OMB No 1545-0047

Form **990** 

Department of the Treasury

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

**Return of Organization Exempt From Income Tax** 

Open to Public

Internal	Revenue	Service	r i ne or	ganization may have to use a copy of this return to satisfy sta	ite report	ing requirement	S II	Inspection
A Fo	rthe 2	2009 ca	alendar yea	r, or tax year beginning 10-01-2009 and ending 09-30-2010				
<b>B</b> Che	eck if ap	plicable	Please	C Name of organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA		D Employer	identific	ation number
☐ Add	Iress ch	ange	use IRS label or	Doing Business As		13-1624 E Telephone		
┌ Nar	ne char	nge	print or type. See	E Telephone	number			
┌ Inıt	ıal retur	'n	Specific	Number and street (or P O box if mail is not delivered to street address:	) Room/su	(212) 85		
┌ <sub>Ter</sub>	mınated	i	Instruc- tions.	420 FIFTH AVENUE		<b>G</b> Gross receip	ots \$ 159,	,119,066
┌ Am	ended r	eturn		City or town, state or country, and ZIP + 4	1	_		
_		pending		NEW YORK, NY 100182798				
, , , , ,		ponung	E Non	l ne and address of principal officer				
				CLONINGER		this a group ret iliates?	for	┌ Yes
				FTH AVENUE				
			IN E VV Y	ORK,NY 10018		e all affiliate incl		☐ Yes ☐ No
Ta:	x-exem	pt status	<u> </u>	) ( 3 ) ◀ (insert no )		"No attack oli roup exception		
	ebsit e	: <b>►</b> WW	/W GIRLSC	OUTS ORG	n(c) °			•
<b>K</b> Form	n of ora	ıanızatıon	✓ Cornorat	tion	L Year o	f f ation .	M State	e of legal domicile NY
	rt I	Sum		ion, nast, assention, stiere	L rear o	NOT A	11 State	or legal dofficie. 111
	1	Briefly	describe th	e organization's mission or most significant activities				
	1			BUILDS GIRLS OF COURAGE, CONFIDENCE, AND CHARA	CTERWH	O ALETHE V	WO RLD	A BETTER
ည္		PLACE						
喜								
Governance								
<del>ှိ</del>			,	if the organization discontinued its operations or dispos	f moi th	an 25% of its ne	et asset	
2 <b>6</b>			_	nembers of the governing body (Part VI, line 1a)		•	3	28
ĕ				dent voting members of the governing body (Part VI line 1 )	<i>.</i>		4	28
Activities &				nployees (Part V, line 2a)			5	518
æ				lunteers (estimate if necessary)			· —	887,467
		-		ted business revenue from Part VIII, column (C), line 12	•		7a	1,606,375
	В	Net unr	erated busi	ness taxable income from Form 990-T (ne 34).			7b	
		Contri	hutions an	d grants (Part VIII, line 1h)		rior Year 6,067,926		6,040,928
₫	9			revenue (Part VIII, line 2g)		37,692,712		41,451,149
Rayenue	10	_		ne (Part VIII, column (A), lines 3, , and 7d)		-3,908,592	_	3,300,464
歪	11			art VIII, column (A), lines 5, 6d, c, 2, 10:, and 11e)		29,561,477	_	29,948,662
	12		•	dd lines 8 through 11 (must equal Part VII), column (A), line		23,002,		25/5 (5/652
		12) .		<u> </u>		69,413,523		80,741,203
	13	Grants	and simila	ar amounts paid (Part IX, column (A), thes 1–3)		4,056,631		6,318,826
	14			r for members (Part IX, column (A) ne 4)		460,748		423,106
88	15	Saları 10)	es, other co	ompensation, employed beny its (Part IX, column (A), lines 5-		37,276,397		40,118,616
Expenses	16a	,	sional fund	raising fees (Part I., column), line 11e)		, ,	+	0
÷	ь			enses (Part IX, column (► line 25) ►2,000,541		<del>_</del>		
ш	17			Part IX, colum. (Part IX, colum)		44,564,214		38,661,258
	18			Add lines 12 17 (mu. : equal Part IX, column (A), line 25)		86,357,990	<b>+</b>	85,521,806
	19			penses SAbtrac lung 18 from line 12		-16,944,467	_	-4,780,603
<u>~~</u>					Beginr	ning of Current		· · ·
Not Assets or Fend Balances						Year		End of Year
33.4g	20			( X, line 16)		159,264,320		169,144,421
2 E	21			Part , line 26)		40,393,944	_	57,117,314
	22			d alance Subtract line 21 from line 20		118,870,376		112,027,107
Pai	t II		ature Bl					
				erjury, I declare that I have examined this return, including a correct, and complete Declaration of preparer (other than of				
		l	. ,					
Sign	l	****	***					

Signature of officer Here Florence Corsello CFO
Type or print name and title Preparer's signature Date Paid Preparer's Firm's name (or yours GRANT THORNTON LLP if self-employed), address, and ZIP + 4 **Use Only** 666 THIRD AVENUE

May the IRS discuss this return with the preparer shown above? (see instructio

NEW YORK, NY 100174011

**EVALUATION: Compressor Add-on** 

### Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

GIRL SCOUTING IS A NONFORMAL, EXPERIENTIAL, AND COOPERATIVE EDUCATION PROGRAM THAT PROMOTES GIRLS' PERSONAL GROWTH AND LEADERSHIP DEVELOPMENT PARTNERING WITH CARING ADULTS, GIRLS DESIGN FUN AND CHALLENGING ACTIVITIES THAT EMPOWER THEM AND RAISE THEIR VOICES WITHIN A LOCAL, NATIONAL, AND GLOBAL SISTERHOOD

		•	, ,				Form <b>990</b> (2009
4e	Total program ser	vice expenses►\$	77,280,619	9			
	(Expenses \$	15,283,824 inc	cluding grants o	f \$	198,850)(R	evenue \$	7,332,579)
4d	Other program sei	rvices (Les cribe in Sci	nedule O ) <b>See a</b>	ılso Additional D	Data for Descri	ption	
	COMMUNICATIONS - C TOOLS AND MATERIAL	COMMUNICATE A. MESSA S FOR USE BY GIRL ICCUT	S ABOUT GIRL SCO OUNCILS	OUTING WHICH PRO	OMOTES THE GIRI	_ SCOUTs BRAND AND	DISSEMINATES PUBLIC RELATIONS
4c	(Code	) (Expense \$	10,150,654	ıncludıng grants o	f \$	0) (Revenue	\$ 4,869,885)
		ENT AND VOLUNTEER LEARN PROVIDE THE NATION'S PRE				PROGRAMs FOR GIRL	.S, AND TO DELIVER ADULT LEARNING
4b	(Code	) (Expenses \$		i :luding grants of		005,181 ) (Revenue	
	programs and services		d consistently NATI	ONWIDE, AND U	GIRL SCOUTS OV		OUNCILS to ensure that girl scout THE DELIVERY OF SERVICES TO
4a	(Code	) (Expenses \$	27,782,716	including grant of	· ' 🛦	114,795 ) (Revenue	
4	Section 501(c)(3) a	pt purpose achievemen and 501(c)(4) organiza s, the total expenses, a	tions and sectio	n 4947(a)(1) tr	usts ar re lu	rea to report the a	
		hese changes on Scheo					,,
3	_	n cease conducting, or	_	t changes in hov	wit conducts,	any prog am	└ Yes └ No
	If "Yes," describe tl	hese new services on S	chedule O			~~	
2	Did the organization the prior Form 990	n undertake any signific or 990-EZ?	ant program se	rvices during th	e year which w	ere not listed o	⊤Yes ▼ No

Dart TV	Checklist	of Required	Schedules
FOIL THE	CHECKHSL	ui keuulieu	<b>Julieuules</b>

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III			
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," completed by Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets in "Yes, complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not lighter in art X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "as," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, per name to quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complee Sin Jule D,  Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X,e10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Sch. Jule , Part VII.			
	◆ 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 by art VIII.			
	◆ 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 D			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertaints positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent and ited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Νο
12A	Was the organization included in consolidated, adependent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Pa is XI,, and XIII is optional			
13	Is the organization a school described so tion 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization paints if an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate receives or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United Lates? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> " <i>Yes," complete Schedule G, Part I</i>	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par <sup>®</sup>	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νο
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	2.		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the parto defease any tax-exempt bonds?	<b>24c</b>		
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 are activated a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		Νο
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 99 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly contrensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, customicey employee, substantial contributor, or a grant selection committee member, or to a person related as whan individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one on he following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employed If "Yes," complete Schedule L, Part IV	28a		Νο
Ь	A family member of a current or former officer, director, truster or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, directed tribble, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If Yes, "complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 pm-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of a schistorical treasures, or other similar assets, or qualified conservation contributions? If "Yes, stomple e Schedule M	30		No
31	Did the organization liquidate, ten linate or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization so , exchange dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		N o
33	Did the organization own 00% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 61 7701-3? If "Yes," complete Schedule R, Part I	33		No
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Form	990 (2009)					Page <b>5</b>
Pai	t V Statements Regarding Other IRS Filings and Tax Complianc	е				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable					
	or o.s. Thromation Returns. Litter -0- in not applicable	1a	113			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable					
_		1b	0			
С	Did the organization comply with backup withholding rules for reportable payments t gaming (gambling) winnings to prize winners?		•	1c	Yes	
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	2a	518			
b	return					
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-fill $\frac{1}{2}$			2b	es	
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more durin return?	g the	year covered by tos	Ja	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Scho	edule	o	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a si	_				
	over, a financial account in a foreign country (such as a bank account, securities acaccount)?		, or other nanch	4a		No
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, $F$	Report	ank and			
_	Financial Accounts					
5a 	Was the organization a party to a prohibited tax shelter transaction at any time during Did any taxable party notify the organization that it was or is a party to a prohibited.	-		5a		No No
				5b		- NO
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tay-E Prohibited Tax Shelter Transaction?	en	Entity Regarding	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$10	00,00	O, and dıd the	6a		No
h	organization solicit any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement the	at cu	ch contributions or diffs			
•	were not tax deductible?		· · · · · ·	6b		
7	Organizations that may receive deductible contributions under sect. 1 170/ j.					
а	Did the organization receive a payment in excess of \$75 made partly as contribution services provided to the payor?	on an	d partly for goods and	7a		No
b	If "Yes," did the organization notify the donor of the value the ods or services pi	 rovide	d?	7b		
c	Did the organization sell, exchange, or otherwise dispose or cangib e personal proper	rty for	which it was required to			
الد	file Form 8282?	7d	 I	7c		No
a	If Yes, indicate the number of Forms 8282 filed duratine sar	/a				
e	Did the organization, during the year, receive a y fixed directly or indirectly, to pay	prem	iums on a personal	_		N -
f	benefit contract?	 onalh	enefit contract?	7e 7f		No No
q	For all contributions of qualified intellectual property, did the organization file Form 8			7g		
h	For contributions of cars, boats, airpuines, and other vehicles, did the organization fi					
_	required?	•		7h		
8	Sponsoring organizations maintailing door advised funds and section 509(a)(3) suthe supporting organization, organization, of the supporting organization of the support o					
	business holdings at are time during the year?			8		
9	Sponsoring organizations mountaining donor advised funds.					
а	Did the organization may any totable distributions under section 4966?			9a		
Ь	Did the organization make a stribution to a donor, donor advisor, or related person	?.		9b		
10	Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12	10a	1			
	Gross receipts, included on Form 990, Part VIII, line 12	10a 10b				
-	facilities		<u> </u>			
11	Section 501(c)(12) organizations. Enter		ī			
	Gross income from members or shareholders	11a				
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	11b				
17-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 99	0 in 1:	ou of Form 10412	1,,		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	o in il	eu oi Foim 1041/ 	12a		
	vear	12b				

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

Section A. Governing Body and Management	Section A.	Governing	Body and	Management
--	------------	-----------	----------	------------

			Yes	No				
1a	Enter the number of voting members of the governing body							
b	Enter the number of voting members that are independent 1b 28							
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		Νο				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?							
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?							
5	Did the organization become aware during the year of a material diversion of the organization's assets? .							
6	Does the organization have members or stockholders?							
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of governing body?							
b	Are any decisions of the governing body subject to approval by members, stockholders, or other person 2	7b		Νo				
8	Did the organization contemporaneously document the meetings held or written actions undertaken using the year by the following							
а	a The governing body?							
b	Each committee with authority to act on behalf of the governing body?	8b	Yes					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedul 2	9		Νο				
	ection B. Policies (This Section B requests information about policies not required by the Internal							

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," does the organization have written policies and procedures, over. the activities of such chapters, affiliates, and branches to ensure their operations are consistent yith those of the organization?	10b	Yes	
11	Has the organization provided a copy of this Form 990 to all members wits governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to be lew the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees require to sclose annually interests that could give rise to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor the enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblover policy	13	Yes	
14	Does the organization have a written document tet intic and destruction policy?	14	Yes	
15	Did the process for determining compensation of a following persons include a review and approval by independent persons, comparability data, an icontemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Discountry p management official	15a	Yes	
b	Other officers or key employees of organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint very readre are agements under applicable federal tax law, and taken steps to safeguard the organization's exempt state with respect to such arrangements?	16b		

### Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed ►AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, KY, ME,  $\mathsf{MD}$  ,  $\mathsf{MA}$  ,  $\mathsf{MI}$  ,  $\mathsf{MN}$  ,  $\mathsf{MS}$  ,  $\mathsf{NH}$  ,  $\mathsf{NJ}$  ,  $\mathsf{NM}$  ,  $\mathsf{NY}$  ,  $\mathsf{NC}$  ,  $\mathsf{ND}$  ,  $\mathsf{OH}$  , OK, PA, RI, SC, TN, UT, VA, WA, WV, WI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply  $\overline{\hspace{-1em}/\hspace{-1em}}$  O wn website  $\overline{\hspace{-1em}/\hspace{-1em}}$  A nother's website  $\overline{\hspace{-1em}/\hspace{-1em}}$  U pon request
- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 FLORENCE CORSELLO 420 FIFTH AVENUE NEW YORK, NY 10018 (212) 852-8000

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. 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 organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than 100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of he 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 employ, es, i ghest compensated employees, and former such persons

Check this box if the organization did n	ot compen	sate any	/ curi	rent	or fo	rmer	ffice	r, director, truste	or ey mployee	
<b>(A)</b> Name and Title	<b>(B)</b> Average hours	Posit t	(C non ( hat a	ched	)			(D) Reportable complessauen	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key amployaa	Highest comper at r employee	For ier	from he or and ation (W- 2 1099 MSC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data				~						
				1						
			7							
			)—							

- Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶62

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.

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

	Yes	No_
3		No
4	Yes	
5		No

#### **Section B. Independent Contractors**

1b Total .

1 Complete this table for your five highest compensated independent contractors that it selled more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
TMA RESOURCES 1919 GALLOWS ROAD SUITE 400 VIENNA, VA 22182	TECHNICAL SERVICES	1,095,527
GRUPPO GALLEGOS 401 EAST OCEAN BOULEVARD 6TH FLOOR LONG BEACH, CA 90802	Mkting/COMMUNICATion	1,056,746
Hogan Lovells LLP 875 Third Avenue NEW YORK, NY 10022	Legal services	957,946
The Observatory LLC 157 Silvermine Rd NEW CANAAN, CT 06840	MKTNG/COMM	956,450
Mindtree Consulting 15 Independence BLVD Suite 410 WAYNE, NJ 07059	technical services	858,666
2 Total number of independer contractors (including but not limited to those listed above \$100,000 in compensation for the organization ►35	) who received more than	

Form **990** (2009)

Form 99								Page <b>9</b>
Part \	<b>/1111</b>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
## #	1a	Federated cam	paigns 1a	28,118				
ă O Tă	ь	Membership du	es <b>1b</b>					
ي. ∰	С	Fundraising eve	ents <b>1</b> c					
<u>≅</u> ,≅	d		zations 1d					
ins,	e	Government grants		2,243,337		ļ		
Contributions, gifts, grants and other similar amounts	f	All other contribution similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	3,769,473				
きま	g	Noncash contri lines 1a-1f \$ _	butions included in 3,342					
SE	h	Total. Add lines		▶	6,040,928			
				Business Code				<b>)</b>
Program Service Revenue	2a	MEETING AND LEA	RNING EVENTS	721,000	4,374,946	2,832,76	1,541 190	
æ ≅	ь	MEMBERSHIP DUE	s	624,100	37,076,203	37,07( 20)		
- 65 -	c							
Serv	d							
Ē	e							
Ö	f	All other progra	am service revenue					
	g	Total. Add lines	s 2a-2f		41,451,149			
	3		ome (including dividend	· . F	2,103,649			2,103,649
	4		ar amounts) stment of tax-exempt bond	F	2,103,043			2,103,043
	5			· · · ·	6,9,8/	T		6,932,854
			(ı) Real	(II) Personal	1			
	6a	Gross Rents						
	b	Less rental expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities 64,194,815	(II) O ther				
	ь	Less cost or other basis and sales expenses	62,998,000	Ca				
	c	Gain or (loss)	1,196,815		1 100 015			1 106 015
	d 8a	Net gain or (los Gross income f			1,196,815			1,196,815
Other Revenue		events (not inc \$	luding s reported on line 1c)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
othe	b c	Less direct ex Net income or (	penses . (loss) from Indraish.	events 🛌	0			
	9a	Gross income f See Part IV, l	m gaming ctivities e 19					
	b c	Less directex	ses b	vities	0			
	10a	Gross sales of returns and allo	ınventory, less	38,146,745				
	ь	Less cost of g	oods sold <b>b</b>	15,379,863				
	С	Net income or (	loss) from sales of inve		22,766,882	22,766,882		
		Miscellaneous	s Revenue	Business Code	54.405		64.405	
	11a 		S/SPONSORSHIP	541,800 541,900	64,185 85,168		64,185	85,168
	b	SOFTWARE MA		,	·			·
	d	GIFT SHOP SA	ue	453,220	20,368 79,205			20,368 79,205
	u   e	Total. Add lines	ı					. 5,203
	12			►	248,926 80,741,203	62,675,841	1,606,375	10,418,059

Form	990 (2009)				Page <b>10</b>
Part	IX Statement of Functional Expenses				
A.	Section $501(c)(3)$ and $501(c)(4)$ organizations in			(D)	
	Il other organizations must complete column (A) but are not required to		(B)	(D).	(D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	( <b>A</b> ) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations				
	in the U.S. See Part IV, line 21	6,318,826	6,318,826	]	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	423,106	423,106		•
5	Compensation of current officers, directors, trustees, and				
	key employees	1,909,899	1,299,090	33 928	278,881
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0	×		
7	Other salaries and wages	23,496,826	21 .00, 94	1,441,322	446,810
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,706,676	4,2 1,74	435,397	66,536
9	Other employee benefits	7,912,249	937,325	687,942	286,982
10	Payroll taxes	2,092, 56	1 369,767	193,612	29,587
11	Fees for services (non-employees)				
а	Management	130, c		130,000	
b	Legal	91 ,169		913,169	
c	Accounting	474,562		474,982	
d	Lobbying	07,000		307,000	
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	543,118		543,118	
g	Other	12,090,915	11,914,052	31,746	145,117
12	Advertising and promotion	1,134,817	1,115,592	12,555	6,670
13	Office expenses	1,664,692	1,615,941	22,255	26,496
14	Information technology	5,621,660	5,347,541	61,086	213,033
15	Royalties	0			
16	Occupancy	6,426,349	6,091,514	64,057	270,778
17	Travel	2,957,980	2,841,686	47,146	69,148
18	Payments of travel or entertainment experses it ap federal, state, or local public officials	0			
19	Conferences, conventions, and meeting	52,929		7,446	45,483
20	Interest	0			
<mark>21</mark>	Payments to affiliates	1,485,764	1,485,764		
22	Depreciation, depletion, and the ton	2,990,136	2,386,895	497,115	106,126
23	Insurance	279,688	245,797	33,891	
24	Other expenses Ite ize xpenses not covered above (Expenses grouped together and it eled in scellaneous may not exceed 5% of total expenses shown on the 25 below)				
а	MISCELLANEOUS	1,588,059	1,574,286	4,879	8,894
b					
с					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	85,521,806	77,280,619	6,240,646	2,000,541
26	Joint costs. Check here ► ☐ If following SOP 98-2  Complete this line only if the organization reported in column (B) joint costs from a combined educational		, , ==		
	campaign and fundraising solicitation				

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	52,834	1	48,491
	2	Savings and temporary cash investments	5,633,473	2	12,785,894
	3	Pledges and grants receivable, net	2,704,181	3	826,375
	4	Accounts receivable, net	6,727,472	4	7,645,560
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$ Complete Part II of			
		Schedule L	*. \	6	
ets	7	Notes and loans receivable, net		1	
Assets	8	Inventories for sale or use	7, 27,450	8	7,784,445
⋖	9	Prepaid expenses and deferred charges	1,071,531	9	1,206,838
	10a	Land, buildings, and equipment cost or other basis Complete 77,371,409			
	b	Less accumulated depreciation 10b 5. 393, 8	23,404,695	10c	21,477,681
	11	Investments—publicly traded securities	87,245,290	11	93,095,401
	12	Investments—other securities See Part IV, line 11	22,027,070	12	21,968,448
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	2,570,278	15	2,305,288
	16	Total assets. Add lines 1 through 15 (must equal line 34)	159,264,320	16	169,144,421
	17	Accounts payable and accrued expenses .	8,149,303	17	9,990,987
	18	Grants payable		18	
	19	Deferred revenue	4,236,834	19	9,122,030
	20	Tax-exempt bond liabilities		20	
<u>.</u>	21	Escrow or custodial account liability Complete 2017 Schedule D		21	
Liabilities	22	Payables to current and former officers, dece is, stees, key employees, highest compensated employees, and disqualified			
ä		persons Complete Part II of Schedules		22	
	23	Secured mortgages and notes parable unrelated third parties		23	
	24	Unsecured notes and loans proable to unrelated third parties		24	
	25	Other liabilities Complete lart affichedule D	28,007,807	25	38,004,297
	26	Total liabilities. A di lines throug 25	40,393,944	26	57,117,314
<b>У</b>		Organizations that follow SFAS 117, check here ► 🔽 and complete lines 27 through 29, and line 33 and 34.			
<u>ď</u>	27	Unrestricted net as ets	86,378,450	27	78,421,242
Balance	28	Temporarily restricted net assets	14,870,790	28	14,626,428
덛	29	Permanently restricted net assets	17,621,136	29	18,979,437
Fund		Organizations that do not follow SFAS 117, check here ▶ ┌ and complete			
2		lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ŋ€ţ	33	Total net assets or fund balances	118,870,376	33	112,027,107
	34	Total liabilities and net assets/fund balances	159,264,320	34	169,144,421

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	P	Yes	
C	If "Yes," to 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, explaining Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year level sued on a consolidated basis, separate basis, or both  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 audit, as a forth in the			
	Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organi ati n d d not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to a de go such audits	3b	Yes	

Form **990** (2009)



## OMB No 1545-0047

**EVALUATION: Compressor Add-on** 

# **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization is a section 501(c)(3) organization or a section

**Public Charity Status and Public Support** 

4947(a)(1) nonexempt charitable trust.

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

Inspection

Employer identification number

GIRL SCOUTS OF THE UNITED STATES OF AMERICA 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 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 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)(ii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a g 🔷 unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A v) An organization that normally receives a substantial part of its support from a government 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 I) An organization that normally receives (1) more than 331/3% of its support from intributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain except ons, and (2) no more than 331/3% 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, 2) omplete Part III ) An organization organized and operated exclusively to test or public safety. See section 509(a)(4). An organization organized and operated exclusively for the basely of the purposes of one or more publicly supported organizations described in section 5/9(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and conclete lines 11e through 11h Type III - Other Type I Type II pe III - Functionally integrated C By checking this box, I certify that the organization the controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than or por more sublicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determinating from the IRS that it is a Type I, Type II or Type III supporting organization, Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controlled their alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11q(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of persyn described in (i) or (ii) above? 11g(iii) h Provide the following information as ut the supported organization(s)

(i) Name of supported organization	(ii) EIN	Type of or anization described on lines 1- 9 above or IRC section (see	(iv) Is th organizat col (i) lis your gove docume	e lion in ted in erning	Did you no organiza col (i) o suppo	otify the tion in f your	(vi Is the organization col (i) or in the l	ne Ition in ganized	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

:	Support Schedule (Complete only if yo	for Organiza	box on line 5.	<b>ed in IRC 170</b> 7. or 8 of Part I	(b)(1)(A)(iv)	and 170(b)(	1)(A)(vi)
S	ection A. Public Support	<u> </u>	20% 011 11110 07	7 0. 0 0 0			
	endar year (or fiscal year beginning	(a) 200F	(h) 2006	(-) 2007	(4) 2008	(-) 2000	(f) Total
	ın)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
_	grants ")						
2	Tax revenues levied for the organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						1
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a				<b>—</b>		
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column				. 10	1	
6	(f) Public Support. Subtract line 5 from						
U	line 4			`			
S	ection B. Total Support						
	endar year (or fiscal year beginning	(-) 200F	(1) 2006	(c) 200	(d) 2008	(-) 2000	(6) T - 1 - 1
	ın)	(a) 2005	<b>(b)</b> 2006	(c) 2007	<b>(a)</b> 2008	( <b>e)</b> 2009	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
_	sources			V			
9	Net income from unrelated			*			
	business activities, whether or not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV ) Do not include gain or loss	_					
	from the sale of capital assets						
11	Total support (Add lines 7						
	through 10)					<u> </u>	
12	Gross receipts from related activiti	es, etc \ ee ins	ructions )			12	
13	First Five Years If the Form 990 is	for the "gan zati	on's first, second	third, fourth, or f	ifth tax year as a	501(c)(3) organ	
	check this box and <b>stop here</b>	$\mathbf{A}$					<b>►</b>
	action C. Computation of Du	lia vinnaut I	)araantaaa				
14	Public Support Percents & for 200			1.1 column (f)			
				II column (1))		14	
15	Public Support Perce cage for 2008	•				15	
16a					line 14 is 33 1/3%	% or more, check	
L	and <b>stop here.</b> The organization qua				a and line 1 Fig.	22 1/20/ 25 52 52	
D	33 1/3% support test—200c. If the box and stop here. The organization	_			a, and line 15 is	or more %درا دد	, check this
17=					ne 13 16a or 16	h and line 14	F-1
- / G	'a 10%-facts-and-circumstances test—2009. 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 mee						
	organization				,	,,	<b>▶</b> ┌
ь	10%-facts-and-circumstances test-	<b>–2008.</b> If the org	anızatıon dıd not d	heck a box on lir	ne 13, 16a, 16b,	or 17a and line	•
	15 is 10% or more, and if the organ	ıızatıon meets th	e "facts and cırcu	mstances" test, o	check this box ar	nd <b>stop here.</b>	
	Explain in Part IV how the organiza	tion meets the "f	acts and circumst	ances" test The	organization qua	lıfıes as a publıc	
	supported organization						<b>►</b> □
18	<b>Private Foundation</b> If the organizat	ion did not check	a box on line 13,	16a, 16b, 17a o	r 17b, check this	box and see	<b>⊾</b> ⊏

#### Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning **(b)** 2006 **(e)** 2009 (a) 2005 (c) 2007 (d) 2008 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do 44,680,237 44,371,110 39,993,526 40,248,756 44,994,937 214,288,566 not include any "unusual arants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished 43,485,203 41,029,687 45,652,162 41,521,943 40,979,501 212,668,496 in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 426,957,062 88,165,440 85,400,797 85,645,688 85,974,438 Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified 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 vear c Add lines 7a and 7b Public Support (Subtract line 7c 426,957,062 from line 6) Section B. Total Support Calendar year (or fiscal year **(b)** 2006 (c) 07 (a) 2005 (d) 2008 (e) 2009 (f) Total beginning in) Amounts from line 6 88,165,440 85,400,797 85,645,688 81,770,699 85,974,438 426,957,062 9 Gross income from interest, 10a dividends, payments received on securities loans, rents, 9,813,384 13,825,121 12,554,249 10,578,663 60,683,734 royalties and income from sımılar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 13,912,317 13,825,121 12,554,249 10,578,663 60,683,734 Add lines 10a and 10b Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of 27,538 460,461 531,580 120,115 248,926 1,788,620 capital assets (Explain in Part IV) Total support (Add ling 9,10c, 13 98,406,362 99,773,575 100.002.389 94.445.063 96.802.027 489,429,416 11 and 12) Form 990 $\mu$ for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, First Five Years If the check this box and stop ere Section C. Computation of Public Support Percentage Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f)) 15 15 87 236 % Public support percentage from 2008 Schedule A, Part III, line 15 16 87 626 % Section D. Computation of Investment Income Percentage column (f))

17	Investment inco	me percentage fo	r <b>2009</b> (lıne	10c column	(f) divided by	line 13 c

17	Threstment income	percentage for	2009 (line 100 col	umm (i) aivided by	line 13 column (1))

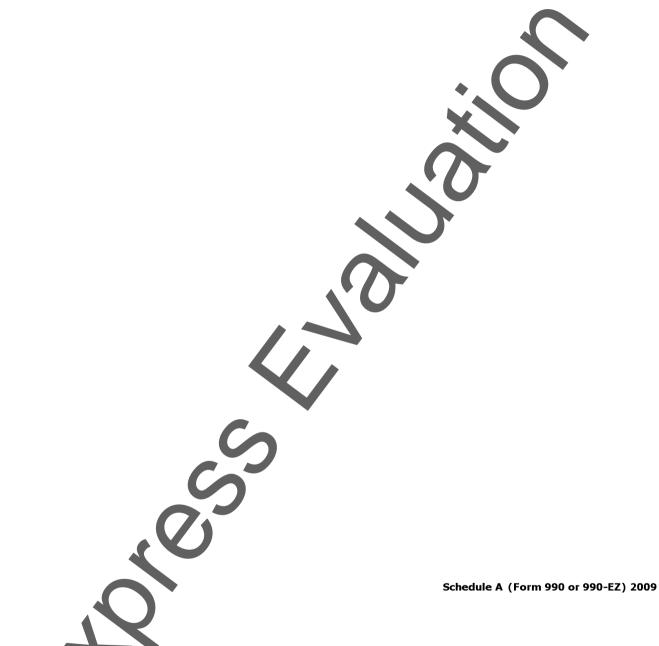
Investment income percentage from 2008 Schedule A, Part III, line 17 18

17	12 399	%
18	11 983	%

- 19a 33 1/3% support tests-2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

**Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions



DLN: 93493112002141

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

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

Open to Public Inspection

□ No

□ No

**EVALUATION: Compressor Add-on** 

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

◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Complete if the average sties is average and

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

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regain a p. xy tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA ntific tion number

·аг	t T-A	Complete if the or	ganization is exe	mpt under	section 501	(C) OF IS	s a servio		/ organization.
1	Provi	de a description of the org	janization's direct and	l ındırect politi	cal campaign a	ctivities ii	n Patt IV	-	

- Political expenditures
- Volunteer hours

art I-B	Complete if the	organization i	is exempt	<u>t under</u>	section !	501( <u>c)</u>	(-

- Enter the amount of any excise tax incurred by the organization under section 49 1
  - Enter the amount of any excise tax incurred by organization managers under
- If the organization incurred a section 4955 tax, did it file Form 4720 for this ye 3
- Was a correction made?
- If "Yes," describe in Part IV

(a) Name

#### Part I-C Complete if the organization is exempt under ction 501(c) except section 501(c)(3)

- Enter the amount directly expended by the filing organization for section 1/27 exempt function activities
- Enter the amount of the filing organization's funds contributable oother organizations for section 527 exempt funtion activities
- and on Form 1120-POL, line 17b Total exempt function expenditures Add lines 1 and 2 nter her

Address

Did the filing organization file Form 1120-POL for this

State the names, addresses and employer identification for the names, addresses and employer identification for the names of the name of the names of the name of the names of were made For each organization listed, enter the mount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and a city relivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) if additional space is needed, provide information in Part IV

(c) FIN

(4) (14)	42	(4) = 1.1	filing organization's funds If none, enter -0-	contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

(d) A mount paid from (e) A mount of political

P	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) and	filed Form 5768	(election
	Check I if the filing organization belongs to a	- · · · · · · · · · · · · · · · · · · ·		
В	Check I if the filing organization checked bo  Limits on Lobbying E  (The term "expenditures" means an		(a) Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	307,00	
c	Total lobbying expenditures (add lines 1a and 1	b)	30, 200	
d	Other exempt purpose expenditures		5,21 80,5	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	806, 521,806	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000, 10		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,00		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-		
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -		
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1, did the organization file Form 4720	reporting	┌─ Yes ┌ No

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

	Lobbying E. penartures During 4-Year Averaging Period					
	Calendar year (or fiscal ) ar beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	( <b>d)</b> 2009	<b>(e)</b> Total
2a	Lobbying non-taxable amoust	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
_c	Total lobbying expenditures	247,500	196,000	192,000	307,000	942,500
_d	Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures	0	0	0		0

# 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)).

	(election under se	ection 501(h)).			•		<i>(</i> 1.)	
				( a	a) 		(b)	
				Yes	No	A	moun	t
1		anızatıon attempt to ınfluence foreıgn, t to ınfluence publıc opınıon on a legısl						
а	V olunteers?				1			
Ь	Paid staff or management (includ	e 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 broa	adcast statements?						
f	Grants to other organizations for							
g		heir staffs, government officials, or a le						
h	Rallies, demonstrations, seminar	rs, conventions, speeches, lectures, or	any similar means?					
i	Other activities? If "Yes," descr	ibe in Part IV						
j	Total lines 1c through 1i							
2a		the organization to be not described in	n section 5.01(1) 3.)?					
Ь	·	tax incurred under section 4912	10					
C		tax incurred by organization manag						
		a section 4912 tax, did it file For , 47						
Par	t III-A Complete if the or 501(c)(6).	rganization is exempt under	ection 501(c)(4), section 5	501(c	)(5), (	or se	ectio	n
	(-)(-)		<u> </u>				Yes	No
1	Were substantially all (90% or m	nore) dues received nonde uctibe by r	nembers?		Γ	1		
2	Did the organization make only in	n-house lobbying expenditures of \$2,0	00 or less?		Γ	2		
3	Did the organization agree to car	ryover lobbying and older expenditi	ures from the prior year?			3		
Par	501(c)(6) if BOTH answered "Yes".	rganization is exempt under s Part III-A, lines 1 and 2 are	section 501(c)(4), section 5 answered "No" OR if Part I	501(c II-A,	)(5), ( line 3	or se is	ectio	n
1	Dues, assessments and similar a			1				
2	Section 162(e) non-deductible lo expenses for which the section 5	obby ng an 'positical expenditures (do i27() tax; as paid).	not include amounts of political					
а	Current year	1 4		2a				
Ь	Carryover from last yea			2b				
c	Total			2c				
3	Aggregate amount reported in 9	ction $6033(e)(1)(A)$ notices of nonded	ductible section 162(e) dues	3				
4		unt on line 2c exceeds the amount on arryover to the reasonable estimate of		4				
5	Taxable amount of lobbying and i	political expenditures (see instructions	5)	5				
Pa	rt IV Supplemental Info	ormation						
	nplete this part to provide the des o, complete this part for any addit	criptions required for Part I-A, line 1,	Part I-B, line 4 , Part I-C , line 5 , an	d Part	II-B, lin	e 1ı		
	Ident if ier	Return Reference	Explana	t ion				

**Employer identification number** 

OMB No 1545-0047

Open to Public Inspection

**EVALUATION: Compressor Add-on** 

## SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA

			13-	1624016		
Pa	organizations Maintaining Donor Acorganization answered "Yes" to Form 99		r Funds	or Accounts	. Comple	te if the
	organization answered Tes to Form 55	(a) Donor advised funds		(b) Funds and of	ther accou	nts
L	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
1	Aggregate value at end of year			<b>→</b> .		
5	Did the organization inform all donors and donor advi	<del>-</del>		sad	☐ Yes	┌ No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit	efit of the donor or donor advisor, or fo	or any oth		☐ Yes	┌ No
Pa	rt III Conservation Easements. Complete	ıf the organizatıon answered "Ye	s" ι Fo.	990, Part IV	, line 7.	
2	Preservation of land for public use (e.g., recreating Protection of natural habitat  Preservation of open space  Complete lines 2a-2d if the organization held a quality easement on the last day of the tax year	Preservation	a certifie	ically important d historic struct onservation		a
				Held at the	End of the	Year
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
c	Number of conservation easements on a certified his		2c			
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d			
3	Number of conservation easements modified, transfe	erred, elea extinguished, or termii	nated by th	ne organization (	during	
1	Number of states where property subject to conserv	ue easement is located 🗠				
5	Does the organization have a written policy regarding enforcement of the conservation easements it old	the riodic monitoring, inspection, l	handling of	violations, and	┌ Yes	┌ No
5	Staff and volunteer hours devoted to monity ring, .	cting and enforcing conservation ear	sements d	uring the year 🕨		
7	A mount of avnances incurred in monitor a in certi	na and anforcing concernation accom	anta durin	a +ba waar <b>b</b>		

4	Number of states where property subject to conserve us easyment is located F		
5	Does the organization have a written policy regard, the riodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it folds.	┌ Yes	┌ No
6	Staff and volunteer hours devoted to monitoring,		
7	A mount of expenses incurred in monitors a insecting, and enforcing conservation easements during the year 🕨 \$		
8	Does each conservation easement oported in line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ι) and 170(h)(4)(B)/(ι)?	┌ Yes	┌ No
9	In Part XIV, describe how the ordenization, eports conservation easements in its revenue and expense statement, an	d	

balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, opermitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
  - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2009

Par	t 🞹 Organizations Maintaining Co	ollections of Art, H	list	<u>ori</u>	<u>cal Treas</u>	ures, or Othe	<u>er Simila</u>	r Asse	ts (cc	ntınued)
3	Using the organization's accession and othe items (check all that apply)	er records, check any of	the	foll	owing that a	ire a significant	use of its co	llectio	1	
а	Public exhibition	c	i	Γ	Loan or ex	change program	S			
b	Scholarly research	€	:	$\Gamma$	Other					
С	Preservation for future generations									
4	Provide a description of the organization's c Part XIV	ollections and explain h	now	they	further the	organization's e	exempt purp	ose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than						mılar		′es	┌ No
Pa	rt IV Escrow and Custodial Arrang					on answered "	Yes" to Fo	n 990	),	
4-	Part IV, line 9, or reported an ar						2	-		
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	dian or other intermedia	iry f	orc	ontributions	or other assets	not	Г	Yes	Г No
b	If "Yes," explain the arrangement in Part XI	V and complete the foll	IIWO	ng ta	able			A mou	ınt	
c	Beginning balance					/ /c				
d	Additions during the year									
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on F	orm 990, Part X, line 2	1?				<u>'</u>	Г	Yes	┌ No
ь	If "Yes," explain the arrangement in Part XIV	v			~~(	<b></b>				
Pa	rt V Endowment Funds. Complete	ıf the organızatıon a	nsv	ver						
		(a)Current Year	(0)	_		)Two Years Back (	<b>d)</b> Three Years	Back (e	Four Y	ears Back
1a	Beginning of year balance	106,861,000	$\forall$	_	2,384,000					
Ь	Contributions	877,000	_		143,000					
С.	Investment earnings or losses	9,503,000			,442,000 1,191,000					
d	Grants or scholarships	5,77			1,646,000					
е	Other expenditures for facilities and programs	3,77	,		1,040,000					
f	Administrative expenses									
g	End of year balance	09,755 000		106	5,861,000					
2	Provide the estimated percentage of the year	er e doala ce held as								
а	Board designated or quasi-endowment	74000%%%								
b	Permanent endowment 🕨 17 000									
С	Term endowment ► 9 000 %									
3а	Are there endowment funds not in he poste	ssion of the organizatio	n th	nat a	re held and	administered fo	r the			
	organization by  (i) unrelated organizations							3a(i)	Yes	No No
	(ii) related organizations		•	•				3a(ii)		No
b	If "Yes" to 3a(II), are the Mater organization	ons listed as required or	• 1 Sc	:hed	ule R?.			3b		
4	Describe in Part XIV the intended uses of th	ne organization's endow	mei	nt fu	nds					
Pa	rt VI Investments—Land, Building	s, and Equipment.	Se	e F	orm 990, F	Part X, line 10				
	Description of investment				Cost or other (investment)	( <b>b)</b> Cost or other basis (other)	(c) Accumu depreciat		( <b>d</b> ) Boo	ok value
1a	Land		1			377,059	)			377,059
b	Buildings		Ī			51,966,122	32,8	61,591	19	9,104,531
С	Leasehold improvements					1,301,667	7 1,1	40,497		161,170
d	Equipment					23,726,561	21,8	91,640		1,834,921
е	Other									
		arms OOO Dark V aslices	/ D) \	1	70/-11		<b>-</b>		~	1 477 664

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EVALUATION

art VII Investments—Other Securities. Se (a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
nancial derivatives		
osely-held equity interests		
TERNATIONAL	3,914,833	
IVATE EQUITY	2,938,031	
DGE FUNDS	11,715,977	
AL ESTATE	3,372,607	
ORT TERM INVESTMENT	27,000	
TONT TENT INVESTMENT	27,000	
tal. (Column (b) should equal Form 990, Part X, col (B) line 12)	21,968,448	, ,
rt VIII Investments—Program Related. S		(reflection)
(a) Description of investment type	(b) Book value	Cost or enc. Car market value
		<del></del>
		<b>\</b>
	<del>                                     </del>	
tal. (Column (b) should equal Form 990, Part X, col (B) line 13 )	<b>P</b>	
art IX Other Assets. See Form 990, Part X,		1 (1)
(a) Desc	ription	(b) Book value
	74	
tal. (Column (b) should equal Form 990, F t X, col.(B) line Part X Other Liabil les. See Fol. 1 990, Par		
(a) De rriptio of Liability	( <b>b</b> ) A mount	
deral Income Taxes	0	
NDS HELD IN TRUST	820,605	
CRUED PENSION LIABILITY	37,183,692	
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1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 - 8		9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and	d 9	10	
Par	XII Reconciliation of Revenue per Audited Financial State	ements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		4	
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
e	Add lines <b>2a</b> through <b>2d</b>		³e	
3	Subtract line <b>2e</b> from line <b>1</b>		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a		
b	Other (Describe in Part XIV)	4b		
c	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line		5	
	Reconciliation of Expenses per Audited Financial Stat	temen Withxpenses	per F	Return
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	7b		
С	Other losses			
d	Other (Describe in Part XIV)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII line 7b	4a		
b	Other (Describe in Part XIV)	4b		
c	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total expenses Add lines 3 and 4c. (This should expan Form 990, Part I, lin	ne 18 )	5	
	t XIV Supplemental Information			
Con	pplete this part to provide the descriptions required for Part 7, lines 3, 5, and		rt IV , II	nes 1b and 2b,

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part 1, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

additional information		
Ident if ier	et urn. ence	Explanation
ENDOWMENT FUNDS	FORM 990, CHEDULE D, PART V, LINE 4	
RECONCILIATION OF CHANGE IN NET ASSETS	FOR 1990, CHEDULE D, PART XI, LINE 8	PENSION RELATED EXPENSES OTHER THAN NET PERIODIC PENSION COST \$-8,863,469 CHANGES IN VALUE OF DEFERRED GIFTS \$20,602 TOTAL OTHER \$-8,842,867
RECONCILIATION OF REVENUE	XII LINE 4B	ADMINISTRATIVE, MERCHANDISING, WAREHOUSING, ETC EXPENSES OF GIRL SCOUT MERCHANDISE \$12,437,674 JULIETTE GORDON LOW BIRTHPLACE cost of SALES \$-203,508 TOTAL OTHER \$12,234,166
RECONCILIATION OF EX. N. S.	F RM 990, SCHEDULE D, PART III, PART 4B	ADMINISTRATIVE, MERCHANDISING, WAREHOUSING, ETC EXPENSES OF GIRL SCOUT MERCHANDISE \$12,437,674 JULIETTE GORDON LOW BIRTHPLACE cost of SALES \$-203,508 TOTAL OTHER \$12,234,166
FIN 48 Footnote	Part X, Line 2	The Organization adopted new guidance that clarifies the accounting for uncertainty in tax positions taken or expected to be taken in a tax return, including issues relating to financial statement recognition and measurement. This standard provides that the tax effects from an uncertain tax position can be recognized in the consolidated financial statements only if the position is "more-likely-than-not" to be sustained if the position were to be challenged by a taxing authority. The standard also provides guidance on measurement, classification, interest and penalties, and disclosure. This standard had no material impact on the accompanying consolidated financial statements. The tax years ended 2007, 2008, and 2009 are still open to audit for both federal and state purposes. The Organization has processes presently in place to ensure the maintenance of its tax-exempt status, to identify and report unrelated income, to determine its filing and tax obligations in jurisdictions for which it has nexus, and to identify and evaluate other matters that may be considered tax positions.

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

DLN: 93493112002141

OMB No 1545-0047

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

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

Name of the organization						Employer identification	on number
GIRL SCOUTS OF THE UNITED STA	TES OF AMERICA					13-1624016	
Part I General Information	on on Grants and	l Assistance				<b>1</b>	
<ul> <li>Does the organization maintain the selection criteria used to av</li> <li>Describe in Part IV the organization</li> </ul>	ward the grants or as: ation's procedures fo	sistance <sup>?</sup> r monitoring the use o	f grant funds in the Unite	d States			√ Yes
Form 990, Part IV, lin Part IV and Schedule	e 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one			
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non cash assistanc	(f) Lethod of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grad or assistance
See Additional Data Table							\(\frac{7}{2}\)
				.0.			i c
							2
							<u>.</u>
		C	9				F
		0					=
<ul><li>2 Enter total number of section 5</li><li>3 Enter total number of other orga</li></ul>						_	

	\(\tau_1 \tau_1 \tau_2 \tau_1 = \tau_1 \tau_
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assis	stance	( <b>b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
					(0,	uo-p
						· Add
				70		npressor
			X			J: Com
Part IV Supplement	al Informa	tion. Complete this	part to rovide the info	rmation required in Par	t I, line 2, and any other a	additional information.
Ident if ier Re	eturn Referenc	ce Exp	planation			JU.
GRANTS PAID FO	RM 990, SCH	I P RL SUE	VITUAL GIRL SCOUT MOOR'S FOR GRANTS AND	EMBERS, AND GIRL SCO SCHOLARSHIPS ADDIT EMENT FOR ALL GRANTS	UT COUNCIL STAFF MEMBE IONALLY, FINANCIAL STAF	ARIOUS GIRL SCOUT COUNCILS, RS BY REVIEWING PROGRESS

Ident if ier	Return Reference	Explanation
GRANTS PAID	FORM 990, SCHEDULE I, P	THE ORGANICATION MONITORS GRANTS AND SCHOLARSHIPS AWARDED TO VARIOUS GIRL SCOUT COUNCILS, I UNITUAL GIRL SCOUT MEMBERS, AND GIRL SCOUT COUNCIL STAFF MEMBERS BY REVIEWING PROGRESS RESORDS FOR GRANTS AND SCHOLARSHIPS ADDITIONALLY, FINANCIAL STAFF REVIEWS ALL EXPENSES SUBMITTED FOR REIMBURSEMENT FOR ALL GRANTS AND SCHOLARSHIPS TO ENSURE COMPLIANCE WITH OUR SOLICIES AND PROCEDURES
	·	

Software ID:

**Software Version:** 

**EIN:** 13-1624016

Name: GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Form 990,Schedule I, Par	rt II, Grants ar	nd Other Assistanc	e to Governments	s and Organization	ns in the United	14.25	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable		(e) A mount of non- cash assistance		<b>g)</b> Description of n-cash assistance	(h) Purpose of grant or assistance
Girl Scout of Raintree Council 223 NW 2nd Street Evansville, IN 47708	35-0876380	501 (c)(3)	6,739		10		Program fulfillment
Girl Scouts of Northeast Texas6001 Summerside Drive Dallas,TX 75252	75-1101571	501 (c)(3)	8,417		<b>J</b>		Program fulfillment DP
Girl Scouts of Shawnee Council Inc153 McMillan Court Martinsburg, WV 254013752	52-0608013	501 (c)(3)	10067	10			Program fulfillment SS
GS of Central & Western Massachuset40 Harkness Avenue East Longmeadow, MA 010281016	04-2317694	501 (c)(3)	10,745				Program fulfillmen
Girl Scouts of Central and Western Massachusetts I40 Harkness Avenue East Longmeadow, MA 010281016	04-2103856	5 501 (c) ()	10,758				Program fulfillmenTY
Gırl Scouts of Southwest Indiana Inc223 NW 2nd Street Evansville,IL 47708	35-0876380	0	11,623				Program fulfillment
Gırl Scouts of North-Central Alabama Inc105 Heatherbrooke Park Drıve Bırmıngham, AL 352428008	3-02888.	501 (c)(3)	13,588				Program fulfillment
Gırl Scouts of Sılver Sage Council Inc1410 Etheridge Lane Boise, ID 837048407	82 1259644	501 (c)(3)	13,653				Program fulfillment
Girl Scouts of Southeast Florida Inc1224 West Indiantown Road Jupiter, FL 334583910	59-0657327	7 501 (c)(3)	13,755				Program fulfillment
Girl Scouts of Rhode Island Incorporated125 Charles Street Providence, RI 029042274	05-0300724	501 (c)(3)	17,109				Program fulfillment

Form 990, Schedule I, Part	t II, Grants an	d Other Assistanc	e to Governments	and Organization	is in the United Sta	ites	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GS of Minnesota & Wisco Lakes & Pines400 2Nd Avenue South Waite Park, MN 563871470	41-0877820	501 (c)(3)	17,497				Program fulfillment
Girl Scouts of New Mexico Trails Inc4000 Jefferson Plaza Northeast Albuquerque, NM 87109	85-6011246	5 501 (c)(3)	19,358		*iC		Program fulfillment
Girl Scouts of the Northwestern Great Lakes Inc2430 Finger Road Green Bay, WI 543024210	39-1016314	501 (c)(3)	19,559		Sr.		Program fulfillment UO-PP
Girl Scouts of Southern Alabama Inc3483 Springhill Avenue Mobile, AL 366081522	63-0421430	501 (c)(3)	19,659	191,			Program fulfillment A
Girl Scouts of Nassau County Inc110 Ring Road West Garden City, NY 115303296	11-2041443	501 (c)(3)	20) 7				Program fulfillment O S O
Girl Scouts Louisiana East Inc841 South Clearview Parkway New Orleans, LA 701213119	72-0453615	5 501 (c)(3)	20,837				Program fulfillment EVALUATIO
Girl Scouts of Kentucky's Wilderness Road Council 2277 Executive Drive Lexington, KY 405054807	61-0608104	5 11 (c)(3)	21,096				Program fulfillment
GS of Western Oklahoma Inc 121 Northeast 50Th Street Oklahoma City, OK 731051809	73 0677849	501 (c)(3)	21,599				Program fulfillment
Caribe Girl Scout Council Inc 500 Calle Elisa Colberg San Juan, PR 009079908	66-0200470	501 (c)(3)	21,629				Program fulfillment
Girl Scouts of the Jersey Shore Inc242 Adelphia Road Farmingdale, NJ 077273525	21-0731966	501 (c)(3)	21,876				Program fulfillment

Form 990,Schedule I, Part	t II, Grants an	d Other Assistance	to Governments	and Organization	șin the United Sta	tes	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Girl Scouts of the Sierra Nevada605 Washington Street Reno, NV 895034328	88-0060580	501 (c)(3)	22,320				Program fulfillment
GS of Southern Illinois4 Ginger Creek Parkway Glen Carbon, IL 620343537	37-0811488	501 (c)(3)	23,057		ii C		Program fulfillment
Girl Scouts of Louisiana- Pines to the Gulf1720 Kaliste Saloom Road Ste C1 Lafayette, LA 705086140	72-0488660	501 (c)(3)	23,376		Silve		Program fulfillment
Girl Scouts of Montana and Wyoming735 Grand Avenue Billings, MT 59102	81-6001486	501 (c)(3)	23,763	12			Program fulfillment Popy Joseph
Girl Scouts of Maine Inc138 Gannett Drive 280 South Portland, ME 041066909	01-0269802	501 (c)(3)	4,0 9	70			Program fulfillment
Girl Scouts of Middle Tennessee Inc4522 Granny White Pike Nashville,TN 372044139	62-0589380	501 (c)(3)	25,115				Program fulfillment O
GS of the Green & White Mountains1 Commerce Drive Bedford,NH 031106835	02-0243160	50. (3)	25,412				Program fulfillment 🕌
Girl Scouts of the Missouri Heartland Inc210 S Ingram Mill Road Springfield, MO 658026100	44-0 94913	501 (c)(3)	26,112				Program fulfillment
Girl Scouts - Diamonds of Arkansas Oklahoma and Te 615 West 29 Street North Little Rock, AR 721142132	71-0 99373	501 (c)(3)	27,379				Program fulfillment
Girl Scouts of Virginia Skyline Council Inc3663 Peters Creek Road NW Roanoke, VA 240192809	54-0737207	501 (c)(3)	27,590				Program fulfillment

Form 990, Schedule I, Par	t II, Grants an	d Other Assistance	to Governments	and Organization	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Girl Scouts of Greater Iowa 10715 Hickman Road Des Moines,IA 503223733	42-0698218	501 (c)(3)	28,360				Program fulfillment
Girl Scouts of Black Diamond Council Inc210 Hale Street Charleston, WV 253012208	55-0420373	501 (c)(3)	29,403				Program fulfillment
Girl Scouts of Southern Nevada Inc2941 Harris Avenue Las Vegas, NV 891012309	88-0060273	501 (c)(3)	30,097		atil		Program fulfillment
Girl Scout Commonwealth Council of Virginia Inc7300 Hanover Green Drive Mechanicsville, VA 231111705	54-0534506	501 (c)(3)	30,290	1211			Program fulfillment Uo-PPV Jos
Girl Scout Council of Greater New York Inc43 West 23rd Street New York, NY 100104283	13-1624014	501 (c)(3)	0,8 3				Program fulfillment 000000000000000000000000000000000000
GS of the Southern Appalachians1567 Downtown West Blvd Knoxville,TN 37918	62-0505206	501 (c)(3)	30,949				Program fulfillment O L V O I V O I
Girl Scouts of Greater South Texas202 East Madison Avenue Harlingen,TX 785504904	74-1256499	30 ~)(3	31,666				Program fulfillment
Girl Scouts of Michigan Shore to Shore3275 Walker Avenue NW Grand Rapids, MI 495449775	38 136691	501 (c)(3)	31,991				Program fulfillment
Girl Scouts of Central & Southern New Jersey40 Brace Road Cherry Hill, NJ 080342621	22-1928958	501 (c)(3)	32,455				Program fulfillment
Girl Scouts of Central California South4910 East Ashlan Avenue Suite 105 Fresno,CA 937263021	95-1766795	501 (c)(3)	32,950				Program fulfillment

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Girl Scout Council of the Florida Panhandle250 Pinewood Drive Tallahassee,FL 323034838	59-0760209	501 (c)(3)	33,369				Program fulfillment		
Girl Scouts of Eastern Washington & Northern Idaho 1404 North Ash Street Spokane, WA 992012806	91-0570844	501 (c)(3)	33,897		*iC		Program fulfillment		
GS of Greater Mississippi 1471 West County Line Road Jackson, MS 392137842	64-0384222	501 (c)(3)	34,449		Sr.		Program fulfillment		
Girl Scouts Heart of the South 2715 Kirby Parkway Suite 1 Memphis,TN 381198238	62-0502197	501 (c)(3)	34,907	12			Program fulfillment Sor Add		
Girl Scouts - Dakota Horizons Inc1101 South Marion Road Sioux Falls,SD 571063466	46-0250744	501 (c)(3)	5 1 8	70			Program fulfillment & World Wo		
GS of Central & Southern New Jersey40 Brace Road Cherry Hill,NJ 080342621	22-1928958	501 (c)(3)	35,581				Program fulfillment Z		
Girl Scouts of Kentuckiana Inc2115 Lexington Road Louisville, KY 40206	61-0444698	501(0,3)	36,482				Program fulfillment TAL		
Girl Scouts Heart of Michigan 601 West Maple Street Kalamazoo,MI 490081923	38-1581300	.01 (c)(3)	37,337				Program fulfillment		
Girl Scouts of Central Illinois Inc3020 Baker Drive Springfield, IL 627035918	17-06 1529	501 (c)(3)	37,367				Program fulfillment		
Girl Scouts Hornets Nest Council7007 Idlewild Road Charlotte, NC 282125751	56-0563842	501 (c)(3)	37,564				Program fulfillment		

Form 990,Schedule I, Part	t II, Grants an	d Other Assistance	to Governments	and Organization	s in the United Sta	tes	_
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Girl Scout Council of Colonial Coast912 Cedar Road Chesapeake, V A 233227002	54-1158412	501 (c)(3)	37,790				Program fulfillment
Girl Scouts of Northeast Texas6001 Summerside Drive Dallas,TX 75252	75-1101571	501 (c)(3)	37,886		*iC		Program fulfillment
Girl Scouts of Hawaii420 Wyllie Street Honolulu, HI 968171729	99-0073488	501 (c)(3)	38,798		Sr.		Program fulfillment O
Girl Scouts of Historic Georgia Inc6869 Columbus Road Lizella, GA 310521710	58-0566191	501 (c)(3)	39,251	18/1			Program fulfillment Vossa
Girl Scouts of Mount To MidlandsInc5 Independence PointSte 120 Greenville, SC 29615	57-0314433	501 (c)(3)	3 567				Program fulfillment Id
Girl Scouts Heart of New Jersey Inc120 Valley Road Montclair, NJ 070422399	22-1638950	501 (c)(3)	40,122				Program fulfillment L V V
Girl Scouts in the Heart of Pennsylvania Inc350 Hale Avenue Harrisburg, PA 171041518	24-0795960	50. c)(3	40,582				Program fulfillment
Girl Scouts of the Green and White Mountains1 Commerce Drive Bedford, NH 031106835	02-0243160	501 (c)(3)	41,036				Program fulfillment
GS of Great Chicago & Northw Indiana222 South Riverside Plaza2120 Chicago,IL 606066101	36-3871241	501 (c)(3)	41,600				Program fulfillment
Girl Scouts of O regon and Southwest Washington Inc 9620 SW Barbur Boulevard Portland, OR 97219	93-0399051	501 (c)(3)	41,821				Program fulfillment

Form 990,Schedule I, Par	t II, Grants an	d Other Assistance	to Governments	and Organization	s in the United Sta	tes	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Girl Scouts of Southwest Texas811 North Coker Loop Road San Antonio,TX 78216	74-1109759	501 (c)(3)	41,888				Program fulfillment
Girl Scouts of Utah445 E 4500 Street Salt Lake City, UT 841073101	87-0221612	501 (c)(3)	41,962		si C		Program fulfillment
Gırl Scouts of Eastern Pennsylvanıa Inc330 Manor Road Mıquon, PA 194441741	23-1352309	501 (c)(3)	42,277		Siri		Program fulfillment
Girl Scouts of Northeast Kansas and Northwest Miss 8383 Blue Parkway Drive Kansas City, MO 641334750	43-0892926	501 (c)(3)	42,290	13/1			Program fulfillment Possoud
GS Carolinas Peaks to Piedmont Inc8818 West Market Street Colfax,NC 27235	56-0577629	501 (c)(3)	42, 49				Program fulfillment OO:
Gırl Scouts of Western New York Inc70 Jewett Parkway Buffalo,NY 142142322	16-0743096	501 (c)(3	42,685				Program fulfillment V
Girl Scouts of Eastern South Carolina Inc2412 Pisgah Road Florence, SC 295017115	57-0341216	501	43,743				Program fulfillment <sup>W</sup>
Gırl Scouts of Eastern Iowa and Western Illinois I2011 2nd Avenue Rock Island,IL 612018831	2-1008848	501 (c)(3)	43,922				Program fulfillment
Girl Scouts of NYPENN Pathways Inc8170 Thompson Road Cicero, NY 13039	16-0844808	501 (c)(3)	44,015				Program fulfillment
Girl Scouts of the Texas Oklahoma Plains4901 Briarhaven Road Fort Worth,TX 761094499	75-0818162	501 (c)(3)	44,873				Program fulfillment

Form 990,Schedule I, Par	t II, Grants an	d Other Assistance	to Governments	and Organization	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Girl Scouts of Northern Indiana-Michiana 10008 Dupont Circle Drive East Fort Wayne, IN 46825	35-1054339	501 (c)(3)	45,434				Program fulfillment
Girl Scouts of Northeastern New York Inc8 Mountain View Avenue Albany, NY 122052804	14-1438466	501 (c)(3)	45,959		*iC		Program fulfillment
Girl Scouts of North East OhioOne Girl Scout Way Macedonia,OH 440562156	34-0726094	501 (c)(3)	47,137		Sr.		Program fulfillment
Girl Scouts - Western Oklahoma Inc121 Northeast 50th Street Oklahoma City, OK 731051809	73-0677849	501 (c)(3)	47,231	19/			Program fulfillment Apressor Add
Girl Scouts of Wisconsin - Badgerland Council Inc2710 Ski Lane Madison, WI 537133267	39-0806331	501 (c)(3)	47,10				Program fulfillment OO
Girl Scouts of the Desert Southwest - Southern New 9700 Girl Scout Way El Paso,TX 799243828	74-1189693	501 (c)(3),	48,006				Program fulfillment NHCH
Tongass Alaska Gırl Scout Councıl316 West 11th Street Juneau, AK 998011510	92-0028530	5 1 (c)(3)	48,294				Program fulfillment
Girl Scouts of Connecticut Inc340 Washington Street Hartford, CT 061063317	0 -0 46756	501 (c)(3)	48,523				Program fulfillment
Girl Scouts of Suffolk County Inc442 Moreland Road Commack,NY 117255708	11-2164434	501 (c)(3)	48,730				Program fulfillment
Girl Scouts - Spirit of Nebraska2121 South 44th Street Omaha,NE 681052809	47-0432299	501 (c)(3)	51,065				Program fulfillment

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GS of Northern Illinois12 N124 Coombs Road Elgin, IL 601248000	36-2358083	501 (c)(3)	51,302				Program fulfillment
Girl Scout Council of Orange County9500 Toledo Way Irvine,CA 92618	23-7395094	501 (c)(3)	52,710		• 0		Program fulfillment
Girl Scouts of Eastern Oklahoma Inc2432 East 51st Street Tulsa, OK 741056002	73-0579240	501 (c)(3)	52,840		atilo		Program fulfillment
Girl Scouts of Gateway Council Inc1000 Shearer Street Jacksonville, FL 322056055	59-0637857	501 (c)(3)	53,448	12			Program fulfillment 0-ppV 109
Girl Scouts of Central Indiana Inc1800 North Meridian Street Indianapolis, IN 46202	35-0876381	501 (c)(3)	3,7 5				Program fulfillment 000000000000000000000000000000000000
Girl Scouts of Colorado400 South Broadway Denver, CO 802090407	84-0410630	501 (c)(3)	54,869				Program fulfillment O
Girl Scouts Heart of Central California3005 Gold Canal Drive Rancho Cordova, CA 956706129	94-1582429	50 (2)	55,024				Program fulfillment → H
Girl Scouts of California's Central Coast801 South Victoria Avenue Suite 202 Ventura, CA 93003	61567162	501 (c)(3)	56,637				Program fulfillment
Girl Scouts of Central Maryland Inc4806 Seton Drive Baltimore, MD 212153247	52-0780207	501 (c)(3)	60,090				Program fulfillment
Girl Scouts of Kansas Heartland Inc360 Lexington Road Wichita, KS 672181700	48-0556718	501 (c)(3)	61,483				Program fulfillment

Form 990,Schedule I, Part	t II, Grants an	d Other Assistance	e to Governments	and Organization	s in the United Sta	tes	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Gırl Scouts of Greater Atlanta Inc5601 North Allen Road Mableton, GA 30126	58-0566190	501 (c)(3)	61,666				Program fulfillment
Gırl Scouts of Cıtrus Councıl Inc341 North Mılls Avenue Orlando,FL 328035753	59-0696293	501 (c)(3)	61,682		• 0		Program fulfillment
Girl Scouts of Wisconsin Southeast131 South 69 Street Milwaukee, WI 532141663	39-0892833	501 (c)(3)	61,795		atile		Program fulfillment
Girl Scouts of Western O hio 4930 Cornell Road Cincinnati, OH 452421804	31-0679091	501 (c)(3)	61,933				Program fulfillment ppy
Gırl Scouts of Western Pennsylvanıa30 Isabella Street Suite 207 Pittsburgh, PA 152125862	25-1126094	501 (c)(3)	71,948	10.			Program fulfillment 88
Gırl Scouts San Diego- Imperial Council Inc1231 Upas Street San Diego, CA 921035199	95-1644585	501 (c)(3)	63,441				Program fulfillment O L L O
Gırl Scouts of Ohio's Heartland Council Inc1700 WaterMark Drive Columbus, OH 432151097	31-4379475	±0 (c+3)	63,672				Program fulfillment ∀ ⊔
Sahuaro Gırl Scout Councıl Inc4300 East Broadway Boulevard Tucson, AZ 857113506	86 0985 7	501 (c)(3)	67,436				Program fulfillment
Girl Scouts of San Jacinto Council3110 Southwest Freeway Houston, TX 770984508	74-6,01254	501 (c)(3)	70,991				Program fulfillment
Gırl Scout Council of Tropical Florida Inc11347 SW 160 Street Miami, FL 331572703	59-0651087	501 (c)(3)	71,901				Program fulfillment

Form 990, Schedule I, Part	: II, Grants an	d Other Assistance	e to Governments	and Organization	s in the United Sta	tes	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Girl Scouts of West Central Florida Inc5002 West Lemon Street Tampa,FL 336091104	59-0624454	501 (c)(3)	74,579				Program fulfillment
Girl Scouts of San Gorgonio Council1751 Plum Lane Redlands,CA 923744533	95-1967727	501 (c)(3)	75,640		L.i.C		Program fulfillment
Gırl Scouts of Gulfcoast Florıda Inc4780 Cattlemen Road Sarasota, FL 34233	59-0760212	501 (c)(3)	77,718		Silve		Program fulfillment
Girl Scout Council - Frontier 2941 Harris Ave Las Vegas, NV 89101	88-0060273	501 (c)(3)	83,954	12			Program fulfillment Jo
Girl Scouts of Southeastern Michigan3011 West Grand Boulevard Ste 500 Detroit, MI 482023012	38-1359207	501 (c)(3)	9.202				Program fulfillment Sign
Girl Scouts-North Carolina Coastal Pines Inc6901 Pinecrest Road Raleigh, NC 276134538	56-0791500	501 (c)(3)	91,637				Program fulfillment OLLY
GS of Minnesota and Wisconsin River400 South Robert St StPaul, MN 551072214	41-0877820	50 i c)(3	93,002				Program fulfillment 🔛
Girl Scouts of Northern New Jersey Inc95 Newark Pompton Turnpike Riverdale, NJ 074571426	2-1512252	501 (c)(3)	100,777				Program fulfillment
Girl Scouts-Arizona Cactus- Pine Council Inc119 E Coronado Rd Phoenix,AZ 850041512	86-0133397	501 (c)(3)	101,060				Program fulfillment
Girl Scouts of Central Texas Inc12012 Park 35 Circle Austin, TX 78753	74-1109644	501 (c)(3)	103,832				Program fulfillment

(a) Name and address of	<b>(b)</b> EIN	(c) IRC Code section	(d) A mount of cash	(e) A mount of non-	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government		ıf applicable	grant	cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
Girl Scouts of Greater Los Angeles801 South Grand Avenue Suite 300 Los Angeles, CA 900174621	95-1644033	501 (c)(3)	106,649				Program fulfillment
Girl Scouts of Eastern Missouri Inc2300 Ball Drive St Louis, MO 63146	43-0662471	501 (c)(3)	115,491		*iC		Program fulfillment
Girl Scouts of Greater Chicago and Northwest India 222 South Riverside Plaza 2120 Chicago, IL 606066101	36-3871241	501 (c)(3)	116,984		Sr.		Program fulfillment
Gırl Scouts of Western Washıngton601 Valley Street Seattle, WA 981094229	91-6060940	501 (c)(3)	123,790	1.0,			Program fulfillment
Girl Scouts Heart of the Hudson Inc2 Great Oak Lane Pleasantville, NY 105702110	13-2985898	501 (c)(3)	134, 4				Program fulfillment S
Girl Scouts of Northern California7700 Edgewater Drive 340 Oakland, CA 946213017	94-1551410	501 (e)(3)	144,824				Program fulfillment
Girl Scout Council of the Nation's Capital4301 Connecticut Avenue NW Ste M2 Washington, DC 200082304	54-0732966	5.1 (c)(3)	146,895				Program fulfillment
Girl Scouts of Eastern Massachusetts Inc95 Berkeley Street Boston, MA 021166229			244,500				Program fulfillment

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DLN: 93493112002141

OMB No 1545-0047

Open to Public Inspection

**EVALUATION: Compressor Add-on** 

# Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

**Compensation Information** 

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

**Employer identification number** 

13-1624016

Pa	rt I Questions Regarding Compensation				
			1	Yes	Νo
1a		ided any of the following to or for a person listed in Form to provide any relevant information regarding these item			
	First-class or charter travel	Housing allowance or residence for personal us	ľ		
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fee			
	Discretionary spending account	Personal services (e g , maid, chauff chei,			
b	If any of the boxes in line 1a are checked, did the org reimbursement orprovision of all the expenses descri		1b		
2	Did the organization require substantiation prior to re				
	officers, directors, trustees, and the CEO/Executive	Director, regarding the items check it in line 1a?	2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the				
	✓ Compensation committee	Writter employment tontract			
	Independent compensation consultant	Com ensation survey or study			
	Form 990 of other organizations	Approximy the poard or compensation committee			
4	During the year, did any person listed in Form 990, P or a related organization	art VII Section A, fine 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control p	avment?	4a	Yes	
b	Participate in, or receive payment from, a supplemer	al r ualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equit	sed compensation arrangement?	4c	Yes	
	If "Yes" to any of lines 4a-c, list the persons a d n o	vide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	t complete lines 5-9.			
5	For persons listed in form 990, Part V.1, section A, li compensation contingent on the revenues o	ine 1a, did the organization pay or accrue any			
а	The organization?		5a	Yes	
ь	Any related organization		5b		Νo
	If "Yes," to line 5a or 3b, describe in Part III				
6	For persons listed in term 990, Port VII, Section A, li compensation contingen on the net earnings of	ine 1a, did the organization pay or accrue any			
а	The organization?		6a		Νo
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," de		7		No
8	Were any amounts reported in Form 990, Part VII, pa	·			
	subject to the initial contract exception described in	Regs section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III		8		Νo
9	If "Yes" to line 8, did the organization also follow the	rebuttable presumption procedure described in Regulations			

# Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation			(D) Nontaxable Total of colur		
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
M KATHRYN CLONINGER	(1) (11)	363,498 0	94,692 0	91,018 0	57,493 0	4 36 0	621,137 0	
Florence N Corsello	(I) (II)	292,436 0	43,723 0	79,595 0	70.7.0	12,974	499,518 0	G
NORMA I BARQUET	(ı) (ıı)	14,662 0	0	280,590 0	3 2 0	708	296,292 0	700
DELPHIA Y DUCKENS	(ı) (ıı)	201,754 0	18,537 0	13,732	32,539	9,606 0	276,168 0	O Service Control of the Control of
CLAIRE FERRARIN	(ı) (ıı)	176,107 0	0	22,66° 0	40,413	18,541 0	257,662 0	2000
BARRY HOROWITZ	(1) (11)	200,613		2 ,418 0	34,130 0	21,079 0	279,240 0	Ç
JACLYN E LIBO WITZ	(1) (11)	206,514	2 91	23,623	52,602 0	18,415 0	323,073 0	OITA
DEBORAH J LONG	(1) (11)	216,698 0	23,652	11,749 0	30,135 0	13,666	295,900	
LAUREL J RICHIE	(1) (11)	239,607	20,794	8,790 0	14,086 0	11,146 0	294,423	Ĺ
MARGIE M WANG	(I) (II)	206 001	0	22,511 0	24,901 0	21,377 0	274,790 0	
LAURIE A WESTLEY	(I) (II)	197,55 0	24,272 0	41,152 0	34,948 0	8,335 0	306,260 0	
Mıchael Watson	(1) (11)	171,009 0	21,689 0	33,179 0	21,069 0	18,172 0	265,118 0	

# Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
INFORMATION (1)	FORM 990, SCHEDULE J, PART I, LINE 4B	SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN K CLONINGER - \$45,827, F CORSELLO - \$39,05 % Westley \$651
INFORMATION (2)		Senior leadership team incentive compensation is based on performance targets including rescribed and other metrics approved by the GSUSA compensation committee
Compensation information (3)		Other taxable compensation paid to Norma Barquet included severance, ac rucl vac tio and other payments in connection with her termination





DLN: 93493112002141

OMB No 1545-0047

Open to Public Inspection

**EVALUATION: Compressor Add-on** 

# **SCHEDULE M** (Form 990)

Department of the Treasury

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

**NonCash Contributions** 

► Attach to Form 990. Internal Revenue Service

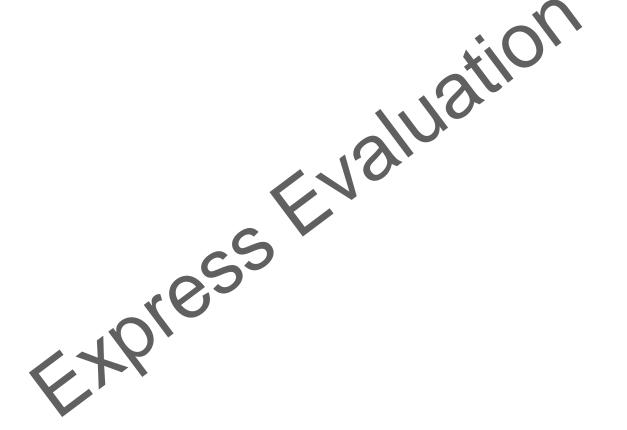
Name of the organization **Employer identification number** GIRL SCOUTS OF THE UNITED STATES OF AMERICA 13-1624016 **Types of Property** (b) (a) (c) Check Number of Contributions Revenues reported on Method q det mining ıf Form 990, Part VIII, line nues applicable 1 g 1 Art-Works of art . . 2 Art—Historical treasures 3 Art-Fractional interests 4 Books and publications Clothing and household goods . . . . . Cars and other vehicles Boats and planes . . . Intellectual property FMV 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 . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . . Collectibles . . . . 19 Food inventory . . . 20 Drugs and medical supplies 21 Taxidermy . . . . 22 Historical artifacts . 23 Scientific specimens . 24 Archeological artifacts . 48,805 FMV 1 Other > (telescopes 25 Other ►(\_ 26 Other ►( 27 28 Other ► ( Number of Forms 82 3 regived by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . No Yes 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . . . . . . . . . No 30a **b** If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . . . . . 32a Νo b If "Yes," describe in Part II If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

### Part II

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009



Software ID: **Software Version:** 

**EIN:** 13-1624016

Name: GIRL SCOUTS OF THE UNITED STATES OF AMERICA

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DLN: 93493112002141

**SCHEDULE 0** (Form 990)

# Supplemental Information to Form 990

2009

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990.

Open to Public Inspection

Name of the organization
GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identif at. number

13-1624016

ldentifier	Return Reference	Explanation
TOTAL NUMBER OF VOLUNTEERS	FORM 990, PART I, LINE 6	ALL ADULT MEMBERS, WHO ARE NOT EMPLOYEES OF G. SCOUR OF THE UNITED STATES OF AMERICA, ARE CONSIDERED VOLUNTEERS OF THE ORGAL ZATION

ldentifier	Return Reference	Explanation
OTHER PROGRAM SERVICES	FORM 990, PART III, LINE 4D	INTERNATIONAL SERVICES PROVIDES OPPORTUNITIES FO. GIRLS AND ADULTS FROM ACROSS BORDERS AND DIVERSE CULTURES TO LIVE, PLAN, AND WON, TO JETHER FOR A PERIOD OF TIME GIRL SCOUTS MERCHANDISE PROVIDES Program materials TO IV. MBERS PARTICIPATING IN GIRL SCOUT PROGRAMS AND PROMOTES THE GIRL SCOUT BRAND. ND MINJON

ldentifier	Return Reference	Exprenation
OFFICERS, EMPLOYEES, OR AGENTS OUTSIDE THE U S	FORM 990, PART IV, LINE 14A	THE ORGANIZATION SEPLES OVERSEAS COMMITTEES THROUGHOUT THE WORLD THAT SERVE MANY MILITARY AND VILIAN LOCATIONS THE ORGANIZATION PAYS THESE EMPLOYEES AS A MATHER CONVENIENCE AND IS REIMBURSED 100% BY THE LOCAL OVERSEAS COUNCILS

Identifier	Return Reference	Explanation
POLICIES	FORM 990, PART VI,	OUR FORM 990 IS PROVIDE" VIA THE BOARD INTRANET TO OUR BOARD MEMBERS AND IS
(1)	SECTION A, LINE 11	REVIEWED BY THE ALIDIT COMMITTEE OF THE NATIONAL BOARD

Identifier	Return Reference	Explanation
POLICIES	FORM 990, PART VI,	EACH EMPLOYEE, OD BY ARD MEMBER IS REQUIRED TO ANNUALLY COMPLETE A DISCLOSURE FORM
(2)	SECTION B, LINE	THAT REQUESS DISCLOSURE OF ANY CONFLICTS OF INTEREST. THE ORGANIZATION ENSURES EACH
	12C	EMPLOYEE AND YOARD MEMBER HAS COMPLETED THE FORM AND MAINTAINS THE DOCUMENTATION

ldentifier	Return Reference	Explanation
POLICIES (3)	FORM 990, PAR VI, SECTION P LINE 15B	THE ORGINIZATION FOLLOWS A CONSISTENT PROCESS TO DETERMINE SALARIES OF THE CEO AND TOP MANAGEN ENT WHICH INCLUDES 1 USING AN INDEPENDENT CONSULTING FIRM WHO PRESENTS ACOMMENDATIONS TO THE CEO AND NATIONAL BOARD EXECUTIVE COMPENSATION COMMITTEE, 2 GATH KING BENCHMARKS, MARKET ASSESSMENTS, AND SALARY RECOMMENDATIONS, 3 DELIBERATING NO COUMENTING FINDINGS TO VALIDATE EXECUTIVE COMPENSATION

ldentifier	Return Reference	Explanation
DISCLOSURES	FORM 990, PART VI, SECTION C	THE ORGANIZATION PROVIDES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS UPON REQUEST ADDITIONALLY, OUR AUDITED FINANCIAL STATEMENTS and Form 990 ARE AVAILABLE TO THE GENERAL PUBLIC VIA OUR WEBSITE

ldentifier	Return Reference	Explanation
Form 990, Part X, Line 4		The adjustment was made to the opening balance of accounts receivable and deferred income reducing each by \$398,904. Accounts receivable was recorded for memberships dues not earned and deferred revenue for memberships dues not collected during the first few days of the next fiscal year.

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DLN: 93493112002141

OMB No 1545-0047

2009

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# **SCHEDULE R** (Form 990)

Department of the Treasury

**Related Organizations and Unrelated Partnerships** ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

ternal Revenue Service					Inspection	
ame of the organization IRL SCOUTS OF THE UNITED STATES OF AMERICA				Employer identifica	tion number	
Part I Identification of Disregarded Entities (Comp	lete if the organization	answered "Yes" or	ı Form 990, Part IV			
(a) Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income Er	-of-year assets	<b>(f)</b> Direct controlling entity	
			50			
		10				
Part II Identification of Related Tax-Exempt Organior more related tax-exempt organizations during t	izations (Complete in the tax (ea.)	the organization ar	nswered "Yes" on F	orm 990, Part IV,	line 34 because it had c	ne (
(a) Name, address, and EIN of related organization	(b) rimary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	-
WORLD FDN FOR GIRL guides & girl scouts 420 fifth avenue 14th floor new york, NY 10018 23-7147834	GIRL SCOUTING	NY	501(c)(3)	5	GIRL SCOUTS	

(a) lame, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end- assets	of-year	(h) Dispropition allocations	? amoun Sch	(i) de V—UBI t in box 20 of edule K-1 orm 1065)	(j Gener mana partr	ral or iging
						•		es N	0		Yes	No
						10						() () ()
					10							3
			cations Taxable a elated organization	s corporation of	<b>r Trust</b> (Complete oration or trust durin			nswered	"Yes" on	Form 990, P	art IV,	
(a) Name, address, and EIN o	f related organization	(b) Primary a		(c) Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of Incon	total	<b>(g)</b> Share of end-of-year assets	(h) Percentag ownership		V   -   V / \ \
		1	<b>)</b>									

Sched	dule R (Form 990) 2009		Pa	age <b>3</b>
Par	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
<b>1</b> Du	uring the tax year, did the orgranization 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 (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to other organization(s)	1b		No
c	Gift, grant, or capital contribution from other organization(s)	<b>1</b> c		No
d	Loans or loan guarantees to or for other organization(s)	1d		No
e	Loans or loan guarantees by other organization(s)	1e		No
f	Sale of assets to other organization(s)	1f		No
g	Purchase of assets from other organization(s)	<b>1</b> g		No
h	Exchange of assets	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		No
	Lease of facilities, equipment, or other assets from other organization(s)	1j		No -
_		1k		No <
	Performance of services or membership or fundraising solicitations for other organization(s)  Performance of services or membership or fundraising solicitations by other organization(s)	11		No S
		1m	Yes	110 0
	Sharing of facilities, equipment, mailing lists, or other assets	1n		- 5
п	Sharing of paid employees		103	<del>-</del>
o	Reimbursement paid to other organization for expenses	10		No .
р	Reimbursement paid by other organization for expenses	<b>1</b> p		No

 2	If the answer to any of the above is "Yes," see the in-	uc on	s for information on who must complete this line, including covered relationships and transaction thresholds

q O ther transfer of cash or property to other organization(s)
 r O ther transfer of cash or property from other organization(s)

(a) None of other organization	<b>(b)</b> Transaction type(a-r)	(c) Amount involved
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

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

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	secti 501(c organiz	tion c)(3) zations?	(e) Share of end-of-year assets	(f) Disproprtionate allocations	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	( <b>l</b> Gene mana part	nag ing tner?
			Yes	No		Yes No		Yes	N
					11/2			+	_
					7/0				igg
		-	1	4				+	-
		G							f
		5			<u> </u>			+	<u> </u>
	1				 				-
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X								+	+
			+					+	+
									<u> </u>
			!		<b>1</b>				

Software ID:

**Software Version:** 

**EIN:** 13-1624016

Name: GIRL SCOUTS OF THE UNITED STATES OF AMERICA

## Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program se	ervices			'Sill	
(Code	) (Expenses \$	15,283,824	including grants of \$	198, 850 Revenue \$	7,332,579 )
See Attachment 1					



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
<b>(A)</b> Name and Title	(B) Average hours per		tion ( that a				1	(D) Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation	
	week	Individual trustee or director	Institutional Trustee	Officel	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
CONNIE LINDSEY national president	100	x						0	0	0	
DAVIA TEMIN	100	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						0	*.	0	
first vice president	10 0	X						0		0	
LINDA P FOREMAN Second vice president	100	x						0	0	0	
LINDA MAZON-GUTIERREZ secretary	10 0	х							0	0	
JOAN WAGNON treasurer	10 0	х							0	0	
SYLVIA ACEVEDO	5 0	Х							0	0	
BOARD MEMBER BARBARA ADACHI											
BOARD MEMBER	5 0	X						0	0	0	
CATHERINE COUGHLIN BOARD MEMBER	5 0	Х						0	0	0	
HARRIETT EDELMAN BOARD MEMBER	5 0	х				1		0	0	0	
ROCKY EGUSQUIZA BOARD MEMBER	5 0	х						0	0	0	
ELLEN FOX BOARD MEMBER	5 0	х		2				0	0	0	
LISA GUILLERMIN GABLE BOARD MEMBER	5 0	Х						0	0	0	
NAN C HILLIS BOARD MEMBER	5 0	х						0	0	0	
MICHELLE HOLIDAY BOARD MEMBER	5 (							0	0	0	
JOHN HOM BOARD MEMBER	-0	X						0	0	0	
MARIE C JOHNS BOARD MEMBER-until Aug 2010	j 0	Х						0	0	0	
INGRID SAUDERS JONES BOARD MEMBER	5 0	х						0	0	0	
KAREN MALONEY BOARD MEMBER	5 0	х						0	0	0	
SHARON H MATTHEWS BOARD MEMBER	5 0	х						0	0	0	
ROBERT MORRIS BOARD MEMBER	5 0	Х						0	0	0	
DEBRA NAKATOMI BOARD MEMBER	5 0	Х						0	0	0	
SUSAN PETERS BOARD MEMBER	5 0	Х						0	0	0	
VIKKI PRYOR BOARD MEMBER-until Sep 2010	5 0	Х						0	0	0	
PATRICIA BOWE ROMINES BOARD MEMBER	5 0	Х						0	0	0	
RHEA SCHWARTZ BOARD MEMBER	5 0	x						0	0	0	

#### Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (D) (E) (F) Name and Title Average Position (check all Reportable Reportable Estimated hours that apply) compensation compensation amount of other per from the from related compensation Highest compensated employee organization (Worganizations from the week Institutional Trustee Individual trustee or director ₹ © 2/1099-MISC) (W-2/1099organization and MISC) related Former emplo) ee organizations SARA SCHWEBEL 5 0 Χ 0 BOARD MEMBER EILEEN SCOTT 5 0 0 Χ **BOARD MEMBER** MARISA TABIZON THOMPSON 5 0 Χ **BOARD MEMBER** GAIL M TALBOTT 5 0 Χ BOARD MEMBER mitchell martin 5 0 Χ Board member M KATHRYN CLONINGER 45 0 Х 549,208 71,929 CEO Florence N Corsello 450 415,754 83,764 CFO/Senior vice president DELPHIA Y DUCKENS 234,023 42,145 450 SENIOR VICE PRESIDENT BARRY HOROWITZ 224,031 55,209 Х VP & GENERAL MANAGER JACLYN E LIBOWITZ 252,056 71,017 Χ CHIEFOFSTAFF LAUREL J RICHIE 0 Х 269,191 25,232 SENIOR VICE PRESIDENT MARGIE M WANG 228,512 46,278 45 O Χ VICE PRESIDENT NORMA I BARQUET 295,252 450 Х 1,040 EXEC VICE PRESIDENT CLAIRE FERRARIN 58,954 45 0 Х 198,708 VICE PRESIDENT DEBORAH J LONG 45 0 Χ 252,099 43,801 SENIOR VICE PRESIDENT LAURIE A WESTLEY 450 Χ 262,977 43,283 SENIOR VICE PRESIDENT Michael Watson 45 0 Х 225,877 39,241 Senior vice president