018 .....			
e From 2019 .....			
f <b>Total</b> of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2020 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 <b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016 .....			
b Excess from 2017 .....			
c Excess from 2018 .....			
d Excess from 2019 .....			
e Excess from 2020 .....			

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

PART III, LINE 12 - OTHER INCOME DETAIL

MISC INCOME \$ 311,626

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. u Attach to Form 990.

u Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

GOODWILL INDUSTRIES OF SOUTHEASTERN MICHIGAN, INC.

Employer identification number

38-1646249

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, aggregate value of grants, and questions about donor advisement.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of conservation easements, total number of easements, and questions about monitoring and reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures.

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

**3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a**  Public exhibition
- b**  Scholarly research
- c**  Preservation for future generations
- d**  Loan or exchange program
- e**  Other

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance					
<b>b</b> Contributions					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs					
<b>f</b> Administrative expenses					
<b>g</b> End of year balance					

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment **u** %
- b** Permanent endowment **u** %
- c** Term endowment **u** %

The percentages on lines 2a, 2b, and 2c should equal 100%.

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

- (i)** Unrelated organizations
- (ii)** Related organizations

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

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

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

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land		400,000		400,000
<b>b</b> Buildings		2,609,599	1,598,657	1,010,942
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		887,471	629,564	257,907
<b>e</b> Other				

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) **u** 1,668,849

**Part VII Investments – Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)	<b>u</b>	

**Part VIII Investments – Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.)	<b>u</b>	

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	<b>u</b>

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) PPP LOAN	822,000
(3) LEASE INCENTIVE	78,361
(4) VEHICLE LOANS	53,127
(5) DEFERRED RENT	47,372
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	<b>u</b> 1,000,860

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII







**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" on Form 990, Part IV, line 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.

⚡ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public Inspection

Name of the organization **GOODWILL INDUSTRIES OF SOUTHEASTERN MICHIGAN, INC.**

Employer identification number  
**38-1646249**

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

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

- a**  Mail solicitations
- b**  Internet and email solicitations
- c**  Phone solicitations
- d**  In-person solicitations
- e**  Solicitation of non-government grants
- f**  Solicitation of government grants
- g**  Special fundraising events

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

**b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
<b>Total</b> ▶							

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

.....

.....

.....

.....

.....

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>CASINO NIGHT</u> (event type)	_____ (event type)	<u>NONE</u> (total number)	(add col. (a) through col. (c))
Revenue	<b>1</b> Gross receipts .....	27,203			27,203
	<b>2</b> Less: Contributions .....				
	<b>3</b> Gross income (line 1 minus line 2) .....	27,203			27,203
Direct Expenses	<b>4</b> Cash prizes .....				
	<b>5</b> Noncash prizes .....				
	<b>6</b> Rent/facility costs .....	6,523			6,523
	<b>7</b> Food and beverages .....	150			150
	<b>8</b> Entertainment .....				
	<b>9</b> Other direct expenses .....	11,015			11,015
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				17,688
<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) .....				9,515	

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

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

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
**a** Is the organization licensed to conduct gaming activities in each of these states?  Yes  No

**b** If "No," explain: \_\_\_\_\_  
 \_\_\_\_\_

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

**b** If "Yes," explain: \_\_\_\_\_  
 \_\_\_\_\_



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2020**

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

**u** Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
**u** Attach to Form 990.  
**u** Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **GOODWILL INDUSTRIES OF SOUTHEASTERN MICHIGAN, INC.** Employer identification number **38-1646249**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		624,551	
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded				
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other <b>u</b> ( )				
26 Other <b>u</b> ( )				
27 Other <b>u</b> ( )				
28 Other <b>u</b> ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a 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 isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		



**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

**u** Attach to Form 990 or 990-EZ.

**u** Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization GOODWILL INDUSTRIES OF SOUTHEASTERN MICHIGAN, INC.	Employer identification number 38-1646249
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FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990  
 THE ORGANIZATION'S MANAGEMENT AND EXECUTIVE COMMITTEE REVIEW THE RETURN FOR  
 APPROVAL PRIOR TO PRESENTING TO THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY  
 IN THE EVENT A CONFLICT OF INTEREST SHOULD ARISE THE DIRECTOR WITH THE  
 CONFLICT WOULD ABSTAIN FROM ANY VOTE. AND THE CONFLICT WOULD BE DOCUMENTED  
 IN THE MINUTES TO THE MEETINGS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL  
 THE EXECUTIVE DIRECTOR AND HUMAN RESOURCES PROVIDE THE BOARD  
 OF DIRECTORS A REVIEW OF COMPENSATION OF COMPARABLE ORGANIZATIONS IN TERM  
 OF SIZE AND SCOPE WITHIN GOODWILL AND LOCAL AREA USING GOODWILL  
 INTERNATIONAL'S WAGE SURVEY, MICHIGAN NONPROFITS NETWORK'S SURVEY AND OTHER  
 SOURCES. THE BOARD OF DIRECTORS REVIEWS ALL THE INFORMATION INCLUDING  
 PERFORMANCE REVIEWS IN MAKING A DETERMINATION OF THE EXECUTIVE DIRECTOR'S  
 COMPENSATION.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS  
 THE EXECUTIVE DIRECTOR AND HUMAN RESOURCES PROVIDES THE BOARD  
 OF DIRECTORS A REVIEW OF COMPENSATION OF COMPARABLE ORGANIZATIONS IN TERM  
 OF SIZE AND SCOPE WITHIN GOODWILL AND LOCAL AREA USING GOODWILL  
 INTERNATIONAL'S WAGE SURVEY, MICHIGAN NONPROFITS NETWORK'S SURVEY AND OTHER  
 SOURCES. THE BOARD OF DIRECTORS REVIEWS THE INFORMATION AND  
 SALARIES OF SENIOR MANAGEMENT FOR APPROPRIATENESS.

Name of the organization

Employer identification number

GOODWILL INDUSTRIES OF SOUTHEASTERN

38-1646249

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.



38-1646249

## Federal Asset Report

FYE: 12/31/2020 Mth: 12/31/2020

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<b>Prior MACRS:</b>									
220	Parking Lot Cement Repair Mass Sale: 12/31/20	7/11/13	19,051			19,051	5 HY S/L	19,051	0
221	Store Entrance	8/24/13	22,205			22,205	10 HY S/L	14,433	2,221
2117	Ceiling Fans w/Installation	7/18/13	4,950			4,950	3 HY S/L	4,950	0
2118	Cash register counter wrap Mass Sale: 12/31/20	8/24/13	1,549			1,549	3 HY S/L	1,549	0
2119	Slatwall & Rack Hardware Mass Sale: 12/31/20	8/24/13	14,027			14,027	3 HY S/L	14,027	0
2121	2 Laptops & 8 Desktops Computers Mass Sale: 12/31/20	8/26/13	2,550			2,550	3 HY S/L	2,550	0
2122	POS Hardware/Software Upgrade Mass Sale: 12/31/20	8/15/13	3,994			3,994	3 HY S/L	3,994	0
			<u>68,326</u>			<u>68,326</u>		<u>60,554</u>	<u>2,221</u>
<b>Other Depreciation:</b>									
2	Wire Bins Mass Sale: 12/31/20	2/01/84	2,790			2,790	7 MO S/L	2,790	0
3	Land	1/01/09	400,000			400,000	0 -- Land	0	0
164	CCTV System Video & Camera Mass Sale: 12/31/20	1/01/06	5,116			5,116	3 MO S/L	5,116	0
171	Back Door Ramp Mass Sale: 12/31/20	12/01/06	170			170	3 MO S/L	170	0
172	Lighted Marquee Sign Mass Sale: 12/31/20	12/01/06	4,102			4,102	3 MO S/L	4,102	0
175	Store Lettering Mass Sale: 12/31/20	9/01/07	570			570	2 MO S/L	570	0
177	Sign for Donation Center	6/01/08	4,069			4,069	2 MO S/L	4,069	0
178	Building Renovations Mass Sale: 12/31/20	6/01/08	11,574			11,574	5 MO S/L	11,574	0
179	Wall Painting Mass Sale: 12/31/20	7/01/08	2,200			2,200	3 MO S/L	2,200	0
180	Wiring Store Outlets Mass Sale: 12/31/20	8/01/08	2,600			2,600	1 MO S/L	2,600	0
181	Building Improvements - Monroe	12/01/08	10,000			10,000	5 MO S/L	10,000	0
182	Paint Mass Sale: 12/31/20	12/01/08	2,220			2,220	3 MO S/L	2,220	0
184	Monroe Store Labor/Material Mass Sale: 12/31/20	1/01/09	8,449			8,449	10 MO S/L	8,449	0
185	1357 Division St. Building	1/01/09	1,598,783			1,598,783	20 MO S/L	879,377	79,939
186	Light Fixture Replacement Mass Sale: 12/31/20	2/01/09	6,200			6,200	5 MO S/L	6,200	0
187	Cabinet Mass Sale: 12/31/20	3/01/09	250			250	3 MO S/L	250	0
188	Light Fixture/Electrical	4/01/09	38,298			38,298	5 MO S/L	38,298	0
189	Shred Room Fence Install	4/01/09	2,600			2,600	5 MO S/L	2,600	0
190	Ramp to Monroe Dock	5/01/09	1,200			1,200	5 MO S/L	1,200	0
191	Renovations to Division St Mass Sale: 12/31/20	5/01/09	1,699			1,699	5 MO S/L	1,699	0
192	Renovations to Division St	6/01/09	10,000			10,000	10 MO S/L	10,000	0
193	Auto Door Opener Electric Mass Sale: 12/31/20	6/01/09	1,200			1,200	3 MO S/L	1,200	0
194	Air Conditioning System	7/01/09	2,100			2,100	5 MO S/L	2,100	0
195	Roof Hatch Access Ladder	7/01/09	721			721	3 MO S/L	721	0
196	Power for Jockey Pump Mass Sale: 12/31/20	8/01/09	767			767	3 MO S/L	767	0
198	EBay Fencing	1/01/11	3,800			3,800	5 MO S/L	3,800	0
199	Roof Repairs Mass Sale: 12/31/20	2/01/10	2,536			2,536	3 MO S/L	2,536	0
200	Carpeting, Cove and Install	2/01/10	3,712			3,712	3 MO S/L	3,712	0
201	Faucet, Countertop and Fixture Mass Sale: 12/31/20	2/01/10	341			341	3 MO S/L	341	0
202	LINC Area Renovations	8/01/10	77,542			77,542	10 MO S/L	73,019	4,523
203	Painting for LINC Area Mass Sale: 12/31/20	8/01/10	6,000			6,000	5 MO S/L	6,000	0
204	Reception Area Door Window	8/01/10	1,037			1,037	5 MO S/L	1,037	0
205	Renovations for LINC	8/01/10	94,203			94,203	10 MO S/L	87,267	6,936
207	Building Renovations	10/01/10	79,458			79,458	10 MO S/L	73,499	5,959



## Federal Asset Report

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
1473	Computer Workstation Mass Sale: 12/31/20	12/01/00	1,082			1,082	5 MO S/L	1,082	0
1474	Computer Workstation Mass Sale: 12/31/20	12/01/00	1,082			1,082	5 MO S/L	1,082	0
1479	HP Printer Mass Sale: 12/31/20	12/01/00	1,589			1,589	5 MO S/L	1,589	0
1481	Projection System Mass Sale: 12/31/20	12/01/00	1,750			1,750	5 MO S/L	1,750	0
1483	Notebook for Networking Mass Sale: 12/31/20	12/01/00	1,934			1,934	5 MO S/L	1,934	0
1484	Cable & Ports Mass Sale: 12/31/20	12/01/00	1,370			1,370	5 MO S/L	1,370	0
1485	Labor - Networking Installation Mass Sale: 12/31/20	12/01/00	2,698			2,698	5 MO S/L	2,698	0
1486	Valpar Testing Software Mass Sale: 12/31/20	2/01/01	8,810			8,810	5 MO S/L	8,810	0
1488	OSAS Upgrade & Networking Mass Sale: 12/31/20	5/01/01	5,465			5,465	3 MO S/L	5,465	0
1491	Pole Sign & Building Sign Mass Sale: 12/31/20	7/01/01	8,849			8,849	5 MO S/L	8,849	0
1492	Rectangular H Rack W/ Hang Mass Sale: 12/31/20	7/01/01	1,188			1,188	3 MO S/L	1,188	0
1494	Store Sign Mass Sale: 12/31/20	10/01/01	2,531			2,531	3 MO S/L	2,531	0
1497	Computer System Mass Sale: 12/31/20	10/01/01	1,257			1,257	3 MO S/L	1,257	0
1504	Computerized Time Clock Mass Sale: 12/31/20	5/01/02	1,065			1,065	5 MO S/L	1,065	0
1505	Computerized Time Clock Mass Sale: 12/31/20	5/01/02	1,065			1,065	5 MO S/L	1,065	0
1512	Rubbermaid 1 Yd Dump Ca Mass Sale: 12/31/20	6/01/02	1,116			1,116	5 MO S/L	1,116	0
1516	AAP Master Edition Software Mass Sale: 12/31/20	7/01/02	2,995			2,995	3 MO S/L	2,995	0
1526	Shelving Mass Sale: 12/31/20	8/01/02	1,091			1,091	3 MO S/L	1,091	0
1537	Nortel Phone System	9/01/02	12,600			12,600	5 MO S/L	12,600	0
1554	Shopping Carts Mass Sale: 12/31/20	11/01/02	1,727			1,727	5 MO S/L	1,727	0
1564	10 BU Fabric Hampers Mass Sale: 12/31/20	12/01/02	1,693			1,693	3 MO S/L	1,693	0
1572	Donation Sign Mass Sale: 12/31/20	1/01/03	1,335			1,335	10 MO S/L	1,335	0
1579	40x48x30 Drop End Wire Mass Sale: 12/31/20	2/01/03	1,232			1,232	5 MO S/L	1,232	0
1586	Portable Room Divider Mass Sale: 12/31/20	3/01/03	1,951			1,951	5 MO S/L	1,951	0
1593	1997 Freightliner Truck Mass Sale: 12/31/20	7/01/03	14,447			14,447	5 MO S/L	14,447	0
1594	Blue Giant Walkie Stacker Mass Sale: 12/31/20	7/01/03	6,500			6,500	5 MO S/L	6,500	0
1600	Combo Scrubber/Polisher Mass Sale: 12/31/20	3/01/03	1,181			1,181	3 MO S/L	1,181	0
1632	Lyon Ergonomic Workstation Mass Sale: 12/31/20	9/01/03	1,040			1,040	5 MO S/L	1,040	0
1633	Lyon Ergonomic Workstation Mass Sale: 12/31/20	9/01/03	1,040			1,040	5 MO S/L	1,040	0
1634	Lyon Ergonomic Workstation Mass Sale: 12/31/20	9/01/03	1,040			1,040	5 MO S/L	1,040	0
1635	Lyon Ergonomic Workstation Mass Sale: 12/31/20	9/01/03	1,040			1,040	5 MO S/L	1,040	0
1654	Computerized Time Recorder Mass Sale: 12/31/20	9/01/03	1,495			1,495	5 MO S/L	1,495	0
1656	Theman Liftgate Mass Sale: 12/31/20	9/01/03	2,816			2,816	5 MO S/L	2,816	0
1657	Complete MECA System Mass Sale: 12/31/20	10/01/03	19,995			19,995	5 MO S/L	19,995	0
1660	Computer System w/ Monitor Mass Sale: 12/31/20	11/01/03	1,098			1,098	3 MO S/L	1,098	0
1661	Computer System w/ Monitor Mass Sale: 12/31/20	11/01/03	1,098			1,098	3 MO S/L	1,098	0

38-1646249

## Federal Asset Report

FYE: 12/31/2020 Mth: 12/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
1662	Computer System w/ Monitor Mass Sale: 12/31/20	11/01/03	1,098			1,098	3 MO S/L	1,098	0
1666	Server System Mass Sale: 12/31/20	12/01/03	3,066			3,066	3 MO S/L	3,066	0
1676	Merit Burnisher Mass Sale: 12/31/20	4/01/04	1,292			1,292	3 MO S/L	1,292	0
1678	Computer Mass Sale: 12/31/20	4/01/04	1,088			1,088	3 MO S/L	1,088	0
1679	Computer Mass Sale: 12/31/20	4/01/04	1,088			1,088	3 MO S/L	1,088	0
1681	Door Strip Mass Sale: 12/31/20	4/01/04	367			367	3 MO S/L	367	0
1682	2001 Chevy Express Van Mass Sale: 12/31/20	4/01/03	12,000			12,000	10 MO S/L	12,000	0
1684	Toyota Fork Lift Mass Sale: 12/31/20	5/01/04	10,900			10,900	5 MO S/L	10,900	0
1701	POS Cash Register System Mass Sale: 12/31/20	12/01/04	10,292			10,292	5 MO S/L	10,292	0
1702	POS Cash Register System Mass Sale: 12/31/20	12/01/04	13,442			13,442	5 MO S/L	13,442	0
1703	POS Cash Register System Mass Sale: 12/31/20	12/01/04	13,442			13,442	5 MO S/L	13,442	0
1704	10 HP 5/16 Shredder	5/01/05	17,901			17,901	7 MO S/L	17,901	0
1705	Cart Tipper	5/01/05	3,710			3,710	7 MO S/L	3,710	0
1706	15' L Free Standing Conve	5/01/05	5,976			5,976	7 MO S/L	5,976	0
1707	Security Consoles & IPL C	5/01/05	2,137			2,137	3 MO S/L	2,137	0
1708	Jesco Wire Mesh Enclosure	5/01/05	3,186			3,186	7 MO S/L	3,186	0
1709	Fox Low Profile Pallet WR Mass Sale: 12/31/20	6/01/05	3,416			3,416	5 MO S/L	3,416	0
1710	Steel Floor Scale w/ Print	7/01/05	1,820			1,820	5 MO S/L	1,820	0
1711	Admiral Carpet Extractor Mass Sale: 12/31/20	7/01/05	2,318			2,318	5 MO S/L	2,318	0
1712	20 Inch Dual Speed Floor Machine Mass Sale: 12/31/20	7/01/05	1,298			1,298	5 MO S/L	1,298	0
1713	IPL Carts & Security Cons	7/01/05	1,772			1,772	3 MO S/L	1,772	0
1715	Used Crown Walkie Stacker Mass Sale: 12/31/20	9/01/05	5,200			5,200	5 MO S/L	5,200	0
1722	Used Yale Forklift Mass Sale: 12/31/20	11/01/05	7,750			7,750	7 MO S/L	7,750	0
1739	Stack Chairs Mass Sale: 12/31/20	1/01/06	2,050			2,050	5 MO S/L	2,050	0
1786	Shopping Carts Mass Sale: 12/31/20	2/01/06	1,340			1,340	5 MO S/L	1,340	0
1787	Portable Bin Tilter	4/01/06	2,921			2,921	3 MO S/L	2,921	0
1788	Steel Shelving w/ Particle Mass Sale: 12/31/20	5/01/06	1,259			1,259	3 MO S/L	1,259	0
1792	Balewell Horizontal Baler	6/01/06	18,400			18,400	5 MO S/L	18,400	0
1794	Asst'd Store Fixtures Mass Sale: 12/31/20	8/01/06	7,146			7,146	5 MO S/L	7,146	0
1798	Building Signage Mass Sale: 12/31/20	10/01/06	5,642			5,642	3 MO S/L	5,642	0
1802	Wall Gondola Mass Sale: 12/31/20	9/01/06	1,548			1,548	5 MO S/L	1,548	0
1804	Lifts & Hampers Mass Sale: 12/31/20	9/01/06	2,250			2,250	3 MO S/L	2,250	0
1805	Tilt Truck Mass Sale: 12/31/20	9/01/06	1,136			1,136	3 MO S/L	1,136	0
1809	Mic Bravo Cash Register Mass Sale: 12/31/20	10/01/06	14,573			14,573	3 MO S/L	14,573	0
1813	Crown Stacker Mass Sale: 12/31/20	10/01/06	4,750			4,750	5 MO S/L	4,750	0
1814	2001 International Truck Mass Sale: 12/31/20	11/01/06	21,000			21,000	5 MO S/L	21,000	0
1815	Shelving Mass Sale: 12/31/20	12/01/06	2,826			2,826	5 MO S/L	2,826	0
1817	Air Filtration System	7/01/07	11,188			11,188	7 MO S/L	11,188	0
1829	Large Blue Laundry Carts	2/01/08	2,052			2,052	3 MO S/L	2,052	0
1834	Complete Laundry Hampers	5/01/08	2,835			2,835	2 MO S/L	2,835	0
1835	Complete Laundry Hampers Mass Sale: 12/31/20	5/01/08	3,241			3,241	2 MO S/L	3,241	0
1837	Pneumatic Adj. Stool	5/01/08	2,621			2,621	3 MO S/L	2,621	0

38-1646249

## Federal Asset Report

FYE: 12/31/2020 Mth: 12/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
1839	H-Racks	6/01/08	2,500				2,500	2 MO S/L	2,500	0
	Mass Sale: 12/31/20									
1864	4 Foot Wall Gondola	7/01/08	1,600				1,600	3 MO S/L	1,600	0
	Mass Sale: 12/31/20									
1869	Saline Store Signage	8/01/08	8,897				8,897	5 MO S/L	8,897	0
	Mass Sale: 12/31/20									
1876	Mic Bravo Cash Register	8/01/08	15,025				15,025	3 MO S/L	15,025	0
	Mass Sale: 12/31/20									
1888	Security Camera	8/01/08	5,450				5,450	3 MO S/L	5,450	0
	Mass Sale: 12/31/20									
1894	Compactor	9/01/08	27,267				27,267	3 MO S/L	27,267	0
1906	Saline Security System	2/01/09	5,070				5,070	5 MO S/L	5,070	0
	Mass Sale: 12/31/20									
1907	HP LaserJet M4345 Printer	3/01/09	3,048				3,048	3 MO S/L	3,048	0
	Mass Sale: 12/31/20									
1908	HP Compaq Laptop	3/01/09	1,036				1,036	3 MO S/L	1,036	0
	Mass Sale: 12/31/20									
1909	Kubota Lawn Mover 26 HP	5/01/09	11,545				11,545	4 MO S/L	11,545	0
1922	Security System Update	6/01/09	12,335				12,335	5 MO S/L	12,335	0
1933	Timekeeping System	1/01/10	19,446				19,446	3 MO S/L	19,446	0
	Mass Sale: 12/31/20									
1938	Baler Interlock Switch	2/01/10	3,314				3,314	3 MO S/L	3,314	0
1939	Stacking Chairs	2/01/10	1,415				1,415	3 MO S/L	1,415	0
1940	Picnic Tables	9/01/02	1,561				1,561	5 MO S/L	1,561	0
1941	Computers	2/01/10	2,090				2,090	2 MO S/L	2,090	0
	Mass Sale: 12/31/20									
1956	36 Inch Shred Containers	5/01/10	1,794				1,794	3 MO S/L	1,794	0
1965	Monsoon Edge & Shipping	7/01/10	1,223				1,223	3 MO S/L	1,223	0
	Mass Sale: 12/31/20									
1966	Microsoft Server	7/01/10	4,989				4,989	3 MO S/L	4,989	0
1967	Compaq Computer & Monitor	7/01/10	1,228				1,228	3 MO S/L	1,228	0
	Mass Sale: 12/31/20									
1968	25 Wire Bins	8/01/84	2,577				2,577	6 MO S/L	2,577	0
	Mass Sale: 12/31/20									
1974	HP Pro Book 4720 Laptop	9/01/10	1,139				1,139	3 MO S/L	1,139	0
	Mass Sale: 12/31/20									
2028	OSAS Upgrade	8/01/11	7,450				7,450	3 MO S/L	7,450	0
	Mass Sale: 12/31/20									
2029	2011 Ford Van	7/01/11	35,000				35,000	5 MO S/L	35,000	0
2033	Lunch Deduction Software	8/01/11	1,838				1,838	2 MO S/L	1,838	0
	Mass Sale: 12/31/20									
2036	Gondola Units	9/01/11	1,777				1,777	3 MO S/L	1,777	0
	Mass Sale: 12/31/20									
2038	Gondola Units	9/01/11	1,697				1,697	3 MO S/L	1,697	0
2041	Shopping Carts	9/01/11	1,588				1,588	3 MO S/L	1,588	0
	Mass Sale: 12/31/20									
2042	Guaranteed Pay Software	10/01/11	1,346				1,346	2 MO S/L	1,346	0
	Mass Sale: 12/31/20									
2053	Gondola Units	12/01/11	3,042				3,042	3 MO S/L	3,042	0
2056	Chrome/Black Stack Chairs	12/01/11	2,710				2,710	2 MO S/L	2,710	0
2091	Door Opener	1/01/12	1,035				1,035	5 MO S/L	1,035	0
2095	Chevrolet Wheelchair Van	2/01/12	14,575				14,575	6 MO S/L	14,575	0
2101	Windows Server & Battery Backup	5/01/12	1,111				1,111	3 MO S/L	1,111	0
	Mass Sale: 12/31/20									
2106	Dell Notebook	5/01/12	1,100				1,100	3 MO S/L	1,100	0
	Mass Sale: 12/31/20									
2107	Marquee Sign	9/01/12	1,700				1,700	2 MO S/L	1,700	0
	Mass Sale: 12/31/20									
2109	2011 Ford E350 Van	11/01/12	19,000				19,000	5 MO S/L	19,000	0
2110	Step Board for E350 Van	11/01/12	400				400	5 MO S/L	400	0
2114	Reconditioned Baler w/Con	11/01/12	64,495				64,495	3 MO S/L	64,495	0
2115	2007 Yale Forklift	2/01/13	10,000				10,000	5 MO S/L	10,000	0
2123	POS-System Upgrade Lambertville	10/29/13	2,663				2,663	3 MO S/L	2,663	0
	Mass Sale: 12/31/20									
2124	Gridwall, slats & hooks	9/25/13	2,711				2,711	3 MO S/L	2,711	0
	Mass Sale: 12/31/20									
2125	Gridwall & Hooks	9/25/13	1,160				1,160	3 MO S/L	1,160	0
	Mass Sale: 12/31/20									
2126	POS Upgrade at Monroe	12/16/13	2,663				2,663	3 MO S/L	2,663	0
	Mass Sale: 12/31/20									
2127	Gondola Unit	11/06/13	3,137				3,137	3 MO S/L	3,137	0



38-1646249

## Federal Asset Report

FYE: 12/31/2020 Mth: 12/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
2187	AMERICANA CO - SHOPPING CART Mass Sale: 12/31/20	10/20/15	114			114	3 MO S/L	114	0
2188	AMERICANA CO - SHOPPING CART Mass Sale: 12/31/20	10/20/15	114			114	3 MO S/L	114	0
2189	AMERICANA CO - SHOPPING CART Mass Sale: 12/31/20	10/20/15	114			114	3 MO S/L	114	0
2190	WHEELCHAIR LIFT ASSET #2154	10/13/15	9,821			9,821	5 MO S/L	8,348	1,473
2191	2015 FORD TRANSIT VAN	10/15/15	33,891			33,891	5 MO S/L	28,807	5,084
2192	Chrysler Town & Country	11/30/15	27,550			27,550	5 MO S/L	22,499	5,051
2193	LINC Carpeting for Purple	11/10/15	3,118			3,118	5 MO S/L	2,598	520
2194	2016 Toyota Camry	12/16/15	21,796			21,796	5 MO S/L	17,437	4,359
2195	Power poles in training center	1/01/15	2,245			2,245	20 MO S/L	561	112
2196	Horn/strobe/bell upstairs office	4/01/15	1,690			1,690	20 MO S/L	401	85
2197	GE 800 amp circuit breaker	9/17/15	3,180			3,180	20 MO S/L	676	159
2198	Donation signs - Saline store Sold/Scrapped: 12/31/20	10/01/15	1,515			1,515	5 MO S/L	1,288	227
2199	2015 Chrysler Town & Country	3/24/16	15,000			15,000	7 MO S/L	8,036	2,143
2200	Shopping Cart-Lambertville	4/21/16	142			142	5 MO S/L	104	29
2201	Shopping Cart-Lambertville	4/21/16	142			142	5 MO S/L	104	29
2202	Shopping Cart-Lambertville	4/21/16	142			142	5 MO S/L	104	29
2203	Shopping Cart-Lambertville	4/21/16	142			142	5 MO S/L	104	29
2204	Shopping Cart-Lambertville	4/21/16	142			142	5 MO S/L	104	29
2205	Shopping Cart-Lambertville	4/21/16	142			142	5 MO S/L	104	29
2206	Shopping Cart-Lambertville	4/21/16	142			142	5 MO S/L	104	29
2207	Shopping Cart-Lambertville	4/21/16	142			142	5 MO S/L	104	29
2208	Shopping Cart-Lambertville	4/21/16	142			142	5 MO S/L	104	29
2209	Shopping Cart-Lambertville	4/21/16	142			142	5 MO S/L	104	29
2210	Special Needs Wheelchair	5/08/16	1,963			1,963	5 MO S/L	1,440	392
2211	Replace automatic Sprinkler System	11/08/16	46,700			46,700	10 MO S/L	14,788	4,670
2212	Kitchen area including cabinetry	11/28/16	18,204			18,204	10 MO S/L	5,765	1,820
2213	Walkie Stackers-Adrian Sold/Scrapped: 12/31/20	2/28/17	7,000			7,000	5 MO S/L	3,967	1,400
2214	Walkie Stackers-Monroe Sold/Scrapped: 12/31/20	2/28/17	7,000			7,000	5 MO S/L	3,967	1,400
2215	Walkie Stackers-Saline Sold/Scrapped: 12/31/20	2/28/17	7,000			7,000	5 MO S/L	3,967	1,400
2216	Walkie Stackers-Lambertville	2/28/17	7,000			7,000	5 MO S/L	3,967	1,400
2217	Fixture additions at new building	6/16/17	53,277			53,277	5 MO S/L	26,639	10,655
2218	New Store Sign	6/28/17	25,428			25,428	15 MO S/L	4,238	1,695
2219	Clover POS systems-3	4/03/17	5,180			5,180	5 MO S/L	2,849	1,036
2220	Clover POS system-1	4/12/17	1,295			1,295	5 MO S/L	712	259
2221	Sign - Lambertville Store	9/30/18	4,500			4,500	10 MO S/L	563	450
2222	HVAC Infra Red Heaters - Adrian Warehou	12/01/18	33,765			33,765	7 MO S/L	5,226	4,823
2223	Door - Dundee Store	11/30/18	2,068			2,068	10 MO S/L	224	207
2224	Door lock	12/27/18	1,710			1,710	10 MO S/L	171	171
2225	Reception Middle Door	12/29/18	1,790			1,790	10 MO S/L	179	179
2226	Signage - Dundee Store	11/30/18	5,973			5,973	10 MO S/L	647	597
2227	Store Fixtures - Dundee	12/01/18	21,886			21,886	5 MO S/L	4,742	4,377
2228	Clover POS systems (5)	1/01/18	6,488			6,488	5 MO S/L	2,595	1,298
2229	Clover POS System - Dundee	6/08/18	1,295			1,295	5 MO S/L	410	259
2230	Wheelchair - Monroe	6/30/18	3,730			3,730	7 MO S/L	799	533
2234	Ford Transit Van w/Wheelchair Ramp	11/14/18	52,238			52,238	5 MO S/L	12,189	10,447
2235	2019 White Dodge Caravan	5/21/19	24,160			24,160	5 MO S/L	2,819	4,832
2236	2019 Granite Dodge Caravan	5/21/19	24,160			24,160	5 MO S/L	2,819	4,832
2237	2019 Red Dodge Caravan	5/21/19	24,160			24,160	5 MO S/L	2,819	4,832
2238	2019 Freightliner M2 106 Truck	11/20/19	74,400			74,400	10 MO S/L	620	7,440
2239	Valley Sign - Dundee	5/31/19	2,834			2,834	5 MO S/L	331	566
2240	Stanley Access Tech Door	1/28/19	5,160			5,160	5 MO S/L	946	1,032
2241	2017 Toro Grandstand Mower	4/17/19	4,000			4,000	5 MO S/L	533	800
2242	2017 Toro Grandstand Mower	4/17/19	4,000			4,000	5 MO S/L	533	800
2243	2017 Dodge Ram V8	3/18/20	22,120			22,120	5 MO S/L	0	3,318
2244	GW Costume	3/01/20	4,365			4,365	5 MO S/L	0	728
2245	New Era Technology Server	12/01/20	29,235			29,235	5 MO S/L	0	487
2246	New Era Tech Fortinet Firewall	12/01/20	15,408			15,408	5 MO S/L	0	257
2247	TechSoup Windows Server Data	12/01/20	450			450	5 MO S/L	0	8
2248	JC Mechanical Server	12/29/20	3,205			3,205	5 MO S/L	0	0
2249	Uline furniture board/comm room	3/15/20	6,650			6,650	7 MO S/L	0	752
2250	Carpet & Install Board	3/01/20	2,914			2,914	10 MO S/L	0	243
2251	Carpentry Concepts Comm	9/24/20	10,563			10,563	10 MO S/L	0	264
2252	True Colors Roof Repair	9/24/20	17,800			17,800	10 MO S/L	0	445
2253	Precision Epoxy Flooring	12/09/20	8,500			8,500	10 MO S/L	0	71

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**Federal Asset Report**

FYE: 12/31/2020 Mth: 12/31/2020

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
2254	Stanley Access Tech Donation	12/30/20	6,980			6,980	10 MO S/L	0	0
2255	Diversified Plastics Hamper-Adrian Store	12/16/20	9,408			9,408	5 MO S/L	0	0
2256	Monroe Sign - Monroe Store	1/01/20	2,686			2,686	5 MO S/L	0	537
2257	Clover - Monroe	9/24/20	1,695			1,695	5 MO S/L	0	85
2258	Clover - Lambertville	9/24/20	1,695			1,695	5 MO S/L	0	85
2259	Elan Hangars Unlimited - Saline	9/01/20	5,595			5,595	5 MO S/L	0	373
2260	Clover - Saline	9/24/20	3,390			3,390	5 MO S/L	0	170
2261	New Carpet - Saline	8/31/20	28,088			28,088	10 MO S/L	0	936
2262	Lighting Red - Saline	9/01/20	10,589			10,589	10 MO S/L	0	353
2263	Insignia Saline Indoor Sign - Saline	9/01/20	4,248			4,248	7 MO S/L	0	202
2264	Sullivan Fixtures & Installation - Saline	9/01/20	64,477			64,477	7 MO S/L	0	3,070
2265	Diversified Plastics - Saline	9/01/20	14,457			14,457	7 MO S/L	0	688
2266	PIPP mobile storage racks - saline	9/01/20	661			661	5 MO S/L	0	44
2267	PIPP Mobile storage racks - Saline	9/01/20	7,543			7,543	7 MO S/L	0	359
2268	Sullivan Fixtures & Installation - Saline	9/01/20	3,455			3,455	7 MO S/L	0	165
2269	Carpentry Concepts & Ceiling - Saline	9/01/20	13,564			13,564	10 MO S/L	0	452
2270	Elan Hangars Unlimited - Saline	9/01/20	2,389			2,389	5 MO S/L	0	159
2271	Valley Sign Outdoor - Saline	10/31/20	12,863			12,863	10 MO S/L	0	214
2272	Storage Racks Distribution Center	9/01/20	8,653			8,653	5 MO S/L	0	577
2273	Diversified Plastics Center - DC	12/16/20	8,448			8,448	5 MO S/L	0	0
	<b>Total Other Depreciation</b>		<u>4,575,856</u>			<u>4,575,856</u>		<u>2,675,039</u>	<u>236,716</u>
	<b>Total ACRS and Other Depreciation</b>		<u>4,575,856</u>			<u>4,575,856</u>		<u>2,675,039</u>	<u>236,716</u>
<b>Listed Property:</b>									
2233	2018 Toyota Corolla 4 Door	3/08/18	18,454			18,454	5 MO S/L	6,766	3,691
			<u>18,454</u>			<u>18,454</u>		<u>6,766</u>	<u>3,691</u>
	<b>Grand Totals</b>		4,662,636			4,662,636		2,742,359	242,628
	<b>Less: Dispositions and Transfers</b>		765,564			765,564		739,587	21,078
	<b>Less: Start-up/Org Expense</b>		0			0		0	0
	<b>Net Grand Totals</b>		<u>3,897,072</u>			<u>3,897,072</u>		<u>2,002,772</u>	<u>221,550</u>



Form <b>990</b>	<b>Event Income and Deduction Worksheet</b>	<b>2020</b>
Description <b>CASINO NIGHT</b>		

Name <b>GOODWILL INDUSTRIES OF SOUTHEASTERN</b>	Taxpayer Identification Number <b>38-1646249</b>
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Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

**Income & Expense Summary:**

1. Gross receipts or sales	1.	27,203
2. Advertising income	2.	
3. Circulation income	3.	
4. Other income	4.	
5. Returns and allowances	5.	
6. Contributions received	6.	
7. <b>Total revenue.</b> Add lines 1 through 6	7.	27,203
8. Cost of Goods Sold	8.	
9. Employment Expense	9.	
10. Fees for services	10.	
11. Indirect Expense	11.	
12. Depreciation Expense	12.	
13. Exempt Activity Expense	13.	
14. Fundraising Expense	14.	17,688
15. <b>Total expenses.</b> Add lines 8 through 14	15.	17,688
16. <b>Net Income/Loss.</b> Line 7 minus Line 15	16.	9,515

**Expense Details - Indirect Expense:**

Advertising and promotion	_____
Office	_____
Printing/publication/postage	_____
Info technology/Maintenance	_____
Royalties & License Fees	_____
Occupancy/Real Estate Taxes	_____
Travel & Repairs	_____
Travel/entertainment (officials)	_____
Conferences/meetings	_____
Interest	_____
Insurance	_____
<b>Total Indirect Expense</b>	_____

**Expense Details - Depreciation Expense:**

On investment property	_____
On non-investment property	_____
Amortization	_____
Depletion	_____
<b>Total Depreciation Expense</b>	_____

**Expense Details - Exempt Activity Expense:**

Repairs and Maintenance	_____
Bad debts	_____
Taxes/licenses	_____
Charitable contributions	_____
Dividend recd deductions	_____
Readership costs	_____
Other expenses	_____
<b>Total Exempt Activity Expense</b>	_____

**Expense Details - Fundraising Expense:**

Cash prizes	_____
Non-cash prizes	_____
Rent and facility costs	6,523
Food & beverages (Part II only)	150
Entertainment (Part II only)	_____
Other direct expenses	11,015
<b>Total Fundraising Expense</b>	17,688

**Expense Details - Cost of Goods Sold:**

Beginning inventory	_____
Purchases	_____
Labor	_____
Section 263A costs	_____
Other costs	_____
Ending inventory	_____
<b>Total Cost of Goods Sold</b>	_____

**Expense Details - Employment Expense:**

Compensation of officers	_____
Other salaries and wages	_____
Pension plan contributions	_____
Other employee benefits	_____
Payroll taxes	_____
<b>Total Employment Expense</b>	_____

**Expense Details - Fees for Services:**

Management	_____
Legal	_____
Accounting	_____
Lobbying	_____
Professional fundraising	_____
Investment management	_____
Other	_____
<b>Total Fees for Services</b>	_____

**Information is indicated for use on Form 990-T, Schedule A:**

- Part V, Debt Financing
- Part VI, Controlled Org Income
- Part VII, Investments for C(7)(9)(17)
- Part VIII, Exploited Activities
- Part IX, Advertising Income

**Allocation of Expense to Program Service Accomplishments:**

First	_____
Second	_____
Third	_____
All other	_____

Form <b>990</b>	<b>Two Year Comparison Report</b>	<b>2019 &amp; 2020</b>
For calendar year 2020, or tax year beginning _____, ending _____		

Name: **GOODWILL INDUSTRIES OF SOUTHEASTERN MICHIGAN, INC.** Taxpayer Identification Number: **38-1646249**

		2019	2020	Differences
<b>Revenue</b>	1. Contributions, gifts, grants	721,585	686,334	-35,251
	2. Membership dues and assessments			
	3. Government contributions and grants		55,800	55,800
	4. Program service revenue	6,387,991	4,609,854	-1,778,137
	5. Investment income	28,103	10,401	-17,702
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory		-4,900	-4,900
	8. Net income or (loss) from fundraising events	12,701	9,515	-3,186
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory			
	11. Other revenue	17,415	1,933	-15,482
	<b>12. Total revenue.</b> Add lines 1 through 11	<b>7,167,795</b>	<b>5,368,937</b>	<b>-1,798,858</b>
<b>Expenses</b>	13. Grants and similar amounts paid			
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.			
	16. Salaries, other compensation, and employee benefits	4,065,470	2,828,598	-1,236,872
	17. Professional fundraising fees			
	18. Other professional fees	28,270	37,634	9,364
	19. Occupancy, rent, utilities, and maintenance	771,092	852,049	80,957
	20. Depreciation and Depletion	242,822	245,005	2,183
	21. Other expenses	2,071,951	1,548,009	-523,942
	<b>22. Total expenses.</b> Add lines 13 through 21	<b>7,179,605</b>	<b>5,511,295</b>	<b>-1,668,310</b>
	<b>23. Excess or (Deficit).</b> Subtract line 22 from line 12	<b>-11,810</b>	<b>-142,358</b>	<b>-130,548</b>
<b>Other Information</b>	24. Total exempt revenue	7,167,795	5,368,937	-1,798,858
	25. Total unrelated revenue			
	26. Total excludable revenue	6,433,509	4,617,288	-1,816,221
	27. Total assets	2,876,715	3,530,263	653,548
	28. Total liabilities	1,694,487	2,490,393	795,906
	29. Retained earnings	1,182,228	1,039,870	-142,358
	30. Number of voting members of governing body	16	14	
	31. Number of independent voting members of governing body	16	14	
	32. Number of employees	537	406	
	33. Number of volunteers	29	16	