Public Disclosure Copy

EXTENDED TO NOVEMBER 15, 2023
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 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service

A F	or the	2022 calendar year, or tax year beginning and	ending					
B 0	heck if	C Name of organization		D Employer identifie	cation number			
_ a	pplicable	GOODWILL INDUSTRIES OF GREATER CLEVELA	ND					
	Addres	S AND EAST CENTRAL OHIO, INC.						
	Name change	Doing business as		34-09099	74			
	Initial return	,	Room/suite	1 .				
	Final return/	408 NINTH STREET S.W.		330-454-				
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	50,431,368.			
	Ameno	CANTON, OH 44/0/-4/99		H(a) Is this a group re				
	Application pendin	a		for subordinates				
		SAME AS C ABOVE		H(b) Are all subordinates in				
		mpt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) o	or 527	1 ′	list. See instructions			
	Vebsit			H(c) Group exemptio				
		organization: X Corporation Trust Association Other	L Year	of formation: 1918 N	A State of legal domicile: OH			
Pč	rt I	Summary	MADOLIED	DEODIE ON E	TITT D			
ø		Briefly describe the organization's mission or most significant activities: WE EN			LHEIK			
Governance	Ι .	JOURNEY TO INDEPENDENCE THROUGH THE SALE						
ern	l	Check this box if the organization discontinued its operations or dispos						
Š	ı			3	$\begin{array}{cccccccccccccccccccccccccccccccccccc$			
∞ಶ		Number of independent voting members of the governing body (Part VI, line 1b)			1771			
ies		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			14			
Activities		Total number of volunteers (estimate if necessary)			0.			
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			0.			
	В	Net unrelated business taxable income from Form 990-T, Part I, line 11		Prior Year	Current Year			
	8	Contributions and grants (Part VIII, line 1h)		10,215,905.	7,732,897.			
ine	l			37,701,380.	39,306,568.			
Revenue	l	Program service revenue (Part VIII, line 2g) nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		127,620.	123,666.			
Be		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		181,804.	329,738.			
	l	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		48,226,709.	47,492,869.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		49,415.	46,578.			
	l	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		21,871,337.	22,652,532.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
ben	b	Fotal fundraising expenses (Part IX, column (D), line 25) 107, 37	70.					
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		21,486,148.	22,732,572.			
		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		43,406,900.	45,431,682.			
	19	Revenue less expenses. Subtract line 18 from line 12		4,819,809.	2,061,187.			
Net Assets or Fund Balances			Ве	ginning of Current Year	End of Year			
sets	20	Total assets (Part X, line 16)		50,804,352.	57,140,742.			
t Ass	21	Total liabilities (Part X, line 26)		20,088,996.	26,083,622.			
<u>e</u> E	22	Net assets or fund balances. Subtract line 21 from line 20		30,715,356.	31,057,120.			
	ırt II	Signature Block						
		ties of perjury, I declare that I have examined this return, including accompanying schedules		•	knowledge and belief, it is			
true,	correc	and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.				
		Signature of officer		 Date				
Sig				Date				
Her	е	ANNEMARIE RICHARDS, PRESIDENT & CEO Type or print name and title						
			П	Date Check	PTIN			
De! ·		Print/Type preparer's name Preparer's signature PRIDGEMME MIGGE	l l	I				
Paid		BRIDGETTE MUGGE BRIDGETTE MUGGE	<u> </u>	.0/23/23 self-employ				
	arer	Firm's name SIKICH LLP Firm's address 274 WHITE POND DRIVE		Firm's EIN 3	6-3168081			
use	Only	AKRON, OH 44320-1118		Dhana na / 2	30)864-6661			
Mar	the I	S discuss this return with the preparer shown above? See instructions		I PHONE NO. (3	X Yes No			
iviay	ᇜᅜᅜ	S GIOGGO TINO FOLUITI WITH THE PERPARTI SHOWIT ADOVE! OFF HISHUCHOHS						

Pai	rt III Statement of Program Service Accomplishments	<u> </u>
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	WE EMPOWER PEOPLE ON THEIR JOURNEY TO INDEPENDENCE TH	
	GOODS, WHICH SUPPORTS EMPLOYMENT PROGRAMS AND FAMILY	SERVICES.
2	Did the organization undertake any significant program services during the year which were not listed on the	20
2	prior Form 990 or 990-EZ?	
	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 servi	ces? Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program service	es, 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.	22 767 652
4a		(Revenue \$ 38,767,658.)
	THRIFT STORE - COLLECTION AND PROCESSING OF USED GOODS STATIONS, TRAINING AND EMPLOYMENT FOR PERSONS IN VOCA	
	REHABILITATION PROGRAMS.	IIONAL
	KEHABIBITATION TROCKARD.	
	2 022 427 46 570	969 649
4b	(Code:) (Expenses \$3,022,437. including grants of \$46,578.) MISSION SERVICES - PROVIDES VOCATIONAL TRAINING AND A	
	WITH OBTAINING AND MAINTAINING EMPLOYMENT AND INDEPEND	
	INCLUDES TRAINING IN COMPUTER SKILLS, PARENTING, AND	
	ESTIMATED NUMBER OF INDIVIDUALS SERVED IN 2022: 14,90	
4c	(Code:) (Expenses \$ including grants of \$)	(Revenue \$
	(Cotto)	,
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 40,517,681.	
		Form 990 (2022)

Form 990 (2022)

AND EAST CENTRAL OHIO, INC.

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
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	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,			X
_	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			 ₩
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			37
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	<u> </u>		<u></u> -
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	– "		
13		18		x
10	1c and 8a? If "Yes," complete Schedule G, Part II	⊢ °		 ^ `
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	4.		v
00-	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		 ^
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			_v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		X

Part IV Checklist of Required Schedules (continued)

	(SONAMAS)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		163	140
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	\dot{r}	23	х	
24.5	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	21	
270	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	х	
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		х
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	210		
Ū	any tax-exempt bonds?	24c		х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
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? If "Yes," complete Schedule L, Part II	26		Х
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? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			,,
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	37
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	٥.		
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	200		v
27	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		х
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai		30	-23	Ь
	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 103			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	1c		
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Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 1771			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	an		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
-	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	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?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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

	Check if Schedule O contains a response or note to any line in this Part VI				X
Sec	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	14			
	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	Enter the number of voting members included on line 1a, above, who are independent	14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other				
	officer, director, trustee, or key employee?		2		Х
3	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?		3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		Х
6	Did the organization have members or stockholders?	i i	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or				
	more members of the governing body?		7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or				
	persons other than the governing body?		7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the				
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)				
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	Х	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	orm?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		12b	X	
С					
	on Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?	[13	X	
14	Did the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a	X	
	Other officers or key employees of the organization		15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a				
	taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's				
	exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed OH				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 5	01(c)(3)s	only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.				
	Own website Another's website X 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 po	licy, and	financ	cial	
	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				
	MICHELE TOKOS - 330-445-1043				
	408 NINTH STREET S.W., CANTON, OH 44707-4799				

Form 990 (2022) 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEĆ) of more than \$100,000 from the organization and any related organizations.

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

- 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 the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	(do box	not c	(C Posi heck i	ition	than o	one n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer Officer		Highest compensated supply		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) ANNEMARIE RICHARDS PRESIDENT & CEO	2.00			х				341,764.	0.	15,733.
(2) MARK TREW	40.00			Δ				341,704.	0.	13,733.
COO	2.00					х		194,292.	0.	23,480.
(3) TANZALEA DANIELS	40.00									23,1331
CFO, ASST. TREASURER	2.00			х				172,924.	0.	22,541.
(4) MAUREEN ATER	40.00							, -	-	, -
VP OF MARKETING AND DEVELO						х		117,354.	0.	22,541.
(5) BRYANT TAYLOR	40.00									•
VP OF DONATED GOODS						Х		114,094.	0.	24,968.
(6) ELLEN MCCARTHY	40.00									
VP OF DIVERSITY, EQUITY &						Х		100,676.	0.	17,742.
(7) LUKE CLELAND	2.00									
CHAIRPERSON	2.00	Х		Х				0.	0.	0.
(8) KATIE SPAHNIE	2.00									
VICE CHAIRPERSON	2.00	Х		Х				0.	0.	0.
(9) MATTHEW LONG	2.00									
TREASURER	2.00	Х		Х				0.	0.	0.
(10) MARCIE FINNEY	2.00								_	_
SECRETARY	2.00	Х		Х				0.	0.	0.
(11) CARRIE ROSENFELT	2.00									
DIRECTOR		Х						0.	0.	0.
(12) CLEO LUCAS	2.00									
DIRECTOR		Х						0.	0.	0.
(13) DR STACY FEINER	2.00								•	•
DIRECTOR		Х						0.	0.	0.
(14) TAYLOR SCHAUER	2.00	3,7							0	0
DIRECTOR (15) BURNING	2 00	Х						0.	0.	0.
(15) TIFFANY EVANS	2.00	Х						0.	0	0
OIRECTOR (16) DAVID HENKEL	2.00	Λ						0.	0.	0.
DIRECTOR	4.00	Х						0.	0.	0.
(17) DEBJANI ROY	2.00	^						0.	0.	<u> </u>
DIRECTOR	2.00	Х						0.	0.	0.
222007 12-12-22		22	l	l		I	l		0.	Form 990 (2022)

232007 12-13-22

Form **990** (2022)

Form 990 (2022)

Dort VIII	CHITITITI			_			•		34 0303	J/T Tage
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	anc	l Hi	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours per week	box	not c , unle: cer ar	ss per	more son i	than o	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) EDWARD SMITH	2.00									
DIRECTOR		Х						0.	0.	0.
(19) GREG LUNTZ DIRECTOR	2.00	х						0.	0.	0.
(20) SHANA MARBURY	2.00								<u> </u>	
DIRECTOR		Х						0.	0.	0.
								1 041 104		107.005
1b Subtotal								1,041,104.	0.	127,005.
c Total from continuation sheets to Part VI								1,041,104.	0.	0. 127,005.
d Total (add lines 1b and 1c)		<u></u>						<u> </u>	<u> </u>	121,000.

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

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

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

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

5 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\		(C)
(A) Name and business address	(B) Description of services	(C) Compensation
inalite allu pusitess address	Description of services	Compensation
J.B. HARRISON PROPERTIES, LLC, PO BOX 364,	LANDLORD / PROPERTY	
151 BODMAN PLACE, STE 201, NC 28480	MGMT	456,589.
M-ST CLAIR LLC, 30100 CHAGRIN BLVD STE	LANDLORD / PROPERTY	
201, PEPPER PIKE, OH 44124	MGMT	413,171.
J J & W X LTD, C/O WAYNE WHIPKEY, 10035	LANDLORD / PROPERTY	
SOUTHWYCK AVE NW, NORTH CANTON, OH	MGMT	388,907.
LEXI SALES, LLC, 9040 TOWN CENTER PARKWAY,		
BRADENTON, FL 34202	CLOSEOUTS	376,341.
CS CENTER LLC, 151 BODMAN PLACE, STE 201,	LANDLORD / PROPERTY	
RED BANK, NJ 07701	MGMT	372,729.
2 Total number of independent contractors (including but not limited to those lister	d above) who received more than	
\$100,000 of compensation from the organization 23		
		000

Form **990** (2022)

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Form 990 (2022) AND EAS
Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
		Officer if Schedule O contains a response	or note to any iin	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under
							sections 512 - 514
nts nts	1 a	a Federated campaigns 1a					
irai our	k	b Membership dues 1b					
A, G	C	c Fundraising events 1c					
ar /	(d Related organizations 1d					
Contributions, Gifts, Grants and Other Similar Amounts	•	e Government grants (contributions) 1e	2,040,303.				
Sign	f	f All other contributions, gifts, grants, and					
ber		similar amounts not included above 1f	5,692,594.				
걸		g Noncash contributions included in lines 1a-1f	5,215,043.				
Sor	ŀ	h Total. Add lines 1a-1f		7,732,897.			
<u> </u>		Totali Add in 100 Fd Tr	Business Code	, ,			
•	2 8	a THRIFT STORE SALES	459510	38,767,658.	38767658.		
/ice	2 4	b PROGRAM FEES, NON-GOVERNMENT	624310	310,964.	310,964.		
er, ue			624310	227,946.	227,946.		
n S /en	(·	024310	227,540.	227,540.		
yraı Re	(d					
Program Service Revenue	•	e					
Д		f All other program service revenue					
	9	g Total. Add lines 2a-2f		39,306,568.			
	3	Investment income (including dividends, intere					
		other similar amounts)		186,432.			186,432.
	4	Income from investment of tax-exempt bond p	roceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	a Gross rents 6a					
	k	b Less: rental expenses 6b					
	(c Rental income or (loss) 6c					
		d Net rental income or (loss)					
		a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 2,387,152.	488,581.				
	ŀ	b Less: cost or other basis	·				
ō	_	and sales expenses 7b 2,417,382.	521,117.				
au n	,	c Gain or (loss) 7c -30,230.					
Revenue		d Net gain or (loss)		-62,766.			-62,766.
F.				02,7001			02,7001
ther	8 6	a Gross income from fundraising events (not					
ŏ		including \$ of					
		contributions reported on line 1c). See					
	_	Part IV, line 18					
		b Less: direct expenses8b					
		c Net income or (loss) from fundraising events	T				
	9 a	a Gross income from gaming activities. See					
		Part IV, line 199a					
	k	b Less: direct expenses 9b					
	(c Net income or (loss) from gaming activities	T				
	10 a	a Gross sales of inventory, less returns					
		and allowances10a	9				
	k	b Less: cost of goods sold10k					
	(c Net income or (loss) from sales of inventory					
"			Business Code				
ino e	11 a	a MISCELLANEOUS	900099	329,738.	329,738.		
ane	k	b					
ells eve		с					
Miscellaneous Revenue		d All other revenue					
2		e Total. Add lines 11a-11d		329,738.			
	12	Total revenue. See instructions		47,492,869.	39636306.	0.	123,666.

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Part IX | Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp			nplete column (A).	
	Check if Schedule O contains a respor		this Part IX	(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	46,578.	46,578.		
3	Grants and other assistance to foreign	•	,		
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees	552,962.		552,962.	
6	Compensation not included above to disqualified	002,0020		332,73321	
Ū	persons (as defined under section 4958(f)(1)) and				
	40E0(-)(0)(D)				
7	Other salaries and wages	18 786 852.	16,738,675.	2,017,904.	30,273.
8	Pension plan accruals and contributions (include	_0,.00,002.			20,2,5
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	1,673,862.	1,496,973.	173,853.	3,036.
		1,638,856.		204,329.	2,906.
10	Payroll taxes	1,000,000	1, 1 , 1, 0, 2, 1, 0, 2, 1, 0	204,327•	2,500.
11	Fees for services (nonemployees):				
	Management				
b	Legal				
	Accounting	3 000		3,900.	
d	Lobbying	3,900.		3,900.	
е	Professional fundraising services. See Part IV, line 17	40 026		40.026	
	Investment management fees	40,926.		40,926.	
g	Other. (If line 11g amount exceeds 10% of line 25,	1 170 706	F74 170	E01 061	7 166
	column (A), amount, list line 11g expenses on Sch 0.)	1,172,706.		591,061.	7,466. 21,024.
12	Advertising and promotion	765,668.	631,654.	112,990.	21,024.
13	Office expenses	1,176,662.	971,771.	201,607.	3,284.
14	Information technology				
15	Royalties	6 075 406	6 770 460	06.026	
16	Occupancy	6,875,496.		96,036.	404
17	Travel	219,626.	172,431.	46,711.	484.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
10	Conferences, conventions, and meetings				
19 20		132,859.	132,859.		
21	Interest Payments to affiliates	168,683.		31,357.	
22	Depreciation, depletion, and amortization	1,677,015.		464,549.	
23	Insurance	303,704.	246,911.	56,793.	
23 24	Other expenses. Itemize expenses not covered	303,704.	240,311.	30,733.	
24	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 0.) COST OF DONATED GOODS	5,215,043.	5,215,043.		
a	RETAIL SUPPLIES	3,163,193.			
b	REPAIRS AND MAINTENANCE	1,515,392.	1,407,283.	108,109.	
C	REPAIRS AND MAINTENANCE	1,313,392.	1,407,203.	100,109.	
d	All other cynones	301,699.	159,258.	103,544.	32 207
e or	All other expenses Add lines 1 through 24s	45,431,682.		4,806,631.	38,897. 107,370.
<u>25</u>	Total functional expenses. Add lines 1 through 24e	4J,4JI,004.	±0,J1,001.	±,000,031.	101,310.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2022

Form 990 (2022)

Form 990 (2022) Part X Balance Sheet

-ar	t X	Balance Sneet					
		Check if Schedule O contains a response or note	to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			3,928,803.	1	2,023,120
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net			361,591.	4	294,478
	5	Loans and other receivables from any current or fo					
		trustee, key employee, creator or founder, substar					
		controlled entity or family member of any of these		5			
	6	Loans and other receivables from other disqualifie					
		under section 4958(f)(1)), and persons described in		6			
2	7	Notes and loans receivable, net			0.	7	181,563
Assets	8	Inventories for sale or use			469,467.	8	469,331
ť	9				262,402.	9	454,948
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D					
	b	Less: accumulated depreciation		19,251,783.	17,550,865.	10c	17,139,370
	11	Investments - publicly traded securities			14,315,658.	11	13,745,071
	12	Investments - other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11			13		
	14	Intangible assets	40.045.566	14	00 000 000		
	15	Other assets. See Part IV, line 11			13,915,566.	15	22,832,863
4	16	Total assets. Add lines 1 through 15 (must equal			50,804,352.	16	57,140,74
	17	Accounts payable and accrued expenses		1,334,029.	17	1,460,71	
	18	Grants payable			18		
	19	Deferred revenue			C 400 222	19	2 027 01
	20	Tax-exempt bond liabilities			6,499,332.	20	3,037,81
	21	Escrow or custodial account liability. Complete Pa				21	
:	22	Loans and other payables to any current or former					
		trustee, key employee, creator or founder, substar					
		controlled entity or family member of any of these		22			
•	23	Secured mortgages and notes payable to unrelate		· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrelated t	-			24	
	25	Other liabilities (including federal income tax, paya					
		parties, and other liabilities not included on lines 1 of Schedule D	7-24).	Complete Part X	12,255,635.	25	21,585,095
	26	Total liabilities. Add lines 17 through 25			20,088,996.		26,083,622
+	20	Organizations that follow FASB ASC 958, check			20,000,330.	20	20,005,022
3		and complete lines 27, 28, 32, and 33.	V Here				
	27				28,769,203.	27	29,438,313
	28	Net assets with donor restrictions	1,946,153.	28	1,618,809		
		Organizations that do not follow FASB ASC 958					
5		and complete lines 29 through 33.					
5	29	Capital stock or trust principal, or current funds		ľ		29	
}	30	Paid-in or capital surplus, or land, building, or equi				30	
έl	31	Retained earnings, endowment, accumulated inco				31	
Net Assets of Fund balances	32	Total net assets or fund balances			30,715,356.	32	31,057,120
-	33				50,804,352.	33	57,140,742

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI					X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,49			
2	Total expenses (must equal Part IX, column (A), line 25)	45	,43	1,6	82.		
3	Revenue less expenses. Subtract line 2 from line 1	3	2	,06	<u>1,1</u>	87.	
4	20						
5	Net unrealized gains (losses) on investments	5	-1	,33	2,2	18.	
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9		-38	7,2	05.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	31	,05	7,1	20.	
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII					X	
					Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.					
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					Х	
	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:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?			2b	Х		
	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:						
	Separate basis X Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for 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 Sche	edule C) .				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?						
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed auc	dit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b			

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

GOODWILL INDUSTRIES OF GREATER CLEVELAND

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

AND EAST CENTRAL OHIO, 34-0909974 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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). X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990) 2022

AND EAST CENTRAL OHIO, INC.

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

(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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	` ,	, ,	, ,	, ,	` '	
	membership fees received. (Do not						
	include any "unusual grants.")	7638411.	7169508.	5082556.	10204354.	7732897.	37827726.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	7638411.	7169508.	5082556.	10204354.	7732897.	37827726.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						37827726.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	7638411.	7169508.	5082556.	10204354.	7732897.	37827726.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	58,388.	119,644.	69,361.	132,047.	186,432.	565,872.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	346,303.	275,463.	1287588.	181,804.		
11	Total support. Add lines 7 through 10						40814494.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12 174	,537,967.
13	First 5 years. If the Form 990 is for th	e organization's fir	st, second, third, f	ourth, or fifth tax y	year as a section 50	01(c)(3)	
	organization, check this box and stop						
Sec	tion C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2022 (li					14	92.68 %
	Public support percentage from 2021					15	92.21 %
16a	16a 33 1/3% support test - 2022. 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	b 33 1/3% support test - 2021. 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 qual						
17a	10% -facts-and-circumstances test	_					
	and if the organization meets the facts			=	· ·	VI how the organiz	zation
	meets the facts-and-circumstances te	· ·	•				
b	10% -facts-and-circumstances test	_					10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circu		-	•	•		
18	Private foundation. If the organization	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box ar		(Form 990) 2022

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Schedule A (Form 990) 2022 AND EAST CENTRAL OHIO, INC.

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.)	

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	A Amounts included on lines 1, 2, and 3 received from disqualified persons						
k	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						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
	dross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First 5 years. If the Form 990 is for the	•		•			
	check this box and stop here						
	ction C. Computation of Publi					Т Т	
	Public support percentage for 2022 (I		•	column (f))		15	<u>%</u>
	Public support percentage from 2021					16	%
	ction D. Computation of Inves			40		T 4= T	
	Investment income percentage for 20					17	<u>%</u>
18	, ,					18	<u>%</u>
19a	a 33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2021. If the						
20	line 18 is not more than 33 1/3%, che						

232023 12-09-22

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. 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? If "Yes," provide detail in Part VI.
- 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? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

 If "Yes." complete Part I of Schedule L (Form 990).
- 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))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 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)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
•		
2		
За		
3b		
3с		
_		
4a		
4b		
4c		
_		
5a		
5b		
5c		
6		
7		
8		
9a		
Ju		
9b		
9c		
40-		
10a		
10b		
ule A (Forn	n 990)	2022

Pai	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
•	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		163	140
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	1		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization expects for the bonefit of any supported expenization other than the supported.	•		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
000	Tion 6. Type it Supporting Organizations		· ·	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
800	the supported organization(s). tion D. All Type III Supporting Organizations	_1		
360	tion b. All Type III Supporting Organizations		1	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see inst	truction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b				
	of its supported organizations? If "Ves " describe in Part VI the role played by the organization in this regard	3b		

	dule A (Form 990) 2022 AND EAST CENTRAL OHIO, I			34-0909974 Page 6
Pa	, , , , , , , , , , , , , , , , , , , ,			
1	Check here if the organization satisfied the Integral Part Test as a qualifying t	rust or	n Nov. 20, 1970 (<i>explain i</i>	n Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must co	omplet	e Sections A through E.	
Sect	on 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	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	on 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	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount 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	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on 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	Distributable Amount. 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	integra	ted Type III supporting or	ganization (see
	instructions).	-	-	

Schedule A (Form 990) 2022

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 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 6 7 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 9 Distributable amount for 2022 from Section C, line 6 10 10 Line 8 amount divided by line 9 amount (i) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Amount for 2022 Pre-2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2022 **a** From 2017 **b** From 2018 c From 2019 **d** From 2020 e From 2021 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2022 distributable amount i Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2022 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2022 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 **b** Excess from 2019 c Excess from 2020

Schedule A (Form 990) 2022

d Excess from 2021e Excess from 2022

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AND EAST CENTRAL OHIO, INC.

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;	<u> </u>
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.)	
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:	
MISCELLANEOUS	
2018 AMOUNT: \$ 346,303.	
2019 AMOUNT: \$ 275,463.	
2020 AMOUNT: \$ 1,287,588.	
2021 AMOUNT: \$ 181,804.	
2022 AMOUNT: \$ 329,738.	

SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nam	ne of orga			INDUSTRIES OF CENTRAL OHIO,		/ELAND E	imployer identification number $34-0909974$
Pa	rt I-A	Complet	te if the ora	anization is exempt un	der section 501(c)	or is a section 527	
1 2	Provide a	a description	of the organiza	ation's direct and indirect poli	tical campaign activities i	in Part IV.	\$
Pa	rt I-B	Complet	te if the org	anization is exempt un	der section 501(c)(3).	
1	Enter the	e amount of	any excise tax i	ncurred by the organization u	nder section 4955		. \$
				ncurred by organization mana			
3	If the org	anization ind	curred a section	4955 tax, did it file Form 472	20 for this year?		Yes No
							Yes No
	o If "Yes," ort I-C	describe in F	Part IV.	anization is exempt un	dor coation 501(a)	eveent section 50	11(0)(3)
				by the filing organization for szation's funds contributed to			. Ф
2		function activ		zation's funds contributed to	*		\$
3	•			Add lines 1 and 2. Enter here			Ψ
Ū		•	•			•	\$
4				1120-POL for this year?			
5	made pa	lyments. For tions receive	each organizat d that were pro	ployer identification number (on listed, enter the amount p mptly and directly delivered t dditional space is needed, pr	paid from the filing organize o a separate political organize	zation's funds. Also ente anization, such as a sep	er the amount of political
		(a) Name		(b) Address	(c) EIN	(d) Amount paid fro filing organization funds. If none, enter	s contributions received and
-							

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2022

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Schedule C (Form 990) 2022

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Part II-A Complete if the organisection 501(h)).	anization is exe	mpt under section	n 501(c)(3) and file	d Form 5768 (el	ection under
	· ·	•	n Part IV each affiliated	group member's nam	ne, address, EIN,
B Check if the filing organizat	ion checked box A a	and "limited control" pro	ovisions apply.		
	s on Lobbying Expe itures" means amo	enditures unts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public opinion	(grassroots lobbying)			
b Total lobbying expenditures to influ		1 (1: 1111:)			
c Total lobbying expenditures (add lin	•				
d Other exempt purpose expenditure					
e Total exempt purpose expenditures					
f _Lobbying nontaxable amount. Ente					
If the amount on line 1e, column (a) or		bbying nontaxable am			
Not over \$500,000		f the amount on line 1e.			
Over \$500,000 but not over \$1,000	,000 \$100,0	000 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,50	00,000 \$175,0	000 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0		000 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000	0,000.			
			_		
g Grassroots nontaxable amount (enth Subtract line 1g from line 1a. If zero	•				
i Subtract line 1f from line 1c. If zero	or less, enter -0-				
j If there is an amount other than zer					_
reporting section 4911 tax for this y					Yes No
(Some organizations th	at made a section	veraging Period Under 501(h) election do not rate instructions for li	have to complete all o	f the five columns b	elow.
	Lobbying Expe	enditures During 4-Ye	ar Averaging Period		_
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2022

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

j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred under section 4912 d If the filing organization incurred a section 4912 tax, did if file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization agree to carry over lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? 4 Dues, assessments and similar amounts from members 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 4 Current year 2 De Carryover from last year 2 De Carryover from last year 2 De Carryover from last year 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2 exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? 5 Taxable amount of lobbying and political expenditures. See instructions 5 Taxable amount of lobbying and political expenditures. See instructions 5 Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B	For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(k	o)
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? X X	of the lobbying activity.	Yes	No	Amo	ount
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? I Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? bif "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A] Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 1 Dues, assessments and similar amounts from members 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 503(e)(1)(A) notices of nondeductible section 162(e) dues 4 Carryover from last year c Total A Aggregate amount reported in section 603(e)(1)(A) notices of nondeductible lobbying and political expenditures not nondeductible lobbying and political expenditures not of nondeductible lobbying and political expenditures not of nondeductible lobbying and political expenditures next year? 5 Taxable amount o	1 During the year, did the filing organization attempt to influence foreign, national, state, or				
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
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.
Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

GOODWILL INDUSTRIES OF GREATER CLEVELAND AND EAST CENTRAL OHIO, INC.

Employer identification number 34-0909974

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		ilar Funds or Ad	counts. Complete if the
		(a) Donor advised fu	ınds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in	n donor advised fund	ds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ac	lvisors in writing that grant f	funds can be used o	nly
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any ot	her purpose conferr	ing
	impermissible private benefit?			Yes No
Pai			n Form 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organizatio	`		
	Preservation of land for public use (for example, recreat	ion or education)	reservation of a histo	orically important land area
	Protection of natural habitat	Pı	reservation of a cert	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualific	ed conservation contribution	n in the form of a co	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
	Number of conservation easements on a certified historic stru			2c
d	Number of conservation easements included in (c) acquired at			
_	historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or term	inated by the organi	ization during the tax
	year			
4	Number of states where property subject to conservation ease			
5	Does the organization have a written policy regarding the periodic little and		•	
•	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and e	nforcing conservation	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforc	ing conservation ea	sements during the year
		3	3	J ,
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of	section 170(h)(4)(B)	(i)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue	and expense statem	nent and
	balance sheet, and include, if applicable, the text of the footnote	ote to the organization's fina	ancial statements the	at describes the
_	organization's accounting for conservation easements.			
Pai	t III Organizations Maintaining Collections of		ires, or Other S	imilar Assets.
	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under FASB ASC 958	•		
	of art, historical treasures, or other similar assets held for publ			nce of public
	service, provide in Part XIII the text of the footnote to its finance			
b	If the organization elected, as permitted under FASB ASC 958	•		
	art, historical treasures, or other similar assets held for public	exhibition, education, or res	search in furtherance	e of public service,
	provide the following amounts relating to these items:			•
	(i) Revenue included on Form 990, Part VIII, line 1			
_				'
2	If the organization received or held works of art, historical trea			provide
	the following amounts required to be reported under FASB AS			•
a	Revenue included on Form 990, Part VIII, line 1			
b	Assets included in Form 990, Part X			\$

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

Schedule D (Form 990) 2022

GOODWILL INDUSTRIES OF GREATER CLEVELAND 34-0909974 Page 2 AND EAST CENTRAL OHIO, INC. Schedule D (Form 990) 2022 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 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): Public exhibition Loan or exchange program b Scholarly research Other Preservation for future generations С Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 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? 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 If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1c 1d Additions during the year Distributions during the year 1e Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes Nο If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. 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 **1a** Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment Permanent endowment Term endowment 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 No organization by: (i) Unrelated organizations 3a(i) (ii) Related organizations 3a(ii) **b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b Describe in Part XIII the intended uses of the organization's endowment funds Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10

Complete if the organization answered	on place if the digarization and words are on the one of the control of the contr								
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value					
1a Land		1,915,266.		1,915,266.					
b Buildings		17,384,296.	17,384,296.	0.					
c Leasehold improvements		8,806,534.	1,111,393.	7,695,141.					
d Equipment		7,590,763.	378,567.	7,212,196.					
e Other		694,294.	377,527.	316,767.					
Total. Add lines 1a through 1e. (Column (d) must equa	17,139,370.								

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 AND EAST CEN	NTRAL OHIO, I	NC. 3	4-0909974 Page 3
Part VII Investments - Other Securities.			У.
Complete if the organization answered "Yes" of		T	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	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 e	end-of-year market value
(1)			•
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1) BENEFICIAL INTEREST IN TRU	JST		1,287,025.
(2) DEPOSITS			206,712.
(3) RIGHT TO USE ASSET			21,339,124.
(4)			
(5)			
(6)			
(7)			
(8)			
<u>(9)</u>			22 022 061
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	<u>15.)</u>		22,832,861.
Complete if the organization answered "Yes" of	on Form 000 Part IV line	110 or 11f Soo Form 000 Part V line	05
(-) Description of Polyther	on Form 990, Fart IV, line	The of Thi. See Form 990, Fart A, line 2	(b) Book value
			(b) Book value
(1) Federal income taxes (2) LEASE LIABILITY			21,585,095.
			21,303,033.
(3)			+
(4)			+
			+
(7)			
(9)			
(9) Total, (Column (h) must equal Form 990, Part X, col. (R) line	25.)		21,585,095.

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 D (Form 990) 2022

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF PERPETUAL TRUST -387,205.

Schedule D (Form 990) 2022

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.
GOODWILL INDUSTRIES OF GREATER CLEVELAND

2022

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Schedule I (Form 990) 2022

AND	34-0909974								
Part I General Information									
1 Does the organization maint	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection								
criteria used to award the gi	rants or assistance?						X Yes No		
	nization's procedures for mor								
	Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any								
· · · · · · · · · · · · · · · · · · ·	recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.								
1 (a) Name and address of or or government	ganization (b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
2 Enter total number of sectio3 Enter total number of other	In 501(c)(3) and government or organizations listed in the line	•	e line 1 table	<u>I</u>	<u> </u>				

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

GOODWILL INDUSTRIES OF GREATER CLEVELAND

Schedule I (Form 990) 2022 AND EAST CI

AND EAST CENTRAL OHIO, INC. 34-0909974

Part III Grants and Other Assistance to Domestic Individuals. Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	90, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
ASSISTANCE TO INDIVIDUALS	1717	46,578.	0.		
Part IV Supplemental Information. Provide the information requ	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	lditional information.	
PART I, LINE 2:					
GRANTS ARE MONITORED FOR APPROPRIATE	TE USE AS	STATED IN	THE GRANT	•	

Page 2

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

GOODWILL INDUSTRIES OF GREATER CLEVELAND AND EAST CENTRAL OHIO, INC.

Employer identification number 34-0909974

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	Х	
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	_		37
	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			7
	The organization?	6a		X
b	Any related organization?	6b		Х
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	_		v
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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Schedule J (Form 990) 2022

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

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W	I-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ANNEMARIE RICHARDS	(i)	341,764.	0.	0.	0.	15,733.	357,497.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MARK TREW	(i)	194,292.	0.	0.	0.	23,480.	217,772.	0.
C00	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) TANZALEA DANIELS	(i)	172,924.	0.	0.	0.	22,541.	195,465.	0.
CFO, ASST. TREASURER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 4B:
ANNEMARIE RICHARDS PARTICIPATES IN A 457(F) AND 457(B) RETIREMENT PLAN.
TANZALEA DANIELS, AND MARK TREW ARE APRTICIPANTS IN THE 457(B) RETIREMENT
PLAN.

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2022 Open to Public Inspection

GOODWILL INDUSTRIES OF GREATER CLEVELAND Name of the organization **Employer identification number** 34-0909974 AND EAST CENTRAL OHIO, INC. Part I **Bond Issues** (a) Issuer name (c) CUSIP # (f) Description of purpose (g) Defeased (h) On behalf (i) Pooled (b) Issuer EIN (d) Date issued (e) Issue price of issuer financing Yes No Yes No Yes No CLEVELAND - CUYOHOGA REMODEL/PURCHASE A COUNTY PORT AUTHORITY NONEAVAIL 04/28/17 3,890,000. OF NEW FACILITIES Х Х X D Proceeds В C D 240,000. **1** Amount of bonds retired Amount of bonds legally defeased 3,890,000 Total proceeds of issue Gross proceeds in reserve funds Capitalized interest from proceeds 6 Proceeds in refunding escrows 157,913. Issuance costs from proceeds 8 Credit enhancement from proceeds **9** Working capital expenditures from proceeds 3,890,000. Capital expenditures from proceeds Other spent proceeds Other unspent proceeds 2016 13 Year of substantial completion No Yes Yes No Yes No Yes No 14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, Х if issued prior to 2018, a current refunding issue)? 15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if Х issued prior to 2018, an advance refunding issue)? Х Has the final allocation of proceeds been made? Does the organization maintain adequate books and records to support the Х

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Schedule K (Form 990) 2022

final allocation of proceeds?

34-0909974

Par	t III Private Business Use								
			A	I	3	O	С	Γ	D
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		X					i	
За	Are there any management or service contracts that may result in private							1	
	business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of								
	bond-financed property?		Х					i	
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
	outside counsel to review any research agreements relating to the financed property?							i	
4	Enter the percentage of financed property used in a private business use by entities		•		•		·		
	other than a section 501(c)(3) organization or a state or local government		%		%		%	i	%
5	Enter the percentage of financed property used in a private business use as a		-						
	result of unrelated trade or business activity carried on by your organization,								
	another section 501(c)(3) organization, or a state or local government		%		%		%		%
6	Total of lines 4 and 5		%		%		%		%
7			Х						
	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		х						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or		•				1		
	disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
	sections 1.141-12 and 1.145-2?							i	
9	Has the organization established written procedures to ensure that all								
	nonqualified bonds of the issue are remediated in accordance with the								
	requirements under Regulations sections 1.141-12 and 1.145-2?		х						
Par	t IV Arbitrage								,L
			A	ı	3	(С	1	 D
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		Х						
2	If "No" to line 1, did the following apply?		•		•		·		
	Rebate not due yet?		Х						
	Exception to rebate?		Х						
	No rebate due?		Х						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was		•		•				•
	performed								
3	Is the bond issue a variable rate issue?		Х						

GOODWILL INDUSTRIES OF GREATER CLEVELAND AND EAST CENTRAL OHIO, INC.

Schedule K (Form 990) 2022

34-0909974

Schedule K (Form 990) 2022 AND EAST CENTRAL OHIO, INC.			34-0)909974				Page 3
Part IV Arbitrage (continued)								
		4	Е	3			D)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No No
hedge with respect to the bond issue?		Х						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the								
requirements of section 148?		X						
Part V Procedures To Undertake Corrective Action		•	•	•		•	·	
		4	E	3			D)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?		X						
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	K. See instru	uctions.					
	,							
	,							
	,						,	

Schedule K (Form 990) 2022

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

Name of the organization GOODWILL INDUSTRIES OF GREATER CLEVELAND AND EAST CENTRAL OHIO, INC.

Employer identification number 34 - 0909974

Pai	rt I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method of de noncash contribu		_	•
		арріісавіе		Form 990, Part VIII, line 1g	Horicasii continbu	tion and	Junta	<u> </u>
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	X		5,215,043.	THRIFT VALU	E		
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	I						
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy	I						
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
<u>28</u> 29	Other () Number of Forms 8283 received by the organ	ization during	the tax year for e	ontributions				
23	for which the organization completed Form 8	•	,					
	for which the organization completed form of	200, 1 ait v, L	once Acknowledg	ement 29			/es	No
30a	During the year, did the organization receive	by contributio	n any property rep	orted in Part I lines 1 throug	h 28 that it			110
	must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a							
b								X
31	77							
	Does the organization hire or use third partie				***************************************			
	contributions?		_	•		32a		Х
b								
33	If the organization didn't report an amount in	column (c) fo	r a type of property	for which column (a) is chec	cked,			
	describe in Part II.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

GOODWILL INDUSTRIES OF GREATER CLEVELAND

Schedule M	(Form 990) 2022	AND	EAST	CENTRAL	OHIO,	INC.	34-0909974	Page 2
Part II	Supplemental	Inforr	nation.	Provide the info	rmation red	uired by Part	I, lines 30b, 32b, and 33, and whether the organization tems received, or a combination of both. Also completes	on
	is reporting in Part	L colun	nn (h) the	number of cont	ributions th	e number of i	tems received, or a combination of both. Also complete	ete
	this part for any ac	dditional	informatio	namber er eent	ribations, tri	e namber on	terns received, or a combination of both. Also compl	Olo
	- the part for any ac		miomatic	J. 1.				
ſ <u></u>								
-								

Schedule M (Form 990) 2022

232142 09-09-22

SCHEDULE 0 (Form 990)

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.

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

GOODWILL INDUSTRIES OF GREATER CLEVELAND AND EAST CENTRAL OHIO, INC.

Employer identification number 34-0909974

FORM 990, PART VI, SECTION B, LINE 11B:

THE CFO AND THE AUDIT COMMITTEE OF THE BOARD REVIEW THE FORM 990. A COPY OF THE FORM 990 IS PROVIDED TO ALL BOARD MEMBERS BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

ANY CONFLICTS OF INTEREST AMONG OFFICERS TRUSTEES OR EMPLOYEES ARE MONITORED THROUGH POLICIES ESTABLISHED IN THE BOARD AND EMPLOYEE HANDBOOK AND REGULARLY ENFORCED THROUGH BOARD OF TRUSTEE'S MEETINGS. SHOULD A TRUSTEE NOT BE INDEPENDENT IN A DECISION BEING PUT TO VOTE, THAT TRUSTEE MUST ABSTAIN FROM VOTING. A DOCUMENT THAT LISTS POTENTIAL CONFLICTS OF INTEREST AMONG BOARD MEMBERS IS CIRCULATED TO THE BOARD ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15:

THE CEO'S COMPENSATION IS COMPARED TO 990 INFORMATION, REVIEWED AND RECOMMENDED BY THE COMPENSATION COMMITTEE TO THE EXECUTIVE COMMITTEE OF THE BOARD. THE EXECUTIVE COMMITTEE THEN APPROVES THE COMPENSATION PACKAGE. KEY EMPLOYEE COMPENSATION IS COMPARED TO INDUSTRY RELATED INFORMATION FROM GOODWILL INDUSTRIES INTERNATIONAL. THE INFORMATION IS PRESENTED TO THE COMPENSATION COMMITTEE BUT NOT APPROVED BY THAT BODY. A THIRD PARTY COMPENSATION STUDY WAS CONDUCTED AND REVIEWED BY THE COMPENSATION A MERCER STUDY WAS DONE IN 2022 FOR ALL LEVELS.

FORM 990, PART VI, SECTION C, LINE

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page 2
Name of the organization GOODWILL INDUSTRIES OF GREATER CLEVELAND AND EAST CENTRAL OHIO, INC.	Employer identification number 34-0909974
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN VALUE OF PERPETUAL TRUST	-387,205.
FORM 990, PART XII, LINE 2C	
THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

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

(c)

Legal domicile (state or

(d)

Total income

(e)

End-of-year assets

Name of the organization

(a)

Name, address, and EIN (if applicable)

Department of the Treasury Internal Revenue Service

GOODWILL INDUSTRIES OF GREATER CLEVELAND AND EAST CENTRAL OHIO, INC.

(b)

Primary activity

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Open to Public Inspection

OMB No. 1545-0047

Employer identification number 34-0909974

(f)

Direct controlling

Schedule R (Form 990) 2022

of disregarded entity		foreign country)			e	ntity		
Part II Identification of Related Tax-Exempt Organizations during the tax year.	tions. Complete if the organization a	nswered "Yes" on Form 990	, Part IV, line 34, b	ecause it had one	or more related tax-exe	mpt		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	(g) 512(b)(13) trolled htity?	
				501(c)(3))		Yes	No	
COMPASS - 34-1841381	4							
408 NINTH STREET S.W. CANTON, OH 44707	SUPPORT SERVICES	оніо	501(C)(3)	LINE 7	N/A		х	

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

Schedule R (Form 990) 2022

1990) 2022 AND EAST CENTRAL OHIO, INC.

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of end-of-year assets	Disprop	ortionata	Code V-UBI	General o	Percentage
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	
	l	l	l .	l .		l			I	-	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	ction b)(13) rolled tity?
		,						Yes	No

Yes No

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Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X
	Gift, grant, or capital contribution to related organization(s)				1b	X	
С	Gift, grant, or capital contribution from related organization(s)				1c		X
	Loans or loan guarantees to or for related organization(s)				1d		X
е	Loans or loan guarantees by related organization(s)				1e		X
	, , , , , , , , , , , , , , , , , , , ,						
f	Dividends from related organization(s)				1f		Х
	Sale of assets to related organization(s)				1g		_X_
h	Purchase of assets from related organization(s)				1h		X
i	Exchange of assets with related organization(s)				1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	X	
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X
	Performance of services or membership or fundraising solicitations for related organizat				11		X
	Performance of services or membership or fundraising solicitations by related organizat				1m		X
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		X
	Sharing of paid employees with related organization(s)				10	X	
р	Reimbursement paid to related organization(s) for expenses				1p		X
q	Reimbursement paid by related organization(s) for expenses				1q		X
_	•						
r	Other transfer of cash or property to related organization(s)				1r		Х
s	Other transfer of cash or property from related organization(s)				1s		X
2	If the answer to any of the above is "Yes," see the instructions for information on who m						
	(a)	(b)	(c)	(d)			
		Transaction	Amount involved	Method of determining amount invo	olved		
		type (a-s)					
1)							
2)							
3)							
4)							
5)							
6)							
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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprition allocat	opor- late tions?	General manage partner	(k) Percentage ownership
									000) 0000

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