T3930

Form

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No. 1545-0047 Open to Public Inspection

A	For th	e 2011 calendar year, or ta	x year beginning 0	7/01/1:	1 , and ending	06/30/	12		
	Check if a	5 11						D Empl	oyer identification number
	Address o	hange	THE GOOD P	EOPLE F	UND INC.				
Ī	Name cha	Doing Business As						26	-1887249
		Number and street (or	r P.O. box if mail is not delivered	to street addres	s)		Room/suite		hone number
\Box	Initial retu	384 WYOMI	NG AVE.					97	3-761-0580
Ш	Terminate	d City or town, state or o	country, and ZIP + 4						
	Amended	return MILLBURN		иј 07	7041			G Gross rec	ceipts \$ 903,252
\Box	Applicatio	F Name and address of					H(a) Isthisag	roun return for	affiliates? Yes X No
<u>`</u>		DR. ARTH	IUR BRENNER					•	H. H.
			IING AVE.				H(b) Are all aff		_
		MILLBURN	r		07041	-,		," attach a lis	t. (see instructions)
1_	Tax-exer	pt status; X 501(cX3)		insert no.)	4947(a)(1) or	527	[
J	Website		oplefund.org			·····	H(c) Group ex		
		rganization: X Corporation	Trust Association	Other >		L Y	ear of formation: 2	008	M State of legal domicile: NJ
<u> P</u>	art I	·····							
	1 1	Briefly describe the organizat	ion's mission or most sig	nificant activ	ities:				
စ္ပ		See Schedule O	· · · · · · · · · · · · · · · · · · ·						
an									
& Governance									
é	l	Check this box 🕨 🗌 if the o				ore than 25%	of its net assets	1	ا ه
ಶ	I	lumber of voting members o							8
Activities		lumber of independent voting							1
ivit	1	otal number of individuals e		r 2011 (Part	V, line 2a)				0
Ac	ı	otal number of volunteers (e	• •						
	i .	otal unrelated business reve							0
	bl	let unrelated business taxab	le income from Form 99	0-T, line 34 .			Prior Yea		Current Year
	, ,	Santaite sticks and aroute (Dec	d VIII line 4h)					1,152	902,543
ne		Contributions and grants (Par						0	0
Revenue		rogram service revenue (Pa						933	709
Re		nvestment income (Part VIII, Other revenue (Part VIII, colu						0	0
		otal revenue – add lines 8 th				l l	88:	2,085	903,252
		Grants and similar amounts p						7,200	743,758
		Benefits paid to or for membe		P A				0	0
			, , , , , , , , , , , , , , , , , , ,		(A) lines 51(1)		62	2,905	65,276
ses	10 0	raianes, omer compensation	(Part IX column (A) line	11A, WIGHTIN	(A), III (23 0 - 10)			0	0
ë	Toar	calaries, other compensation Professional fundraising fees Total fundraising expenses (F	Cart IX, Column (D) line	25\ b -	16,2	33			
Expenses		otal fundraising expenses (Part IX, colu					4:	8,583	62,969
	1	otal expenses. Add lines 13-						8,688	
	•	Revenue less expenses. Sub	• •	- •	* **********			3,397	31,249
- Sa		revenue less expenses, oub	macrime to nom mic 12		**********		Beginning of Cur		End of Year
ets (20	otal assets (Part X, line 16)					32'	7,231	365,882
Net Assets or Fund Balances	21	otal liabilities (Part X, line 26						0	0
Net	22 1	let assets or fund balances.					32'	7,231	365,882
7222222	art II	Signature Block							
Ur	nder per	alties of periury. I declare that I I	have examined this retum, i	including acco	mpanying schedules a	and statements,	and to the best of	my knowle	edge and belief, it is
tru	ie, corre	ct, and complete. Declaration of	preparer (other than officer) is based on a	all information of which	n preparer has a	any knowledge.		
		A							
Sig	n	Signature of officer						Date	
Hei		DR. ARTHU	R BRENNER			CHAIR	MAN		
_		Type or print name and title							
		Print/Type preparer's name		Preparer's sign	ature	·	Date	Check	
Paid	i	RICHARD M HOFFMAN		RICHARD M			11/3	// Gen-er	
Pre	parer		rine, Jacobs	& Com		C.	F	im's EIN	22-3447596
Use	Only	333	Eisenhower	Parkwa			}		
		Firm's address Liv	ringston, NJ	0703	9			hone no.	973-992-9400
May	the IR	S discuss this return with the	preparer shown above?	(see instruc	tions)				X Yes No

Form	990 (2011) THE GOOD	PEOPLE FUND I	NC.	26-1887249		Page 2
Pa	rt III Statement of Pi	rogram Service Acco	mplishments			,
	Check if Schedu	lle O contains a respo	nse to any question in	this Part III		X
1	Briefly describe the organization	n's mission:				
S	ee Schedule O					

2	Did the organization undertake	any significant program ser	vices during the year which	were not listed on the	م	
				,	L	Yes X No
	If "Yes," describe these new se					
3	Did the organization cease con-	ducting, or make significant	changes in how it conducts	, any program [.]	_	7 523
					.,., L	Yes X No
	If "Yes," describe these change					
	Describe the organization's prog					
	expenses. Section 501(c)(3) an				amount of	
	grants and allocations to others	, the total expenses, and re-	enue, if any, for each progr	ram service reported.		
	(Code:) (Expenses) (Revenue \$	
p: s: s: a:	roviding both for cograms in the learning others in ustainable and and donees ways besources and how	Jnited States n need. The G independent, a to improve and	and in Israel ood People Fu nd to advise maximize the	These programmed assists programmed individuals, a use of finar	rams are devo- rograms to be students, tea ncial and other	ted to come achers
r	esources and nov	v to utilize c	cuer peoples	tarents.		
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	(O. I.) (F	•	in all disasternation of the		(Payanua ¢	
4D	(Code:) (Expenses					
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4c	(Code:) (Expenses	\$	including grants of \$		(Revenue \$)
			·		******	

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	• • • • • • • • • • • • • • • • • • • •					
	Other program services. (Descr		740 5	750 v.m.		
		5,781 including grants		758) (Revenue \$)	
4e	Total program service expens	ses ► 825	,781			

P	art IV Checklist of Required Schedules		T	Т
	1	ſ	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1	x	
_	complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	-		
3	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)	1		
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	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? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			**
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part 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,"	44.	x	
	complete Schedule D, Part VI	11a		
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	11b		х
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	110		- 12
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		х
а	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		
u		11d		x
е	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 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, XII, and XIII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			77
	Part IX, 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			77
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from garning activities on Part VIII, line 9a?			v
	If "Yes," 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	000	

Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization 21 X in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States X on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated X employees? If "Yes," complete Schedule J 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 24a \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b X through 24d and complete Schedule K. If "No," go to line 25 242 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction X with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 X 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled X entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) X was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 X conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 31 Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 X complete Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, 34 X IV, and V, line 1 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization receive any payment from or engage in any transaction with a controlled entity within the X meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 X related organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and X 19? Note. All Form 990 filers are required to complete Schedule O

a 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 Section 501(c)(12) organizations. Enter: a 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 b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	Pa	statements Regarding Other IRS Filings and Tax Compliance					
Eniret the number reported in Box 3 of Form 1006. Enter -2 if not applicable 1a 4 1b 0 1c		Check if Schedule O contains a response to any question in this Part V		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		26	
Enter the number of Forms W-26 included in line 1s. Enter-0-If not applicable Die freit the number of Forms W-26 included in line 1s. Enter-0-If not applicable Die file the organization comply with backup withindding uses for reportable payments to verticors and reportable gamining (gamining) withing to prize witness. Statements, filed for the calendary year entiting with or which the year covered by this return I die less to one is reported on line 2s, did the organization file all required federal employment fax returns? Note. If the sum of fines 1s and 2s is greater than 20, you may be organized to e-file (see interactions) Note, if the sum of fines 1s and 2s is greater than 20, you may be organized to e-file (see interactions) Note, if the sum of fines 1s and 2s is greater than 20, you may be organized to e-file (see interactions) Note, if the sum of fines 1s and 2s is greater than 20, you may be organized to e-file (see interactions) Note, if the sum of fines 1s and 2s is greater than 20, you may be organized to e-file (see interactions) Note if the sum of fines 1s and 2s is greater than 20, you may be organized in Statefulle Co. 43. Note if the sum of fines 1s and 2s organized file and the sum of the foreign country (who are a banish account, securities account, or other authority over, a file and a count in a level promoting country (who are a banish accountry) Note if the sum of the foreign country (who are a banish accountry) Note if the organization in party to a prohibited tax shelter transaction and type of sum of the sum of the foreign country. Note if the organization in party to a prohibited tax shelter transaction and type organization and party for goods and services provided to the payment or accountry organization and accountry as a contribution and party for goods and services provided to the payment in account a services provided or the payment organization receive a payment in account of the quality or addit the organization and party for goods and services provided for the p		and the state of t	10	Δ		res	NO
Did the organization comply with backup withholding rules for reportable pagments to vendors and reportable garring (garring) with backup withholding rules for reportable pagments to vendors and reportable garring (garring) with backup withholding rules for reportable pagments of without properties of the properties					1		
sepectable gaming (gamining) winnings to prize winners? Stetements, Red for the calendary year enting with or within the year covered by this return Stetements, Red for the calendary year enting with or within the year covered by this return If all east one is reported in the 28, did the originations file all required to -cite (see instructions) If all least not is reported with the 28, did the originations file all required from the year? If all carry the during the calendar year, did the originations file all required in Schedule 0 If "Yea," has at titled a Form 8017 for the year? If "No, provide an explanation in Schedule 0 If "Yea," and at titled a Form 8017 for the year? If "No, provide an explanation in Schedule 0 If "Yea," and at titled a Form 8017 for the year? If "No, provide an explanation in Schedule 0 If "Yea," enter the name of the foreign country when a bank account, a corber financial account in a foreign country when a bank account, a subject to order financial account in a foreign country when the country in the during the calendary enter the same of the foreign country. ★ If "Yea," enter the name of the foreign country the country the during the calendary enter the year? See instructions for filing requirements for Form TD F90-221. Report of Foreign Bank and Financial Accounts. If "Yea," enter the name of the foreign country when the same and the year of the propagation any to problement as when the transaction and the year of the propagation any to problement as when the transaction and the year of the year of the propagation and the year of year of year of year year year year year year year year			10		1		
Enter the number of employees reported on Form W-3, Transmital of Wige and Yax Enter the number of employees reported on Form W-3, Transmital of Wige and Yax If all leads one is reported on line 2a, did the organization file all required defend employment tax returns? Note. If the sum of lines 1s and 2a is greater than 250, you may be required to e-file (see instructions) Note. If the sum of lines 1s and 2a is greater than 250, you may be required to e-file (see instructions) If the organization have wanteded business gross income of \$1,000 or more during the year? A any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country № See instructions for tilling requirements for Form ID IF 90.22.1. Report of Foreign Bank and Financial Accounts. See instructions for filling requirements for Form ID IF 90.22.1. Report of Foreign Bank and Financial Accounts. See instructions for filling requirements for Form ID IF 90.22.1. Report of Foreign Bank and Financial Accounts. See instructions for filling requirements for Form ID IF 90.22.1. Report of Foreign Bank and Financial Accounts. See instructions for filling requirements for Form ID IF 90.22.1. Report of Foreign Bank and Financial Accounts. See instructions for filling requirements for Form ID IF 90.22.1. Report of Foreign Bank and Financial Accounts. See instructions for filling requirements for Form ID IF 90.22.1. Report of Foreign Bank and Financial Accounts. See instructions on play to a prohibited tax sheller transaction at any time during the tax year? See instructions any promity the organization foreign and proparation foreign to proparation foreign and proparation foreign and proparation foreign to proparation foreign and proparation fo	С				1c	X	********
Statements, Ried for the calendary year enting with or within the year covered by this return Fall least one is reported on the 2a, did the organization file all required deard employment tax returns? 2b X	2-						
b If at least one is reported on line 2a, did the organization file all required federal employment hav returns? 3	Za		2a	1			
Note, if the sum of lines 1s and 2s is greater than 250, you may be required to e-file (see instructions) 3	L				2b	X	******
38 Dit the organization have unrelated business gross income of \$1,000 or more during the year? 38 Dif "Yes", has it filed a Form 8001-Tor this year? If No, provide an optionation in Schedule O 39 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. ** 40 If "Yes," enter the name of the foreign country. ** 51 Was the organization a party to a prohibited tax sheller transaction, at any time during the tax year? 52 See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 53 Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 54 Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 55 Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shell any transitions that were not tax deductable? 55 Was the organization than a precipit of the did to the organization than the annual gross receipts that are normally greater than \$100,000, and did the organization track adeductable? 56 Was the organization track adeductable? 57 Organizations that may receive deductable contributions under section 170(c). 58 Was the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the prayor? 58 Was the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the prayor? 59 Was the organization received a contribution of unitied where the goods or services provided? 50 Was the organization organization services and contribution of unitied where the goods or services provided? 50 Was the organization received a contribution of unitied where the goods or services provided? 50 Was the organization received a contribution of unitied where the decident payment in the services of t	D		• • • • • • • • • • • • • • • • • • • •				
Mary New Comment Mary New	30				3a		X
4a A any time during the calendary war, 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)? b If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country. P See instructions for filing requirements for Form TD F90-22.1, Report of Foreign Bank and Financial Accounts. 5b Ws the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Uses the organization approach to a prohibited tax shelter transaction? 5b X X 6b If "Yes" to line Sa or Sb, did the organization file Form 8886-17? 6c Does the organization she have annual gross receipts that are normally greater than \$100,000, and did the organization shelt have not tax deductible? 6c Does the organization shelt may receive deductible contributions an express statement that such contributions or gifts were not tax deductible? 6c Did the organization state are payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7c Organizations that may receive daductible contributions under section 170(c). 8c Did the organization seed, except, or of the value of the goods or services provided? 9c Did the organization seed, except, or of the value of the goods or services provided? 9c Did the organization seed, except, or of the value of the goods or services provided? 9c Did the organization seed, except, or of the value of the goods or services provided? 9c Did the organization seed, except, organization organization file Form 8289 as required? 9c Did the organization received a contribution of qualified intellectual property, did the organization file Form 8890 as required? 9c Did the organization or received a contribution of qualified intellectual prop	_						
over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country." See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization aparty to a prohibited tax was shelter transaction at any time during the tax year? Sa X Was the organization that organization that It was or is a party to a prohibited tax shelter transaction? Sb X If "Yes," folia the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with ever provided to the party. If "Yes," folia organization include with ever provided deutoible? Organizations that may receive deductible on organizations that may receive deductible on organizations that may receive deductible on organization shart may receive deductible on organization shart may receive deductible on organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? To required to the organization notify the donor of the value of the goods or services provided? To bit the organization notify the donor of the value of the goods or services provided? To bit the organization receive an otherwise dispose of tangible personal property for which it was required to the Form 8282? To bit the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? To bit the organization organization flush or forms 822 fleid during the year for indirectly, to pay premiums on a personal benefit contract? If the organization received a contribution of qualified the flushcular property, did the organization flush a property of the organization flush and contribution of a property of indirectly, to pay premiums on a personal benefit contract? If the organization received a contribution of case, boosts, epinance, or other vertices, did the organization							
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year					42-	*******	*******
Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 13c 14a X	12a			•••••	12a		
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14a Did the organization receive any payments for indoor tanning services during the tax year?	~				1		
14d Did tile digalization receive any payments for indexir terming destroes during the text year.		Did the organization receive any payments for indoor tanning services during the tax year?		The state of the s	14a		X
		If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			14b		

26-1887249 Form 990 (2011) THE GOOD PEOPLE FUND INC. Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI. Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 8 Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a X one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a The governing body? X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes X 10a Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10h affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done X 13 Did the organization have a written whistleblower policy? 13 X Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization ______ If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a X 16a with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure NJ List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year.

State the name, physical address, and telephone number of the person who possesses the books and records of the

NAOMI EISENBERGER

20

organization:

MILLBURN

384 WYOMING AVE.

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)
 who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
 organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
 List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest
 compensated employees; and former such persons.

Check this box if neither the organ (A) Name and Title	(B) Average hours per week	(di	o not o x, unle)) Pos check ess pe	C) ition more t rson is	than or s both a	ne an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	or director	listitutional trustee	of Officer		Highest compensated employee		the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1)ERIK LINDAUER	10.00							. 0	0	0
TREASURER	10.00	X		X		-		<u> </u>		
(2) RONI RUBENSTEIN	5.00	x						o	О	0
(3) ARTHUR BRENNER								•		0
CHAIRMAN	5.00	X		X				0	0	0
(4) PETER FREIMARK BOARD MEMBER	5.00	x						0	o	0
(5) RABBI GORDON FUL										
SECRETARY	5.00	x		х				0	0	0
(6) ALLEN KATZOFF BOARD MEMBER	5.00	x						0	o	0
(7) EVELYN HERWITZ	3.00									
BOARD MEMBER	5.00	X						0	0	0
(8) BEN A. PLOTKIN										_
BOARD MEMBER	5.00	X						0	0	0
(9) LISA LINDAUER								_		^
HONORARY BOARD MEMBE	5.00		<u> </u>	X	_			0	0	0
(10)										
(11)										
(12)										
(13)										
(14)		1		-						

Form 990 (2011) THE GOOD PEOPLE FUND INC. 26-1887249

Pac	e	8
Pad	e	ł

Pa	Section A. Officers (A) Name and title	(B) Average hours per week (describe	(B) (C) Average hours per (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
		related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2 ² 1099-MISC)		organization and related organizations
(15)											
(16)											
(17)											
(18)											
(19)									·		
(20)											
(21)											
(22)											
(23)											
(24)											
1b c d	Sub-total	ts to Part VII, So	ection	on A		 		>	who received more than \$10	00,000 în	
3 4 5	Did the organization list any for employee on line 1a? If "Yes," of For any individual listed on line organization and related organization and related organization and person listed on line 1a for services rendered to the organization and related to the organization and related on line 1a for services rendered to the organization.	mer officer, directomplete Scheduta, is the sum of zations greater the control of	ctor, le J repo nan S	or tru for so ortab \$150, 	uch i le co ,000° nsat	ndivi ompe ? If " ion fi	dual ensat Yes,"	ion a	and other compensation from nplete Schedule J for such unrelated organization or inc	n the lividual	Yes No 3 X 4 X 5 X
Sec 1	tion B. Independent Contracto Complete this table for your five	ors									
	compensation from the organiz	ation. Report con (A) business address	nper	satio	on fo	r the	cale	nda	r year ending with or within t	he organization's tax year. (B) tion of services	(C) Compensation
	ив эпри	DUSITIESS AUGIESS									
2	Total number of independent or received more than \$100,000 or								listed above) who	0	Form 990 (2011)

Pa	rt V	III Stater	nent of Reve	nue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S G	10	Federated can	nnainne	1a						
ant	h	Membership d		1b						
တ်ဋ	, o	Fundraising ev		1c						
ffs,	ر د	Related organi		1d						
<u> </u>	u o	Government grants		1e						
Sis	f	All other contribution		'						
it i	•	and similar amounts		1f		902,543				
はな	a	Noncash contributio	ns included in lines 1a-1							
Contributions, Gifts, Grants and Other Similar Amounts	h		es 1a–1f		·		902,543			
						Busn, Code				
Program Service Revenue	2a									
Re	ь									
.8	c									
Š	d									
Ĕ	e									
gr	f		am service reven			L.,				
ď	g	Total. Add line	es 2a–2f			<u> </u>				
	3	Investment inc	ome (including d	ividend	dends, interest,					700
		and other simil	other similar amounts) me from investment of tax-exempt bond proceeds				709			709
	4	Income from in	vestment of tax-	exemp	t bond pro	ceeds 🕨				
	5	Royalties				<u> </u>				
			(i) Real		(ii) P	ersonal				
	6a	Gross rents								
	b	Less: rental exps.								
		Rental inc. or (loss)								
ŀ		Net rental inco Gross amount from	me or (loss)							
Ì	74	sales of assets	(i) Securities		(11)	Other				
		other than inventory								
	b	Less: cost or other								
	_	basis & sales exps.								
		Gain or (loss)	ss)		L	D				
			om fundraising even	1	•••••					
ne	ua	(not including \$		l						
Revenue			reported on line 1c).							
			18							
Other	b	Less: direct ex		р						
ō			(loss) from fundr	aising	events	>				
	9a	Gross income fro	om gaming activities	3.						
			19							
	b		penses							
	С	Net income or	(loss) from gami	ng acti	vities					
	10a	Gross sales of	finventory, less	-						
		returns and all	owances	а						
			goods sold							
	С	Net income or	(loss) from sales	of inve	entory					
		Mis	scellaneous Revenue			Busn. Code				
	11a									-
	b									
	C									
			nue							
			es 11a11d				903,252	0	0	709
	12	i otal revenu	 See instruction 	ເຮົ , ,			1 200,202		L	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

ioqu	Check if Schedule O contains a response	to any question in this Part I	X										
Do	Check if Schedule O contains a response to any question in this Part IX Do not include amounts reported on lines 6b, (A) (B) (C) (D) (D) (Fundreising												
	, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses								
1													
•	organizations in the U.S. See Part IV, line 21	149,071	149,071										
2	Grants and other assistance to individuals in												
2	the U.S. See Part IV, line 22	112,864	112,864										
,	Grants and other assistance to governments,												
3	organizations, and individuals outside the												
	•	481,823	481,823										
	U.S. See Part IV, lines 15 and 16	101,025											
4	Benefits paid to or for members												
5	Compensation of current officers, directors,												
_	trustees, and key employees												
6	Compensation not included above, to disqualified												
	persons (as defined under section 4958(f)(1)) and												
	persons described in section 4958(c)(3)(B)	60,000	42,000	12,000	6,000								
7	Other salaries and wages	60,000	42,000	12,000	0,000								
8	Pension plan accruals and contributions (include												
	section 401(k) and 403(b) employer contributions)												
9	Other employee benefits		2 (02)	1 055	528								
10	Payroll taxes	5,276	3,693	1,055	528								
11	Fees for services (non-employees):												
а	Management												
b	Legal												
c	Accounting	8,905		8,905									
d	Lobbying												
е	Professional fundraising services. See Part IV, line 17												
f	Investment management fees												
g	Other	6,611	4,628	1,322	661								
12	Advertising and promotion												
13	Office expenses	1,173	821	235	117								
14	Information technology												
15	Royalties												
16	Occupancy												
17		6,831	4,782	1,366	683								
18	Payments of travel or entertainment expenses												
10	for any federal, state, or local public officials												
19	Conferences, conventions, and meetings												
20	Interest												
21	Payments to affiliates	8,748	6,123	1,750	875								
22	Depreciation, depletion, and amortization	1,718	1,203	344	171								
23	Insurance	1,110	1,200	J71									
24	Other expenses. Itemize expenses not covered												
	above, (List miscellaneous expenses in line 24e. If												
	line 24e amount exceeds 10% of line 25, column												
	(A) amount, list line 24e expenses on Schedule O.)	14,365	8,619		5,746								
a	MARKETING		5,622	1,606	804								
b	WEBSITE, DESIGN, HOSTING	8,032	2,722	778	389								
C	BANK CHARGES	3,889		311	156								
d	POSTAGE AND SHIPPING	1,555	1,088		103								
e	All other expenses	1,142	722	317									
25	Total functional expenses. Add lines 1 through 24e	872,003	825,781	29,989	16,233								
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												
	following SOP 98-2 (ASC 958-720)												
DAA					Form 990 (2011)								

Form 990	0(2011) THE GOOD PEOPLE FUND	INC.	2	6-1887249		Page 11
Part)					,	
				(A) Beginning of year		(B) End of year
				35,526		44,579
1	***************************************			273,204		284,913
2	Savings and temporary cash investments			213,204		204,913
3	Pledges and grants receivable, net				3	AND THE PARTY OF T
4	Accounts receivable, net				4	
5	Receivables from current and former officers, directors,					
	employees, and highest compensated employees. Com				5	
	Schedule L		-41			
6	Receivables from other disqualified persons (as defined					
	4958(f)(1)), persons described in section 4958(c)(3)(B),					
	employers and sponsoring organizations of section 501(6	
ets	employees' beneficiary organizations (see instructions)				7	
Assets	***************************************				8	
0	Inventories for sale or use			18,501	9	21,586
9	Prepaid expenses and deferred charges	1				
10a	Land, buildings, and equipment: cost or	102	16.150			
١.	other basis. Complete Part VI of Schedule D	10h	16,150 1,346	5	10c	14,804
1.0	Less: accumulated depreciation Investments—publicly traded securities	, [100]			11	
11	Investments—other securities. See Part IV, line 11				12	
12	Investments—program-related. See Part IV, line 11				13	
14	Intangible assets				14	
15	Other assets. See Part IV, line 11				15	
16	Total assets. Add lines 1 through 15 (must equal line 3	4)		327,231	16	365,882
17	Accounts payable and accrued expenses				17	
18	Grants payable				18	
19	Deferred revenue				19	
20	Tax-exempt bond liabilities		20			
21	Escrow or custodial account liability. Complete Part IV of	of Schedul	e D		21	
σ ₂₂	Payables to current and former officers, directors, truste	es, key				
Liabilities	employees, highest compensated employees, and disqu	ualified pe	rsons.			
api					22	
□ 23	Secured mortgages and notes payable to unrelated third				23	
24	Unsecured notes and loans payable to unrelated third p				24	
25	Other liabilities (including federal income tax, payables t					
	parties, and other liabilities not included on lines 17-24).				25	
	of Schedule D			. 0	25 26	0
26	Total liabilities. Add lines 17 through 25	चि			20	
	Organizations that follow SFAS 117, check here ▶	A and	complete			
Ses	lines 27 through 29, and lines 33 and 34.			181,724	27	236,682
Fund Balances 28 29 29	Unrestricted net assets			145,507		129,200
28					29	
E 29	Permanently restricted net assets Organizations that do not follow SFAS 117, check it	noro b	and			
P.		leie P	ے ماند			
ts	complete lines 30 through 34. Capital stock or trust principal, or current funds			30		
Net Assets 30 31	Paid-in or capital surplus, or land, building, or equipmer				31	
31 As	Retained earnings, endowment, accumulated income, or				32	
$\frac{1}{2}$ 32				327,231	33	365,882
34	Total liabilities and net assets/fund balances			327,231	34	365,882
194	TOTAL HADDINGS GITS THAT GOODSTATE SAME TOO STITLE THE		The state of the s			Form 990 (2011)

Forr	n 990 (2011) THE GOOD PEOPLE FUND INC. 26-1887249			Page	12
P	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				l
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,25	
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,00	
3	Revenue less expenses. Subtract line 2 from line 1	3	3	1,24	, 9
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		7,23	
5	Other changes in net assets or fund balances (explain in Schedule O)	5		7,40	2
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6	36	5,88	2
Pi	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
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 in Schedule O.		-	Yes N	
2a			`` _,	x Z	
D	Were the organization's financial statements audited by an independent accountant?		. 20	^	—
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		2c	\mathbf{x}	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	• • • • • • • • • • • • • • • • • • • •	. ZC	Α	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. 3b		_
			r	QQA (OC	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2011

Open to Public Inspection

men	iai Revenue Service	1								200000000000	****		********
	e of the organization	THE GOOD PEO	PLE FUND INC.					1		ification numb	ber		
P	art I Reas		Status (All organizations	must co	mplete	this pa	rt.) Se	e instr	uction	s.			
******			it is: (For lines 1 through 11, che	-									
1	Ŏ	•	ciation of churches described in			A)(i).							
2	⊢ ⊸ ′	cribed in section 170(b)(1)(, , , , ,								
3			e organization described in secti	ion 170(b)(1)(A)(iii).							
4			in conjunction with a hospital de)(A)(iii).	Enter t	he hosp	ital's name	,		
-	city, and stat					. , ,			•		•		
5	An organizat		f a college or university owned or	operated	by a gove	ernment	al unit de	escribed	l in		• • • •		• • • • • • •
6			vernmental unit described in sec	tion 170	(b)(1)(A)(v).							
7			ubstantial part of its support from				n the ae	neral pu	ıblic				
•		section 170(b)(1)(A)(vi). (Co		J			Ü	•					
8	L		70(b)(1)(A)(vi). (Complete Part II	1.)									
9		F	more than 33 1/3% of its support		ntributions	s, memb	ership fe	es, and	gross				
-			ot functions—subject to certain e										
			d unrelated business taxable inco										
	1.1	•	, 1975. See section 509(a)(2). (•		,							
10		v	xclusively to test for public safety			a)(4).							
11		•	xclusively for the benefit of, to pe				carry ou	it the					
• •		•	d organizations described in sec						tion				
		, , ,	e type of supporting organization										
	а Птуре	b Type II	c Type III–Functiona	ally integra	ited	d	Тур	e III-Ot	her				
е			nization is not controlled directly			or more	disquali	fied per	sons				
			than one or more publicly suppo										
	or section 50	9(a)(2).											
f		· · · ·	mination from the IRS that it is a	Type I, Ty	ηpe II, or Ί	ype III s	upportin	g					
	_	check this box											
g	Since Augus	17, 2006, has the organization	on accepted any gift or contribution	on from a	ny of the			. , , , , , , , ,					
•	following per	sons?									_		
			ntrols, either alone or together wi	th persons	s describe	d in (ii) a	and					Yes	No
	(iii) belo	w, the governing body of the s	supported organization?					.		119	g(i)		<u></u>
		member of a person describe								119	g(ii)		
	(iii) A 35% c	ontrolled entity of a person de	escribed in (i) or (ii) above?					.,,,,,,,,			3(iii)		
h	Provide the	following information about th	e supported organization(s).										
(i	i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) is the o	organization		ou notify		ls the	(vii)	Amo	unt of	
	organization		(described on lines 1–9 above or IRC section		sted in your	the organ	nization in of your	organizat	ion in col. zed in the	:	suppo	ort.	
			(see instructions))	governing	document?		ort?	11.	S.?				
			` '	Yes	No	Yes	No	Yes	No				
۹)													
			- Harrison	ļ									
3)				1									
					ļ								
C)													
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D)													
					-								
E)						1							

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

Schedule A (Form 990 or 990-EZ) 2011

P	art II Support Schedule for O	rganizations I	Described in Se	ections 170(b)(1)(A)(iv) and '	170(b)(1)(A)(vi)				
	(Complete only if you che	ecked the box o	on line 5, 7, or 8	of Part I or if t	he organization	failed to qualify	under			
	Part III. If the organization	n fails to qualify	under the tests	listed below,	please complete	e Part III.)				
	tion A. Public Support	T					10 = 11			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")									
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			and charles 144 C						
3	The value of services or facilities furnished by a governmental unit to the organization without charge									
4	Total. Add lines 1 through 3									
5	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									
	tion B. Total Support		T							
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total			
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources									
9	Net income from unrelated business activities, whether or not the business is regularly carried on									
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)									
11	Total support. Add lines 7 through 10		1 1							
12	Gross receipts from related activities, etc. ((see instructions)			.,	12				
13	First five years. If the Form 990 is for the	organization's first,	second, third, fourth	, or fifth tax year	as a section 501(c)(3)	, 🖂			
	organization, check this box and stop here						b			
Sec	tion C. Computation of Public Su									
14	Public support percentage for 2011 (line 6,	column (f) divided	by line 11, column (1))		14	<u>%</u>			
15	Public support percentage from 2010 Schedule A, Part II, line 14									
16a	a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this									
	box and stop here. The organization qualifies as a publicly supported organization									
b 33 1/3% support test—2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more,							b.			
check this box and stop here. The organization qualifies as a publicly supported organization										
17a	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is									
	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in									
	Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported									
b	organization 10%-facts-and-circumstances test2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line									
		15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.								
	Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly									
	supported organization						▶ ∐			
18	Private foundation. If the organization did	not check a box or	n line 13, 16a, 16b, 1	7a, or 17b, check	this box and see					

Schedule A (Form 990 or 990-EZ) 2011 Support Schedule for Organizations Described in Section 509(a)(2) Part III

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

OGL	ction A. Public Support							
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
1	Gifts, grants, contributions, and membership	(4) 2007	(2) 2002	(0) = 5.5		· · · · · · · · · · · · · · · · · · ·		
1	fees received. (Do not include any "unusual grants.")	159,402	780,202	831,317	881,152	902,543	3,554,616	
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,	
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
.	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5	159,402	780,202	831,317	881,152	902,543	3,554,616	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b							
8	Public support (Subtract line 7c from line 6.)						3,554,616	
	tion B. Total Support							
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
9	Amounts from line 6	159,402	780,202	831,317	881,152	902,543	3,554,616	
10a	Gross income from interest, dividends, payments received on securities loans, rents,							
	royalties and income from similar sources	114	1,025	1,105	933	709	3,886	
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b	114	1,025	1,105	933	709	3,886	
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
13	Total support. (Add lines 9, 10c, 11,							
	and 12.)	159,516	781,227	832,422	882,085	903,252	3,558,502	
14	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here							
Sec	tion C. Computation of Public Su	ipport Percenta	ge					
15	Public support percentage for 2011 (line 8,	column (f) divided by	line 13, column (f))		15	99.89%	
16	Public support percentage from 2010 Sche	dule A, Part III, line 1	5				<u></u>	
Sec	tion D. Computation of Investme	nt Income Perc	entage					
17	Investment income percentage for 2011 (lin	ne 10c, column (f) div	rided by line 13, col	umn (f))				
18	Investment income percentage from 2010						<u>%</u>	
19a	33 1/3% support tests2011. If the organ						, ==	
	17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							
							· · · · · · · · · · · · · · · · · · ·	
b	33 1/3% support tests—2010. If the organine 18 is not more than 33 1/3%, check this	nization did not check	a box on line 14 o	r line 19a, and line	16 is more than 33	3 1/3%, and	L	

Schedule A (Fo	rm 990 or 990-EZ) 2011	THE GOOL) PEOPLE FU	IND INC.	26-1887	249 Page 4
Part IV	Supplemental Info Part II, line 17a or instructions).	ormation. Com 17b; and Part II	plete this part to I, line 12. Also co	provide the explana complete this part fo	ations required by Part II r any additional informat	, line 10; ion. (See
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