

Cumulative e-File History 2019

Federal

Tax Return	Return Type
9895NA	990

Taxpayer
Girl Scouts of the United States of America

Submitted Date	2021-05-11 12:51:43
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Acknowledgement Date	2021-05-11 13:29:38
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Status	Accepted
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Submission ID	26377520211315000004
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IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2019, or fiscal year beginning 10/01, 2019, and ending 09/30, 20 20

Department of the Treasury
Internal Revenue Service

▶ Do not send to the IRS. Keep for your records.
▶ Go to www.irs.gov/Form8879EO for the latest information.

2019

Name of exempt organization <u>GIRL SCOUTS OF THE UNITED STATES OF AMERICA</u>	Employer identification number <u>13-1624016</u>
Name and title of officer <u>ANGELA OLDEN, CFO</u>	

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>112222860.</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5).	4b	
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize GRANT THORNTON LLP to enter my PIN 2 6 2 3 4 as my signature

ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ *Angela Olden* Date ▶ 5/11/2021

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 2 6 3 7 7 5 3 6 6 0 5

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ *Scott Sampson* Date ▶ 5/7/2021

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

- ▶ Do not enter Social Security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2019

Open to Public Inspection

A For the **2019** calendar year, or tax year beginning **10/01, 2019**, and ending **09/30, 2020**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA				D Employer identification number 13-1624016	
	Doing Business As				E Telephone number (212) 852-8000	
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite			
	420 FIFTH AVENUE					
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10018						G Gross receipts \$ 250,343,069.
F Name and address of principal officer: JUDITH BATTY 420 FIFTH AVENUE, NEW YORK, NY 10018						H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
						H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
						If "No," attach a list. (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527						H(c) Group exemption number ▶
J Website: WWW.GIRLSCOUTS.ORG						
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶				L Year of formation: 1915		M State of legal domicile: DC

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: GIRL SCOUTING BUILDS GIRLS OF COURAGE, CONFIDENCE, AND CHARACTER, WHO MAKE THE WORLD A BETTER PLACE.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	29.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	29.
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	558.
	6 Total number of volunteers (estimate if necessary)	6	692,000.
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	1,545,107.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	15,611,118.	8,054,845.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	66,909,812.	58,874,607.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,954,613.	19,924,217.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	34,577,441.	25,369,191.
		122,052,984.	112,222,860.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,658,742.	3,232,296.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	329,072.	260,660.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	54,929,608.	58,625,584.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	477,775.	626,642.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,399,068.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	68,645,416.	60,024,941.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	130,040,613.	122,770,123.	
19 Revenue less expenses. Subtract line 18 from line 12	-7,987,629.	-10,547,263.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	271,397,447.	258,877,900.
	22 Net assets or fund balances. Subtract line 21 from line 20.	83,678,948.	79,796,900.
	187,718,499.	179,081,000.	

Part II Signature Block

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

Sign Here	Signature of officer	Date
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name SCOTT THOMPSETT	Preparer's signature <i>Scott Thompson</i>	Date 5/7/2021	Check <input type="checkbox"/> if self-employed	PTIN P00741490
	Firm's name ▶ GRANT THORNTON LLP	Firm's EIN ▶ 36-605558			
	Firm's address ▶ 757 THIRD AVENUE, 3RD FLOOR NEW YORK, NY 10017-2013	Phone no. 212-599-0100			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2019)

Application for Automatic Extension of Time To File an Exempt Organization Return

► **File a separate application for each return.**
► **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Taxpayer identification number (TIN) 13-1624016
	Number, street, and room or suite no. If a P.O. box, see instructions. 420 FIFTH AVENUE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10018	

Enter the Return Code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

ANGELA OLDEN

- The books are in the care of ► 420 FIFTH AVENUE NEW YORK NY 10018

Telephone No. ► 212 852-8000 Fax No. ► _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until 08/16, 2021, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- calendar year 20 ____ or
- tax year beginning 10/01, 2019, and ending 09/30, 2020.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b \$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c \$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission:

ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

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

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

4a (Code:) (Expenses \$ 45,085,253. including grants of \$ 2,034,803.) (Revenue \$ 39,896,025.)

ATTACHMENT 2

4b (Code:) (Expenses \$ 42,509,872. including grants of \$ 1,193,034.) (Revenue \$ 27,081,046.)

ATTACHMENT 3

4c (Code:) (Expenses \$ 18,768,859. including grants of \$ 4,459.) (Revenue \$ 9,117,216.)

ATTACHMENT 4

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

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

4e Total program service expenses ▶ 106,363,984.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?.	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions).	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		192
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee reporting, tax returns, business income, foreign accounts, prohibited transactions, and charitable trusts.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (29), 1b (29), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 5
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SYLVIA ACEVEDO (THRU 08/2020) CEO & EX OFFICIO BD	35.00 0.			X				687,756.	0.	44,376.
(2) ANTHONY DOYE (THRU 03/2020) CHIEF OPERATING OFFICER	35.00 0.				X			456,824.	0.	54,909.
(3) LYNELLE MCKAY CHIEF CUSTOMER OFFICER	35.00 0.				X			402,775.	0.	47,169.
(4) ANGELA OLDEN CHIEF FINANCIAL OFFICER	35.00 0.			X				387,964.	0.	54,458.
(5) BARRY HOROWITZ CHIEF REVENUE OFFICER	35.00 0.				X			366,903.	0.	70,170.
(6) JENNIFER ROCHON GENERAL COUNSEL	35.00 0.				X			383,302.	0.	48,517.
(7) SAPREET KAUR SALUJA CHIEF STR PSHIP/NEW VENT OFF	35.00 0.				X			358,069.	0.	36,997.
(8) FLORENCE GODFREY (THRU 01/2020) CHIEF BRAND MKTG & COMM. OFF.	35.00 0.				X			296,119.	0.	53,039.
(9) ANNETTE FREYTAG (THRU 09/2020) CHIEF OF STAFF	35.00 0.				X			306,448.	0.	30,219.
(10) AMY BERKOWITZ (THRU 11/2019) CHIEF INFORMATION OFFICER	35.00 0.				X			282,261.	0.	30,547.
(11) BERNICE JOHNSON (THRU 07/2020) VP PROCUREMENT/SUSTAINABILITY	35.00 0.					X		240,407.	0.	50,052.
(12) DANIEL SCHULTZE (THRU 09/2020) SR. DIRECTOR, PROD./PLAT./SVCS	35.00 0.					X		265,378.	0.	23,014.
(13) ANDREA BASTIANI ARCHIBALD CH. FAM. ENG OFF (THRU 10/19)	35.00 0.				X			234,370.	0.	49,877.
(14) MAUREEN MCNERNEY CHIEF PEOPLE OFFICER	35.00 0.				X			236,703.	0.	43,219.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) SOFINA QURESHI (THRU 09/2020) VP, GS COOKIE PROGRAM	35.00 0.					X		224,972.	0.	28,354.
(16) BARRY JOSEPH (THRU 09/2020) DIRECTOR, DIGITAL USER EXPER.	35.00 0.					X		220,469.	0.	22,489.
(17) DIANE REIGER VP, IT BUSINESS OPERATIONS	35.00 0.					X		217,891.	0.	14,083.
(18) AMY BODIN CHIEF ADMIN OFFICER	35.00 0.				X			160,468.	0.	8,044.
(19) SARAH ANGEL-JOHNSON (THRU 06/1 CHIEF ENTERPRISE INTEG. OFF.	0. 0.						X	138,294.	0.	23,133.
(20) KATHY HOPINKAH HANNAN NATIONAL PRESIDENT	10.00 0.	X		X				0.	0.	0.
(21) SHARON HOSKIN MATTHEWS FIRST VICE PRESIDENT	10.00 0.	X		X				0.	0.	0.
(22) JEANNE KWONG BICKFORD SECOND VICE PRESIDENT	10.00 0.	X		X				0.	0.	0.
(23) JEANMARIE C GRISI TREASURER	10.00 0.	X		X				0.	0.	0.
(24) NOORAIN KHAN SECRETARY	10.00 0.	X		X				0.	0.	0.
(25) JENNY ALONZO BOARD MEMBER	5.00 0.	X						0.	0.	0.
1b Sub-total								5,867,373.	0.	732,666.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								5,867,373.	0.	732,666.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶ 170**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 6		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶ 69**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) MARY ANN ALTERGOTT BOARD MEMBER	5.00 0.	X					0.	0.	0.	
(27) MARY STENGEL AUSTEN BOARD MEMBER	5.00 0.	X					0.	0.	0.	
(28) JUDITH N. BATTY BM./INTERIM CEO (AS OF 8/2020)	35.00 0.	X		X			0.	0.	0.	
(29) ANNE CHOW BOARD MEMBER (THRU 02/2020)	5.00 0.	X					0.	0.	0.	
(30) WENDY DRUMMOND BOARD MEMBER	5.00 0.	X					0.	0.	0.	
(31) CHARLES GARCIA JR BOARD MEMBER	5.00 0.	X					0.	0.	0.	
(32) VICKI GARDNER BOARD MEMBER	5.00 0.	X					0.	0.	0.	
(33) VALARIE A. GELB BOARD MEMBER	5.00 0.	X					0.	0.	0.	
(34) HEATHER HIGGINBOTTOM BOARD MEMBER	5.00 0.	X					0.	0.	0.	
(35) KAREN P. LAYNG BOARD MEMBER	5.00 0.	X					0.	0.	0.	
(36) ROSE LITTLEJOHN BOARD MEMBER	5.00 0.	X					0.	0.	0.	
1b Sub-total							0.	0.	0.	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 170

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

Section B. Independent Contractors

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(37) SUSAN MAJOR ----- BOARD MEMBER	5.00 ----- 0.	X						0.	0.	0.
(38) MINA NGUYEN ----- BOARD MEMBER	5.00 ----- 0.	X						0.	0.	0.
(39) DEBRA NIELSON ----- BOARD MEMBER	5.00 ----- 0.	X						0.	0.	0.
(40) ERIKA ROTTENBERG ----- BOARD MEMBER	5.00 ----- 0.	X						0.	0.	0.
(41) TROOPER SANDERS ----- BOARD MEMBER	5.00 ----- 0.	X						0.	0.	0.
(42) BECKY SCHMITT ----- BOARD MEMBER	5.00 ----- 0.	X						0.	0.	0.
(43) SUZANNE WADE ----- BOARD MEMBER	5.00 ----- 0.	X						0.	0.	0.
(44) LORIA YEADON ----- BOARD MEMBER	5.00 ----- 0.	X						0.	0.	0.
(45) EILEEN DRAKE ----- BOARD MEMBER (AS OF 12/2019)	5.00 ----- 0.	X						0.	0.	0.
(46) BRIT MORIN ----- BOARD MEMBER (AS OF 12/2019)	5.00 ----- 0.	X						0.	0.	0.
(47) ILEANA MUSA ----- BOARD MEMBER (AS OF 02/2020)	5.00 ----- 0.	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 170

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

Section B. Independent Contractors

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(48) EARL SIMPKINS JR. ----- BOARD MEMBER (AS OF 12/2019)	5.00 ----- 0.	X						0.	0.	0.
(49) DIANE TIPTON ----- BOARD MEMBER (AS OF 12/2019)	5.00 ----- 0.	X						0.	0.	0.
(50) RACHEL ROCHÉ WALTON ----- BOARD MEMBER (AS OF 12/2019)	5.00 ----- 0.	X						0.	0.	0.
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1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 170

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

Section B. Independent Contractors

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶**

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	20,417.				
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions) . .	1e	429,631.				
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	7,604,797.				
	g	Noncash contributions included in lines 1a-1f.	1g	\$ 213,936.				
	h	Total. Add lines 1a-1f			8,054,845.			
	Program Service Revenue	2a	MEMBERSHIP DUES	Business Code	624100	49,878,447.	49,878,447.	
b		SOFTWARE MAINTENANCE		518120	5,826,859.	5,826,859.		
c		MEETING AND LEARNING EVENTS		721000	2,214,778.	991,737.	1,223,041.	
d		RECRUITMENT CAMPAIGN		541800	429,561.	429,561.		
e		ONE GS MEDIA ADVERTISING REVENUE		541800	315,726.		315,726.	
f		All other program service revenue			209,236.	209,236.		
g		Total. Add lines 2a-2f			58,874,607.			
Other Revenue		3	Investment income (including dividends, interest, and other similar amounts).			1,889,866.		2,579.
	4	Income from investment of tax-exempt bond proceeds .			0.			
	5	Royalties			7,995,989.			7,995,989.
	6a	Gross rents	6a	(i) Real				
				(ii) Personal				
	b	Less: rental expenses	6b					
	c	Rental income or (loss)	6c					
	d	Net rental income or (loss)				0.		
	7a	Gross amount from sales of assets other than inventory	7a	(i) Securities	141,133,115.			
				(ii) Other	43,150.			
	b	Less: cost or other basis and sales expenses . .	7b		123,108,099.	33,815.		
	c	Gain or (loss)	7c		18,025,016.	9,335.		
	d	Net gain or (loss)				18,034,351.	3,761.	18,030,590.
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a			0.			
			8b		0.			
					0.			
c	Net income or (loss) from fundraising events.				0.			
9a	Gross income from gaming activities. See Part IV, line 19	9a			0.			
			9b		0.			
					0.			
c	Net income or (loss) from gaming activities.				0.			
10a	Gross sales of inventory, less returns and allowances	10a			32,197,975.			
			10b		14,978,295.			
					17,219,680.	17,219,680.		
c	Net income or (loss) from sales of inventory.							
Miscellaneous Revenue	11a	REBATES	Business Code	900099	85,676.		85,676.	
	b	INSURANCE RECOVERY		900099	15,231.		15,231.	
	c	ALL OTHER REVENUE		900099	52,615.		52,615.	
	d	All other revenue						
	e	Total. Add lines 11a-11d				153,522.		
12	Total revenue. See instructions				112,222,860.	74,555,520.	1,545,107.	28,067,388.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,212,296.	3,212,296.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	20,000.	20,000.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	260,660.	260,660.		
5 Compensation of current officers, directors, trustees, and key employees	4,764,253.	2,612,277.	1,279,456.	872,520.
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	42,085,487.	36,316,927.	4,439,818.	1,328,742.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,743,100.	2,381,017.	244,719.	117,364.
9 Other employee benefits	5,813,189.	4,804,842.	787,494.	220,853.
10 Payroll taxes	3,219,555.	2,779,585.	304,947.	135,023.
11 Fees for services (nonemployees):				
a Management	163,557.	153,003.	2,613.	7,941.
b Legal	3,371,045.	3,080,780.	250,195.	40,070.
c Accounting	427,051.	298,344.	81,857.	46,850.
d Lobbying	157,975.	157,975.		
e Professional fundraising services. See Part IV, line 17	626,642.			626,642.
f Investment management fees	487,443.		487,443.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) ATCH 7	12,889,063.	12,149,309.	672,724.	67,030.
12 Advertising and promotion	1,775,674.	1,687,653.	33,465.	54,556.
13 Office expenses	1,104,594.	970,317.	77,981.	56,296.
14 Information technology	16,360,194.	14,180,251.	1,965,309.	214,634.
15 Royalties	0.			
16 Occupancy	2,934,838.	2,490,232.	291,074.	153,532.
17 Travel	2,320,243.	2,097,296.	134,032.	88,915.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	0.			
20 Interest	15,757.	13,054.	1,894.	809.
21 Payments to affiliates	1,207,664.	1,207,664.		
22 Depreciation, depletion, and amortization	11,697,307.	11,153,191.	277,640.	266,476.
23 Insurance	969,936.	861,054.	89,304.	19,578.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CREDIT CARD PROCESSING FEES	1,770,322.	1,770,322.		
b FOOD SERVICES	621,787.	597,178.	18,692.	5,917.
c COMMISSION EXPENSE	283,543.	283,543.		
d PAYROLL FEES	218,689.		218,689.	
e All other expenses	1,248,259.	825,214.	347,725.	75,320.
25 Total functional expenses. Add lines 1 through 24e	122,770,123.	106,363,984.	12,007,071.	4,399,068.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0.			

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	17,042.	1	114,306.	
	2 Savings and temporary cash investments	25,164,336.	2	15,212,764.	
	3 Pledges and grants receivable, net	6,726,883.	3	3,595,775.	
	4 Accounts receivable, net.	5,053,430.	4	2,379,879.	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0.	5	0.	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	0.	6	0.	
	7 Notes and loans receivable, net	0.	7	0.	
	8 Inventories for sale or use	5,861,481.	8	5,489,999.	
	9 Prepaid expenses and deferred charges	1,521,051.	9	2,531,286.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 127,898,823.			
	b Less: accumulated depreciation	10b 79,207,979.			
			49,617,363.	10c	48,690,844.
	11 Investments - publicly traded securities.	43,666,418.	11	38,178,821.	
	12 Investments - other securities. See Part IV, line 11	132,733,879.	12	141,760,813.	
	13 Investments - program-related. See Part IV, line 11.	0.	13	0.	
	14 Intangible assets	0.	14	0.	
15 Other assets. See Part IV, line 11	1,035,564.	15	923,413.		
16 Total assets. Add lines 1 through 15 (must equal line 33)	271,397,447.	16	258,877,900.		
Liabilities	17 Accounts payable and accrued expenses	22,390,706.	17	19,692,625.	
	18 Grants payable	0.	18	0.	
	19 Deferred revenue.	35,092,158.	19	32,819,647.	
	20 Tax-exempt bond liabilities.	0.	20	0.	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D.	0.	21	0.	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0.	22	0.	
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	7,000,000.	
	24 Unsecured notes and loans payable to unrelated third parties.	0.	24	0.	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	26,196,084.	25	20,284,628.	
	26 Total liabilities. Add lines 17 through 25.	83,678,948.	26	79,796,900.	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27 Net assets without donor restrictions	120,081,138.	27	114,548,692.	
	28 Net assets with donor restrictions.	67,637,361.	28	64,532,308.	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29 Capital stock or trust principal, or current funds		29		
	30 Paid-in or capital surplus, or land, building, or equipment fund.		30		
	31 Retained earnings, endowment, accumulated income, or other funds.		31		
	32 Total net assets or fund balances	187,718,499.	32	179,081,000.	
33 Total liabilities and net assets/fund balances	271,397,447.	33	258,877,900.		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	112,222,860.
2	Total expenses (must equal Part IX, column (A), line 25)	2	122,770,123.
3	Revenue less expenses. Subtract line 2 from line 1	3	-10,547,263.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	187,718,499.
5	Net unrealized gains (losses) on investments	5	-3,727,302.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	5,637,066.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	179,081,000.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

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

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

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

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

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

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

Schedule A (Form 990 or 990-EZ) 2019

JSA
9E1210 1.000

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	10,409,970.	14,382,286.	15,983,792.	15,611,118.	8,054,845.	64,442,011.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3.	10,409,970.	14,382,286.	15,983,792.	15,611,118.	8,054,845.	64,442,011.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						4,764,947.
6 Public support. Subtract line 5 from line 4						59,677,064.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4.	10,409,970.	14,382,286.	15,983,792.	15,611,118.	8,054,845.	64,442,011.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	12,109,783.	10,777,779.	11,181,631.	12,123,359.	9,885,855.	56,078,407.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . ATCH. 1	229,699.	128,739.	127,271.	160,407.	153,522.	799,638.
11 Total support. Add lines 7 through 10						121,320,056.
12 Gross receipts from related activities, etc. (see instructions)					12	393,328,397.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)).	14	49.19%
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	47.87%
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization. ▶ <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
 If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)),	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .

b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11 a	
b	A family member of a person described in (a) above?	11 b	
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>	11 c	

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	1	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>	2	

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	1	

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2	
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3	

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	2a	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b	
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b	

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

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

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2015	2016	2017	2018	2019	TOTAL
INSURANCE RECOVERY	50,414.			74,368.	15,231.	140,013.
EMCC SERVICE CHARGES		89,707.	35,278.	38,991.		163,976.
REBATES				31,654.	85,676.	117,330.
MISCELLANEOUS REVENUES	179,285.	39,032.	91,992.	15,394.	52,615.	378,318.
TOTALS	<u>229,699.</u>	<u>128,739.</u>	<u>127,270.</u>	<u>160,407.</u>	<u>153,522.</u>	<u>799,637.</u>

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

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
---	--

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Employer identification number
13-1624016

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 527,419.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 400,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 364,165.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 225,084.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 448,824.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	_____	\$ 275,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	_____	\$ 312,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	_____	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	_____	\$ 182,060.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

Employer identification number

13-1624016

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____

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

Employer identification number
13-1624016

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2019

Open to Public Inspection

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

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

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

Department of the Treasury
Internal Revenue Service

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

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

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

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

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

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

Name of organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2019

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

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

B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)		10,188.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		147,786.													
c Total lobbying expenditures (add lines 1a and 1b)		157,974.													
d Other exempt purpose expenditures		121,498,064.													
e Total exempt purpose expenditures (add lines 1c and 1d)		121,656,038.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000.													
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.	0.												
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.	0.												
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount	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	169,919.	208,673.	161,535.	157,974.	698,101.
d Grassroots nontaxable 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	9,007.	16,403.	11,067.	10,188.	46,665.

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)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; b If "Yes," enter the amount of any tax incurred under section 4912; c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

Table with 2 columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?; 5 Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Blank lines for providing supplemental information as requested in the instructions above.

Part IV Supplemental Information *(continued)*

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization

Employer identification number

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

13-1624016

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

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

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

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. (2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register), 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and 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" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, 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 XIII the text of the footnote to its financial statements that describes these items., 1b If the organization elected, as permitted under FASB ASC 958, 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) Revenue included on Form 990, Part VIII, line 1., (ii) Assets included in Form 990, Part X., 2 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 FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1., b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2019

JSA 9E1268 1.000

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

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

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

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

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

Part IV Escrow and Custodial Arrangements.

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

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

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	172,263,000.	171,261,000.	162,607,000.	130,538,000.	128,583,000.
b Contributions	2,333,000.	1,259,090.	3,935,000.	17,962,000.	1,635,000.
c Net investment earnings, gains, and losses	15,553,000.	7,929,000.	11,520,000.	18,815,000.	11,033,000.
d Grants or scholarships	6,861,576.	1,859,000.	1,031,000.	1,257,000.	690,000.
e Other expenditures for facilities and programs	5,324,424.	6,327,090.	5,770,000.	3,451,000.	10,023,000.
f Administrative expenses					
g End of year balance	177,963,000.	172,263,000.	171,261,000.	162,607,000.	130,538,000.

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

- a** Board designated or quasi-endowment ▶ 69.0800 %
- b** Permanent endowment ▶ 15.3400 %
- c** Term endowment ▶ 15.5800 %

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

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

	Yes	No
(i) Unrelated organizations	3a(i)	X
(ii) Related organizations	3a(ii)	X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		377,059.		377,059.
b Buildings		37,849,123.	35,454,071.	2,395,052.
c Leasehold improvements		19,984,444.	3,618,406.	16,366,038.
d Equipment		8,509,923.	4,346,333.	4,163,590.
e Other		61,178,274.	35,789,169.	25,389,105.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				48,690,844.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) PRIVATE EQUITY FUND	15,931,697.	FMV
(B) COMMON COLLECTIVE TRUST	62,458,190.	FMV
(C) HEDGE FUND	18,274,705.	FMV
(D) REAL ESTATE	6,397,421.	FMV
(E) GLOBAL EQUITY	23,358,113.	FMV
(F) GLOBAL COMMINGLED	15,340,687.	FMV
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) . ▶	141,760,813.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) FUNDS HELD IN TRUST	555,366.
(3) ACCRUED PENSION LIABILITY	19,729,262.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	20,284,628.

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

Part XIII Supplemental Information (continued)

FORM 990 SCHEDULE D, PART III, LINE 4

ORGANIZATION IS MAINTAINING COLLECTIONS OF ART, HISTORICAL TREASURES, OR OTHER SIMILAR ASSETS.

GIRL SCOUTS OF THE USA OWNS UNIQUE COLLECTIONS AND PLACES - JULIETTE GORDON LOW BIRTHPLACE, HEADQUARTERS, AND THE EDITH MACY CONFERENCE CENTER - THAT SERVE AS A BRIDGE BETWEEN ITS RICH HISTORY AND THE 21ST CENTURY, ALL TO SUPPORT THE ORGANIZATION'S MISSION TO "GROW GIRLS OF COURAGE, CONFIDENCE, AND CHARACTER TO MAKE THE WORLD A BETTER PLACE." THEY OFFER ENGAGING, RELEVANT, AND INNOVATIVE EXPERIENCES FOR GIRLS AND ADULTS, WELCOMING MORE THAN 100,000 VISITORS ANNUALLY FROM AROUND THE NATION AND WORLD, AND INCLUDE OVER 400 ACRES AND 40+ ROOFED STRUCTURES, AND ENCOMPASSING A SIGNIFICANT CURATORIAL AND ARCHIVAL COLLECTION DOCUMENTING AND ILLUSTRATING THE HISTORY OF THE WORLD'S LARGEST EXTANT FEMALE-LED ORGANIZATION FOR GIRLS.

THE JULIETTE GORDON LOW BIRTHPLACE ("BIRTHPLACE"), LISTED ON THE NATIONAL REGISTER AND A CONTRIBUTING SITE TO A NATIONAL HISTORIC LANDMARK DISTRICT, IS LOCATED IN SAVANNAH, GA. PERHAPS THE ONLY HOUSE MUSEUM IN THE NATION CREATED SPECIFICALLY FOR GIRLS TO ENJOY, GROW, AND LEARN, IT ATTRACTS ANNUALLY APPROXIMATELY 40,000 VISITORS - MEN, WOMEN, AND YOUTH ALIKE. JULIETTE GORDON LOW WAS BORN IN THE HOUSE IN 1860, AND SHE LIVED IN AND VISITED IT THROUGHOUT HER LIFE, INCLUDING WHEN SHE FOUNDED GIRL SCOUTS THERE IN 1912. AS A RESULT OF THE PANDEMIC, THE BIRTHPLACE WAS FORCED TO CLOSE FROM MARCH 2020-MARCH 2021. THE BIRTHPLACE IS NORMALLY OPEN 6 DAYS/WEEK TO THE PUBLIC, OFFERS EXTENSIVE GIRL SCOUT PROGRAMMING, COLLABORATES WITH THE LOCAL HISTORIC GEORGIA COUNCIL, AND IS A LEADING CULTURAL INSTITUTION IN SAVANNAH. FOR MORE INFORMATION, PLEASE SEE

Part XIII Supplemental Information (continued)

HTTPS://WWW.JULIETTEGORDONLOWBIRTHPLACE.ORG/EN/EXPLORE/WHAT-WILL-I-SEE-.HT
ML

THE EDITH MACY CONFERENCE CENTER ("EMCC"), LOCATED IN BRIARCLIFF MANOR, WESTCHESTER COUNTY, NEW YORK, IS A 400+ ACRE CULTURAL ASSET OF GSUSA THAT SERVES AS A CONVENING PLACE FOR GIRL SCOUT MEETINGS AND TRAININGS, AND ALSO AS A CONFERENCE CENTER FOR OTHER CLIENTELE. V. EVERIT MACY DONATED THE ORIGINAL 200-ACRE CORE OF EMCC IN 1925 IN MEMORY OF HIS WIFE, EDITH CARPENTER MACY, THE CHAIRWOMAN OF THE GIRL SCOUTS OF THE USA NATIONAL BOARD FROM 1919 TO 1925. COMBINED WITH 1920 CAMP ANDREE -DONATED TO GIRL SCOUTS BY SENATOR AND MRS. WILLIAM A. CLARK IN MEMORY OF THEIR DAUGHTER, ANDREE, WHO DIED AT THE AGE OF 16 - EMCC ENCOMPASSES A LAKE (AND DAM SYSTEM), WALKING TRAILS, WOODLANDS, WETLANDS, AND OTHER TOPOGRAPHIES THAT STRADDLE VARIOUS TOWNSHIP AND SCHOOL DISTRICT BOUNDARIES, AND MORE THAN 40 ROOFED STRUCTURES, SOME OF WHICH EMBODY SIGNIFICANT HISTORICAL ATTRIBUTES, SUCH AS THE MAGNIFICENT GREAT HALL, DESIGNED BY JAMES YARDLEY RIPPEN, ARCHITECT OF THE FIRST PRESIDENTIAL RETREAT, RAPIDAN, BUILT FOR PRESIDENT AND MRS. HENRY HOOVER. THE EMCC CONFERENCE FACILITIES, BUILT IN 1982, INCLUDE 54 SLEEPING ROOMS, VARIOUS MEETING SPACES, A 200-SEAT AUDITORIUM, AND A SMALL RESTAURANT. SINCE 1999, GSUSA HAS OUTSOURCED THE MANAGEMENT OF EMCC TO BENCHMARK HOSPITALITY INTERNATIONAL, A GLOBAL HOTEL, RESORT, AND CONFERENCE CENTER MANAGING AND MARKETING FIRM.

THE COLLECTION OF THE GIRL SCOUTS OF THE USA ("COLLECTION") REFLECTS THE HISTORY OF THE OLDEST AND LARGEST EXTANT WOMEN-LED ORGANIZATION IN THE UNITED STATES, AND THUS IS A WINDOW INTO THE ROLE AND AGENCY OF WOMEN FROM SOME OF THE EARLIEST DAYS IN OUR COUNTRY'S HISTORY TO THE PRESENT.

Part XIII Supplemental Information (continued)

IT SPANS CENTURIES, GENRES, AND STYLES, AND INCLUDES CORPORATE RECORDS, PERSONAL WRITINGS, EPHEMERA, MEDIA, SCRAPBOOKS, FINE AND DECORATIVE ARTS, FARM AND CAMP EQUIPMENT, FURNISHINGS, TEXTILES, SCULPTURE, JEWELRY, SILVER, INTERNATIONAL GIFTS, PRODUCT AND MEMORABILIA, AWARDS AND RECOGNITIONS, AND GIRL SCOUT UNIFORMS, BADGES, AND INSIGNIA, AS WELL AS PERSONAL LETTERS AND WRITINGS OF JULIETTE GORDON LOW, GSUSA FOUNDER, AND LOU HENRY HOOVER, WIFE OF PRESIDENT HERBERT HOOVER AND TWICE NATIONAL PRESIDENT OF GIRL SCOUTS. A WIDE VARIETY OF ARTISTS, CRAFTSPEOPLE, AND MANUFACTURERS ARE REPRESENTED, INCLUDING SAUL BELLOWS, CARTIER, LYDIA FIELDING EMMET, ROY HALSTON, FRIDA HANSEN, GEORGE PETER ALEXANDER HEALY. ALFRED JONNIAUX, JAMES YARDLEY RIPPIN, W. & J. SLOANE, AND LOUIS COMFORT TIFFANY. THE COLLECTION IS LOCATED AT NATIONAL HEADQUARTERS, THE EDITH MACY CONFERENCE CENTER, AND THE JULIETTE GORDON LOW BIRTHPLACE, AND IS AVAILABLE FOR RESEARCH BY APPOINTMENT IN BOTH NEW YORK AND GEORGIA.

FORM 990 SCHEDULE D, PART V, LINE 4

ENDOWMENT FUNDS

THE INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUNDS IS TO DEVELOP, SUPPORT, AND EXTEND THE GIRL SCOUT MOVEMENT.

SCHEDULE D, PART VI, LINE 1E:

THE AMOUNTS SHOWN AS "OTHER" REPRESENT SOFTWARE DEVELOPMENT COSTS AND CONSTRUCTION IN PROGRESS.

FORM 990, SCHEDULE D, PART X, LINE 2

FIN 48 FOOTNOTE

THE ORGANIZATION FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR

Part XIII Supplemental Information (continued)

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 AND HAD NO MATERIAL IMPACT ON THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS. 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.

FORM 990, SCHEDULE D, PART XI, LINE 2D

RECONCILIATION OF OTHER

PENSION RELATED GAIN	\$6,128,536
PENSION COSTS OTHER THAN	
NET PERIODIC PENSION COST	(\$520,101)
CHANGE IN VALUE OF CHARITABLE GIFT ANNUITY	\$32,117
CHANGE IN VALUE OF DEFERRED GIFTS	(\$1,486)

TOTAL OTHER CHANGES TO LINE 2D	\$5,639,066
	=====

FORM 990, SCHEDULE D, PART XI AND XII, LINE 4B

COMMISSION EXPENSE ON ROYALTIES	\$121,837
---------------------------------	-----------

Part XIII Supplemental Information (continued)

COMMISSION EXPENSE ON ADVERTISING REVENUE	\$161,706

TOTAL OTHER CHANGES TO LINE 4B	\$283,543
	=====

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) EUROPE	0.	10.	PROGRAM SERVICES	SEE PART V	871,244.
(2) EAST ASIA AND THE PACIFIC	0.	5.	PROGRAM SERVICES	SEE PART V	546,198.
(3) CENTRAL AMERICA/CARIBBEAN	0.	0.	INVESTMENTS		30,352,480.
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal		15.			31,769,922.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)		15.			31,769,922.

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

Schedule F (Form 990) 2019

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

FORM 990, SCHEDULE F, PART I, LINE 2

GRANTS PAID

GIRL SCOUTS OF THE UNITED STATES OF AMERICA MONITORS GRANTS AWARDED BY REVIEWING PROGRESS REPORTS FOR THOSE GRANTS. ADDITIONALLY, FINANCIAL STAFF REVIEWS ALL EXPENSES SUBMITTED FOR REIMBURSEMENT FOR ALL GRANTS TO ENSURE COMPLIANCE WITH GSUSA POLICIES AND PROCEDURES.

FORM 990, SCHEDULE F, PART I, LINE 3, COLUMN C

OFFICERS, EMPLOYEES, OR AGENTS OUTSIDE THE U.S.

GIRL SCOUTS OF THE UNITED STATES OF AMERICA HAS 15 EMPLOYEES LOCATED OUTSIDE THE UNITED STATES SERVING DEPENDENT MILITARY FAMILIES AND OTHERS ON US MILITARY BASES, AS WELL AS FAMILIES SERVING AT US EMBASSIES AND CONSULATES.

FORM 990, SCHEDULE F, PART I, LINE 3, COLUMN E

PROGRAM SERVICE DESCRIPTION

TO ASSURE THE DELIVERY OF SERVICES TO GIRLS AND ADULTS IN ACCORDANCE WITH THE MISSION, POLICIES AND GOALS OF THE ORGANIZATION. SERVICES INCLUDE LEADERSHIP DEVELOPMENT EXPERIENCES FOR GIRLS AND LEARNING OPPORTUNITIES FOR ADULTS.

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

FORM 990, SCHEDULE F, PART IV FOREIGN FORMS

GIRL SCOUTS OF THE UNITED STATES OF AMERICA ("GSUSA") INVESTS IN DOMESTIC AND FOREIGN INVESTMENT VEHICLES THAT MAY OWN AN INTEREST IN A FOREIGN CORPORATION, PASSIVE FOREIGN INVESTMENT COMPANY, OR FOREIGN PARTNERSHIP. NEVERTHELESS, GIRL SCOUTS OF THE UNITED STATES OF AMERICA ACTIVITIES MAY NOT REACH THE THRESHOLDS REQUIRED FOR FILING THE FORMS 926, 5471, 8621 OR 8865. TO THE EXTENT SUCH A FORM WAS COMPLETED, IT HAS BEEN FILED WITH THE GSUSA'S FORM 990-T.

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2019

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

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

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

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

- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 ATTACHMENT 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total					626,642.	

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

AL, AK, AZ, AR, CO, CT, DC, FL, GA, HI, IL,
KS, LA, ME, MD, MA, MI, MN, MS, MO, NE, NH, NJ, NM, NY, NC, ND, OH,
OK, OR, PA, RI, SC, TN, UT, VT, VA, WA, WV, WI,

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

NAME AND ADDRESS OF FUNDRAISER	ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS?		GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION
		YES	NO			
MARTHA HOWE 1035 N. EDGEFIELD AVENUE DALLAS TX 75208	STEM PLEDGE STRATEGY		X		200,833.	
SOCIAL CAPITAL, INC. 980 N. MICHIGAN AVENUE, STE 1610 CHICAGO IL 60611	FUNDRAISING STRATEGY		X		425,809.	

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) GS OF TROPICAL FLORIDA 11347 SW 160 ST MIAMI, FL 33157-2703	59-0651087	501 (C)(3)	7,102.				PROGRAM FULFILMENT
(2) GS OF ALASKA 2000 W INT'L AIRPORT RD ANCHORAGE, AK 99505	92-6000179	501 (C)(3)	8,348.				PROGRAM FULFILMENT
(3) GS OF BLACK DIAMOND COUNCIL 321 VIRGINIA ST W, CHARLESTON, WV 25302	55-0420373	501 (C)(3)	12,788.				PROGRAM FULFILMENT
(4) CARIBE G.S.C. 500 CALLE ELISA COLBERG SAN JUAN, PR 00907	66-0200470	501 (C)(3)	8,134.				PROGRAM FULFILMENT
(5) GS OF CENTRAL INDIANA 7201 GIRL SCOUT LANE INDIANAPOLIS, IN 46214	35-0876381	501 (C)(3)	28,390.				PROGRAM FULFILMENT
(6) GS CENTRAL ILLINOIS 3020 BAKER DRIVE SPRINGFIELD, IL 62703-5918	37-0681529	501 (C)(3)	17,498.				PROGRAM FULFILMENT
(7) GS OF CENTRAL & SOUTHERN NEW JERSEY 40 BRACE RD CHERRY HILL, NJ 08034-2621	22-1928958	501 (C)(3)	34,393.				PROGRAM FULFILMENT
(8) GS OF THE CHESAPEAKE BAY 225 S. OLD BALTIMORE PIKE NEWARK, DE 19702	51-0064337	501 (C)(3)	9,226.				PROGRAM FULFILMENT
(9) GS OF CITRUS 341 NORTH MILLS AVE ORLANDO, FL 32803-5753	59-0696293	501 (C)(3)	27,936.				PROGRAM FULFILMENT
(10) GS OF GREATER MISSISSIPPI 1471 W COUNTY LINE RD JACKSON, MS 39213	64-0384222	501 (C)(3)	7,372.				PROGRAM FULFILMENT
(11) GS OF THE DESERT SW - SOUTHERN NM & W TEXAS 9700 GIRL SCOUT WAY EL PASO, TX 79924-3828	74-1189693	501 (C)(3)	9,613.				PROGRAM FULFILMENT
(12) GS OF EASTERN OKLAHOMA 4810 S. 129TH E. AVE. TULSA, OK 74134	73-0579240	501 (C)(3)	7,404.				PROGRAM FULFILMENT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

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

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

Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) GS OF EASTERN WASHINGTON AND NORTHERN IDAHO 1404 NORTH ASH ST. SPOKANE, WA 99201-2806	91-0570844	501 (C)(3)	9,038.				PROGRAM FULFILMENT
(2) GS OF EASTERN SOUTH CAROLINA 7257 CR. CTY RD NORTH CHARLESTON, SC 29418	57-0341216	501 (C)(3)	6,501.				PROGRAM FULFILMENT
(3) GS OF GATEWAY 1000 SHEARER AVE JACKSONVILLE, FL 32205	59-0637857	501 (C)(3)	35,722.				PROGRAM FULFILMENT
(4) GS OF GREATER IOWA 10715 HICKMAN RD DES MOINES, IA 50322-3733	42-0698218	501 (C)(3)	12,057.				PROGRAM FULFILMENT
(5) GS OF GULFCOAST 4780 CATTLEMEN RD SARASOTA, FL 34233	59-0760212	501 (C)(3)	8,005.				PROGRAM FULFILMENT
(6) GS OF HAWAII 410 ATKINSON DR, STE 2E1 HONOLULU, HI 96814	99-0073488	501 (C)(3)	9,128.				PROGRAM FULFILMENT
(7) GS HEART OF MICHIGAN 601 WEST MAPLE ST KALAMAZOO, MI 49008-1923	38-1581300	501 (C)(3)	20,582.				PROGRAM FULFILMENT
(8) GS HEART OF THE SOUTH 717 S WHITE STATION RD MEMPHIS, TN 38117	62-0502197	501 (C)(3)	13,640.				PROGRAM FULFILMENT
(9) GS OF HISTORIC GEORGIA 330 DRAYTON STREET SAVANNAH, GA 31401	58-0566191	501 (C)(3)	28,261.				PROGRAM FULFILMENT
(10) GS OF THE JERSEY SHORE 242 ADELPHIA RD FARMINGDALE, NJ 07727-3525	21-0731966	501 (C)(3)	11,874.				PROGRAM FULFILMENT
(11) GS OF KANSAS HEARTLAND 360 S LEXINGTON RD WICHITA, KS 67218-1700	48-0556718	501 (C)(3)	12,542.				PROGRAM FULFILMENT
(12) GS OF KENTUCKIANA 2115 LEXINGTON RD LOUISVILLE, KY 40206-2816	61-0444698	501 (C)(3)	17,135.				PROGRAM FULFILMENT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

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

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

Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) GS OF KENTUCKY'S WILDERNESS ROAD 2277 EXECUTIVE DR LEXINGTON, KY 40505	61-0608104	501 (C)(3)	8,233.				PROGRAM FULFILMENT
(2) GS OF MONTANA AND WYOMING 2303 GRAND AVE BILLINGS, MT 59102	81-6001486	501 (C)(3)	10,332.				PROGRAM FULFILMENT
(3) GS OF MANITOU 5212 WINDWARD CT SHEBOYGAN, WI 53083	39-0920672	501 (C)(3)	6,190.				PROGRAM FULFILMENT
(4) GS OF NASSAU COUNTY 110 RING RD WEST GARDEN CITY, NY 11530-3296	11-2041443	501 (C)(3)	27,521.				PROGRAM FULFILMENT
(5) GS OF NORTHEASTERN NEW YORK 8 MOUNTAIN VIEW AVE ALBANY, NY 12205-2804	14-1438466	501 (C)(3)	9,958.				PROGRAM FULFILMENT
(6) GS OF NORTHERN ILLINOIS 353 RANDALL ROAD SOUTH ELGIN, IL 60177	36-2358083	501 (C)(3)	44,922.				PROGRAM FULFILMENT
(7) GS OF NORTHERN INDIANA-MICHIANA 10008 DUPONT CR. DR E FORT WAYNE, IN 46825	35-1054339	501 (C)(3)	13,370.				PROGRAM FULFILMENT
(8) GS OF NYPENN PATHWAYS 8170 THOMPSON RD CICERO, NY 13039	16-0844808	501 (C)(3)	19,632.				PROGRAM FULFILMENT
(9) GS OF SILVER SAGE 8948 W BARNES ST, BOISE, ID 83709	82-0259644	501 (C)(3)	10,421.				PROGRAM FULFILMENT
(10) GS OF SOUTHERN ALABAMA 3483 SPRINGHILL AVENUE MOBILE, AL 36608	63-0421430	501 (C)(3)	6,479.				PROGRAM FULFILMENT
(11) GS OF THE SOUTHERN APPALACHIANS 1567 DOWNTOWN WEST BLVD KNOXVILLE, TN 37919	62-0505206	501 (C)(3)	13,134.				PROGRAM FULFILMENT
(12) GS OF SOUTHEAST FLORIDA 6944 LAKE WORTH RD. LAKE WORTH, FL 33467	59-0657327	501 (C)(3)	9,679.				PROGRAM FULFILMENT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

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

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Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) GS SUFFOLK COUNTY 442 MORELAND RD COMMACK, NY 11725-5708	11-2164434	501 (C)(3)	12,126.				PROGRAM FULFILMENT
(2) GS OF SOUTHWEST INDIANA 5000 E. VIRGINIA ST EVANSVILLE, IN 47715	35-0876380	501 (C)(3)	6,216.				PROGRAM FULFILMENT
(3) GS OF TEXAS OKLAHOMA PLAINS 4901 BRIARHAVEN RD FORT WORTH, TX 76109	75-0818162	501 (C)(3)	20,005.				PROGRAM FULFILMENT
(4) GS OF VIRGINIA SKYLINE 3663 PETERS CREEK RD NW ROANOKE, VA 24019	54-0737207	501 (C)(3)	7,661.				PROGRAM FULFILMENT
(5) GS OF WESTERN NEW YORK 3332 WALDEN AVE, STE 106 DEPEW, NY 14043	16-0743096	501 (C)(3)	13,380.				PROGRAM FULFILMENT
(6) GS DAKOTA HORIZONS 1101 SOUTH MARION RD SIOUX FALLS, SD 57106	46-0250744	501 (C)(3)	12,385.				PROGRAM FULFILMENT
(7) GS HEART OF CENTRAL CALIFORNIA 6601 ELVAS AVE SACRAMENTO, CA 95819-4339	94-1582429	501 (C)(3)	33,706.				PROGRAM FULFILMENT
(8) GS OF COLORADO 3801 S FLORIDA AVE DENVER, CO 80210	84-0410630	501 (C)(3)	56,244.				PROGRAM FULFILMENT
(9) GS IN THE HEART OF PENNSYLVANIA 350 HALE AVE HARRISBURG, PA 17104-1518	24-0795960	501 (C)(3)	24,831.				PROGRAM FULFILMENT
(10) GS OF THE GREEN & WHITE MOUNTAINS 60 KNIGHT LANE SUITE 30 WILLISTON, VT 05495	02-0243160	501 (C)(3)	41,615.				PROGRAM FULFILMENT
(11) GS OF EASTERN MASSACHUSETTS 420 BOYLSTON ST SUITE 505 BOSTON, MA 02116	04-2703281	501 (C)(3)	81,869.				PROGRAM FULFILMENT
(12) GS OF EASTERN MISSOURI 2300 BALL DR ST. LOUIS, MO 63146	43-0662471	501 (C)(3)	32,096.				PROGRAM FULFILMENT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

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

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Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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OMB No. 1545-0047

2019

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Department of the Treasury
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Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) GS OF MAINE 138 GANNETT DR SOUTH PORTLAND, ME 04106	01-0269802	501 (C)(3)	37,474.				PROGRAM FULFILMENT
(2) GS OF SOUTHEASTERN NEW ENGLAND 500 GREENWICH AVE WARWICK, RI 02886	05-0300724	501 (C)(3)	10,491.				PROGRAM FULFILMENT
(3) GS OF CONNECTICUT 340 WASHINGTON ST HARTFORD, CT 06106-3317	06-0646756	501 (C)(3)	54,787.				PROGRAM FULFILMENT
(4) GS OF COLONIAL COAST 912 CEDAR RD CHESAPEAKE, VA 23322-7002	54-1158412	501 (C)(3)	26,764.				PROGRAM FULFILMENT
(5) GS COMMONWEALTH COUNCIL OF VIRGINIA 4900 AUGUSTA AVE RICHMOND, VA 23230	54-0534506	501 (C)(3)	13,350.				PROGRAM FULFILMENT
(6) GS COUNCIL OF GREATER NEW YORK 40 WALL ST. SUITE 708 NEW YORK, NY 10005	13-1624014	501 (C)(3)	79,945.				PROGRAM FULFILMENT
(7) GS OF GREATER SOUTH TEXAS 202 E MADISON AVE HARLINGEN, TX 78550-4904	74-1256499	501 (C)(3)	7,728.				PROGRAM FULFILMENT
(8) GS OF NEW MEXICO TRAILS 4000 JEFFERSON PLAZA ALBUQUERQUE, NM 87109	85-6011246	501 (C)(3)	9,276.				PROGRAM FULFILMENT
(9) GS HEART OF THE HUDSON 2 GREAT OAK LN PLEASANTVILLE, NY 10570-2110	13-2985898	501 (C)(3)	62,845.				PROGRAM FULFILMENT
(10) GS OF OHIO'S HEARTLAND COUNCIL 1700 WATERMARK DR COLUMBUS, OH 43215-1097	31-4379475	501 (C)(3)	27,901.				PROGRAM FULFILMENT
(11) GS HEART OF NEW JERSEY 1171 STATE ROUTE 28 NORTH BRANCH, NJ 08876	22-1638950	501 (C)(3)	38,568.				PROGRAM FULFILMENT
(12) GS OF NORTHERN NEW JERSEY 95 NEWARK POMPTON TPKE RIVERDALE, NJ 07457	22-1928958	501 (C)(3)	23,261.				PROGRAM FULFILMENT

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶
- 3 Enter total number of other organizations listed in the line 1 table ▶

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Schedule I (Form 990) (2019)

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

2019

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Department of the Treasury Internal Revenue Service

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

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Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [] No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Rows include GS OF EASTERN PENNSYLVANIA, GS OF ORANGE COUNTY, GS WESTERN PENNSYLVANIA, GS OF WESTERN OHIO, GS OF NORTH EAST OHIO, GS OF GREATER CHICAGO AND NORTHWEST INDIANA, GS OF EASTERN IOWA & WESTERN ILLINOIS, GS OF SOUTHERN ILLINOIS, GS OF MICHIGAN SHORE TO SHORE, GS OF WISCONSIN SOUTHEAST, GS OF THE MINNESOTA AND WISCONSIN RIVER VAL, GS OF NE KANSAS & NW MISSOURI.

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2019)

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(Form 990)**

**Grants and Other Assistance to Organizations,
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13-1624016

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) GIRL SCOUTS OF CENTRAL MARYLAND 4806 SETON DR BALTIMORE, MD 21215-3247	52-0780207	501 (C)(3)	30,993.				PROGRAM FULFILMENT
(2) GS OF THE NATIONS CAPITAL 4301 CONNECTICUT AVE WASHINGTON, DC 20008	54-0732966	501 (C)(3)	67,460.				PROGRAM FULFILMENT
(3) GS HORNETS NEST COUNCIL 7007 IDLEWILD RD CHARLOTTE, NC 28212-5751	56-0563842	501 (C)(3)	10,087.				PROGRAM FULFILMENT
(4) GS OF NORTH CENTRAL ALABAMA 105 HEATHERBRK. PK DR BIRMINGHAM, AL 35242	63-0288834	501 (C)(3)	25,703.				PROGRAM FULFILMENT
(5) GS CAROLINAS PEAKS TO PIEDMONT, INC. 8818 W MARKET ST COLFAX, NC 27235	56-0577629	501 (C)(3)	59,403.				PROGRAM FULFILMENT
(6) GS OF THE NORTHWESTERN GREAT LAKES 4693 NORTH LYNNDALE DR APPLETON, WI 54913	39-1016314	501 (C)(3)	15,640.				PROGRAM FULFILMENT
(7) GS NORTH CAROLINA COASTAL PINES 6901 PINECREST RD RALEIGH, NC 27613-4538	56-0791500	501 (C)(3)	34,181.				PROGRAM FULFILMENT
(8) GS OF SOUTHEASTERN MICHIGAN 1333 BREWERY PARK BLVD DETROIT, MI 48202	38-1359207	501 (C)(3)	9,753.				PROGRAM FULFILMENT
(9) GS OF SOUTH CAROLINA-MOUNTAINS TO MIDLANDS 5 INDEPENDENCE POINTE GREENVILLE, SC 29615	57-0314433	501 (C)(3)	21,268.				PROGRAM FULFILMENT
(10) GS OF GREATER ATLANTA 5601 NORTH ALLEN RD MABLETON, GA 30126	58-0566190	501 (C)(3)	85,720.				PROGRAM FULFILMENT
(11) GS OF WEST CENTRAL FLORIDA 4610 EISENHOWER BLVD TAMPA, FL 33634	59-0624454	501 (C)(3)	24,925.				PROGRAM FULFILMENT
(12) GS DIAMONDS OF AR, OK & TX 11311 ARCADE DR LITTLE ROCK, AR 72212	71-0309373	501 (C)(3)	17,987.				PROGRAM FULFILMENT

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶
- 3 Enter total number of other organizations listed in the line 1 table ▶

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Schedule I (Form 990) (2019)

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) GS WESTERN OKLAHOMA, INC. 6100 N ROBINSON AVE OKLAHOMA CITY, OK 73118	73-0677849	501 (C)(3)	12,699.				PROGRAM FULFILMENT
(2) GS OF CENTRAL TEXAS 12012 PARK 35 CIR AUSTIN, TX 78753	74-1109644	501 (C)(3)	70,154.				PROGRAM FULFILMENT
(3) GS OF MINNESOTA & WISCO LAKES & PINES 400 2ND AVE SOUTH WAITE PARK, MN 56387-1470	41-0877820	501 (C)(3)	8,036.				PROGRAM FULFILMENT
(4) GS OF THE MISSOURI HEARTLAND 210 S INGRAM MILL RD SPRINGFIELD, MO 65802	44-0594943	501 (C)(3)	13,413.				PROGRAM FULFILMENT
(5) GS OF LOUISIANA PINES TO THE GULF 1720 KALISTE SALOOM RD LAFAYETTE, LA 70508	72-0488660	501 (C)(3)	9,198.				PROGRAM FULFILMENT
(6) GS OF LOUISIANA EAST 841 S CLEARVIEW PKY NEW ORLEANS, LA 70121	72-0453615	501 (C)(3)	5,332.				PROGRAM FULFILMENT
(7) GS OF SAN JACINTO COUNCIL 3110 SW FREEWAY HOUSTON, TX 77098	74-6001254	501 (C)(3)	14,278.				PROGRAM FULFILMENT
(8) GS OF SOUTHWEST TEXAS 811 N COKER LOOP RD SAN ANTONIO, TX 78216	74-1109759	501 (C)(3)	25,057.				PROGRAM FULFILMENT
(9) GS OF NORTHEAST TEXAS 6001 SUMMERSIDE DR DALLAS, TX 75252	75-1101571	501 (C)(3)	111,171.				PROGRAM FULFILMENT
(10) THE TETON SCIENCE SCHOOL 700 COYOTE CANYON RD JACKSON, WY 83001	83-0219163	501 (C)(3)	9,943.				PROGRAM FULFILMENT
(11) GS ARIZONA CACTUS PINE 119 E CORONADO RD PHOENIX, AZ 85004-1512	86-0133397	501 (C)(3)	46,097.				PROGRAM FULFILMENT
(12) GS OF SOUTHERN ARIZONA 4300 E BROADWAY BLVD TUCSON, AZ 85711	86-0008917	501 (C)(3)	34,859.				PROGRAM FULFILMENT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

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

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Schedule I (Form 990) (2019)

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(1) GS OF SOUTHERN NEVADA, INC 2941 HARRIS AVE LAS VEGAS, NV 89101-2309	88-0060273	501 (C)(3)	26,324.				PROGRAM FULFILMENT
(2) GS OF WESTERN WASHINGTON 5601 6TH AVE SOUTH SEATTLE, WA 98108	91-6060940	501 (C)(3)	59,006.				PROGRAM FULFILMENT
(3) GS OF CENTRAL & WESTERN MASSACHUSETTS 301 KELLY WAY HOLYOKE, MA 01040	04-2317694	501 (C)(3)	31,077.				PROGRAM FULFILMENT
(4) GS OF OREGON & SW WASHINGTON INC. 9620 SW BARBUR BLVD PORTLAND, OR 97219	93-0399051	501 (C)(3)	18,516.				PROGRAM FULFILMENT
(5) GS OF NORTHERN CALIFORNIA 1650 HARBOR BAY PKY ALAMEDA, CA 94502	94-1551410	501 (C)(3)	75,982.				PROGRAM FULFILMENT
(6) GS OF CALIFORNIA'S CENTRAL COAST 1500 PALMA DR VENTURA, CA 93003	94-1567162	501 (C)(3)	24,805.				PROGRAM FULFILMENT
(7) GS OF GREATER LOS ANGELES 1150 S. OLIVE ST LOS ANGELES, CA 90015	95-1644033	501 (C)(3)	63,969.				PROGRAM FULFILMENT
(8) GS SAN DIEGO 1231 UPAS ST SAN DIEGO, CA 92103-5199	95-1644585	501 (C)(3)	24,348.				PROGRAM FULFILMENT
(9) GS SPIRIT OF NEBRASKA 2121 SOUTH 44TH ST OMAHA, NE 68105-2809	47-0432299	501 (C)(3)	7,865.				PROGRAM FULFILMENT
(10) GS OF CENTRAL CALIFORNIA SOUTH 1377 W SHAW AVE FRESNO, CA 93711-3604	95-1766795	501 (C)(3)	6,285.				PROGRAM FULFILMENT
(11) GS OF SAN GORGONIO 1751 PLUM LN REDLANDS, CA 92374-4533	95-1967727	501 (C)(3)	50,579.				PROGRAM FULFILMENT
(12) GS OF UTAH 445 EAST 4500 SOUTH MURRAY, UT 84107-3101	87-0221612	501 (C)(3)	12,761.				PROGRAM FULFILMENT

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶
- 3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

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

▶ Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) GS OF WISCONSIN-BADGERLAND 2710 SKI LN MADISON, WI 53713-3267	39-0806331	501 (C)(3)	16,126.				PROGRAM FULFILMENT
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 109.

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

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

Schedule I (Form 990) (2019)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 2020 ARCONIC SCHOLARSHIP	1.	5,000.			
2 2020 KAPPA DELTA FOUNDATION	1.	5,000.			
3 2020 SUSAN BUTLER SCHOALRSHIP	1.	10,000.			
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

FORM 990, SCHEDULE I, PART 1, LINE 2

THE ORGANIZATION MONITORS GRANTS AND SCHOLARSHIPS BY REVIEWING PROGRESS REPORTS FOR GRANTS AND SCHOLARSHIPS. ADDITIONALLY, FINANCIAL STAFF REVIEWS ALL EXPENSES SUBMITTED FOR REIMBURSEMENT FOR ALL GRANTS AND SCHOLARSHIPS TO ENSURE COMPLIANCE WITH GSUSA POLICIES AND PROCEDURES.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Compensation Information

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Employer identification number

13-1624016

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | | | |
|-------------------------------------|---|--------------------------|---|
| <input checked="" type="checkbox"/> | First-class or charter travel | <input type="checkbox"/> | Housing allowance or residence for personal use |
| <input type="checkbox"/> | Travel for companions | <input type="checkbox"/> | Payments for business use of personal residence |
| <input checked="" type="checkbox"/> | Tax indemnification and gross-up payments | <input type="checkbox"/> | Health or social club dues or initiation fees |
| <input type="checkbox"/> | Discretionary spending account | <input type="checkbox"/> | Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | Compensation committee | <input type="checkbox"/> | Written employment contract |
| <input checked="" type="checkbox"/> | Independent compensation consultant | <input checked="" type="checkbox"/> | Compensation survey or study |
| <input type="checkbox"/> | Form 990 of other organizations | <input checked="" type="checkbox"/> | Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a	X	
4b		X
4c		X
5a	X	
5b		X
6a	X	
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2019

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation					
1 SYLVIA ACEVEDO (THRU 08 CEO & EX OFFICIO BD	(i)	531,657.	151,410.	4,689.	27,816.	16,560.	732,132.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 ANGELA OLDEN CHIEF FINANCIAL OFFICER	(i)	348,062.	38,306.	1,596.	15,155.	39,303.	442,422.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 ANTHONY DOYE (THRU 03/2 CHIEF OPERATING OFFICER	(i)	346,302.	32,000.	78,522.	15,400.	39,509.	511,733.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 JENNIFER ROCHON GENERAL COUNSEL	(i)	336,766.	46,000.	536.	9,101.	39,416.	431,819.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 FLORENCE GODFREY (THRU CHIEF BRAND MKTG & COMM. OFF.	(i)	239,442.	55,637.	1,040.	13,842.	39,197.	349,158.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 BARRY HOROWITZ CHIEF REVENUE OFFICER	(i)	318,404.	41,589.	6,910.	31,595.	38,575.	437,073.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7 ANNETTE FREYTAG (THRU 0 CHIEF OF STAFF	(i)	306,448.	0.	0.	15,184.	15,035.	336,667.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8 AMY BERKOWITZ (THRU 11/ CHIEF INFORMATION OFFICER	(i)	281,015.	0.	1,246.	15,400.	15,147.	312,808.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9 SARAH ANGEL-JOHNSON (TH CHIEF ENTERPRISE INTEG. OFF.	(i)	103,470.	0.	34,824.	5,973.	17,160.	161,427.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10 ANDREA BASTIANI ARCHIBA CH. FAM. ENG OFF (THRU 10/19)	(i)	188,742.	0.	45,628.	18,338.	31,539.	284,247.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
11 SOFINA QURESHI (THRU 09 VP, GS COOKIE PROGRAM	(i)	216,432.	7,500.	1,040.	12,155.	16,199.	253,326.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
12 LYNELLE MCKAY CHIEF CUSTOMER OFFICER	(i)	309,133.	41,000.	52,642.	13,119.	34,050.	449,944.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
13 SAPREET KAUR SALUJA CHIEF STR PSHIP/NEW VENT OFF	(i)	315,665.	41,000.	1,404.	14,547.	22,450.	395,066.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
14 BERNICE JOHNSON (THRU 0 VP PROCUREMENT/SUSTAINABILITY	(i)	234,453.	5,000.	954.	11,701.	38,351.	290,459.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
15 DIANE REIGER VP, IT BUSINESS OPERATIONS	(i)	216,202.	0.	1,689.	11,860.	2,223.	231,974.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
16 MAUREEN MCNERNEY CHIEF PEOPLE OFFICER	(i)	236,391.	0.	312.	11,190.	32,029.	279,922.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 AMY BODIN CHIEF ADMIN OFFICER	(i)	96,598.	0.	63,870.	3,472.	4,572.	168,512.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 DANIEL SCHULTZE (THRU 0 SR. DIRECTOR, PROD./PLAT./SVCS	(i)	265,146.	0.	232.	11,870.	11,144.	288,392.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 BARRY JOSEPH (THRU 09/2 DIRECTOR, DIGITAL USER EXPER.	(i)	219,082.	0.	1,387.	12,407.	10,082.	242,958.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

FORM 990, SCHEDULE J, PART I, LINE 1A

TO FACILITATE THE COMMUTE FROM THEIR RESPECTIVE HOME STATES AND THE NEED THAT EACH WORK FROM GSUSA'S NEW YORK BASED HEADQUARTERS, THE CHIEF OPERATING OFFICER, CHIEF ADMINISTRATIVE OFFICER AND CHIEF CUSTOMER OFFICER RECEIVE AN ANNUAL TRAVEL AND LIVING ALLOWANCE GROSSED UP FOR APPLICABLE TAXES. THESE ALLOWANCES WERE PAID IN 2019 BUT WERE SUSPENDED IN 2020 DUE TO REDUCED TRAVEL AND REMOTE WORK ARRANGEMENTS AS A RESULT OF COVID-19. THE ALLOWANCE AND TAX GROSS UP PAYMENTS ARE REPORTED AS TAXABLE INCOME IN PART II, COLUMN B(III).

FORM 990, SCHEDULE J, PART I, LINE 1B

THE TRAVEL AND LIVING ALLOWANCE FOR THE CHIEF OPERATING OFFICER, CHIEF ADMINISTRATIVE OFFICER, AND CHIEF CUSTOMER OFFICER WERE DETERMINED BY THE CEO IN CONSULTATION WITH THE CFO AND THE CHIEF PEOPLE OFFICER DUE TO THE DISTANCE OF THEIR OUT OF STATE HOMES FROM THE NYC OFFICE AND THE NEED FOR THEM TO BE ON SITE A MAJORITY OF THE TIME TO BE EFFECTIVE IN THEIR ROLES. THE AMOUNT WAS BASED ON A REASONABLE AVERAGE NYC COST TO LEASE AN APARTMENT PLUS COMMUTING EXPENSES TO AND FROM THEIR PRIMARY RESIDENCES. THESE AMOUNTS WERE AGGREGATED TO ARRIVE AT A FIXED SUM WHICH WAS THEN

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

GROSSED UP AND INCLUDED IN TAXABLE INCOME. PURSUANT TO THEIR OFFER LETTERS, THE ALLOWANCE WAS APPROVED FOR AN INITIAL THREE YEAR PERIOD AND THEN IS TO BE REVIEWED ANNUALLY. FOR 2020, THE TRAVEL AND LIVING ALLOWANCE WAS SUSPENDED DUE TO COVID-19.

FORM 990, SCHEDULE J, PART I, LINE 4A

THE FOLLOWING INDIVIDUALS DISCLOSED ON GSUSA FORM 990 RECEIVED A SEPARATION PAYMENT DURING THE ORGANIZATION'S FISCAL YEAR. THE SEPARATION PAYMENTS WERE NOT PAID IN CALENDAR YEAR 2019 AND WILL BE DISCLOSED IN SUCCEEDING YEARS' FORMS 990, AS APPLICABLE.

AMY BERKOWITZ, CIO

SYLVIA ACEVEDO, CEO

TONY DOYE, COO

ANNETTE FREYTAG, CHIEF OF STAFF

FORM 990, SCHEDULE J, PART I, LINE 5(A) AND 6(A)

EXECUTIVE TEAM INCENTIVE COMPENSATION IS BASED ON STRATEGIC, FINANCIAL

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

AND PROGRAM TARGETS, WHICH INCLUDE REVENUE AND OTHER METRICS AS APPROVED BY THE EXECUTIVE DEVELOPMENT AND COMPENSATION COMMITTEE (EDCC).

CERTAIN NON-EXECUTIVE TEAM MEMBERS RECEIVED DISCRETIONARY BONUSES. THE DISCRETIONARY BONUS AWARDS ARE ISSUED AS SPECIAL RECOGNITION AND REWARD FOR EXCEPTIONAL PERFORMANCE, SIGNIFICANT CONTRIBUTIONS, SUBSTANTIAL ACCOMPLISHMENTS, ALL DEMONSTRATED BY G.I.R.L BEHAVIORS. THE EXECUTIVE TEAM MEMBERS SUBMIT THEIR RECOMMENDATIONS, BASED ON ESTABLISHED CRITERIA IN THE PLAN, TO THE CHIEF BUSINESS AND TALENT OFFICER WHO PRESENTS TO THE CEO FOR FINAL APPROVAL.

FORM 990, SCHEDULE J, PART II, COLUMN B(III)

TONY DOYE - TRAVEL & LIVING ALLOWANCE - \$50,000 (GROSSED UP FOR APPLICABLE TAXES), THE GROSSED UP AMOUNT BEING \$76,084

LYNELLE MCKAY - TRAVEL & LIVING ALLOWANCE \$35,000 (GROSSED UP FOR APPLICABLE TAXES), THE GROSSED UP AMOUNT BEING \$52,642

AMY BODIN - TRAVEL & LIVING ALLOWANCE \$35,000 (GROSSED UP FOR APPLICABLE TAXES), THE GROSSED UP AMOUNT BEING \$57,778 PLUS AN ADDITIONAL

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

TRAVEL ALLOWANCE \$5,788. THESE ALLOWANCES WERE PAID IN 2019. TRAVEL AND LIVING ALLOWANCES WERE SUSPENDED IN 2020 DUE TO REDUCED TRAVEL AS A RESULT OF COVID-19.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	1.	121,641.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (COMPUTERS)	X	600.	92,295.	FAIR MARKET VALUE
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2019

JSA

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Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Employer identification number

13-1624016

COVID-19 IMPACT

ON MARCH 11, 2020, THE COVID-19 OUTBREAK WAS DECLARED A PANDEMIC BY THE WORLD HEALTH ORGANIZATION, RESULTING IN THE DISRUPTION IN OPERATIONS OF BUSINESSES DOMESTICALLY AND GLOBALLY. IN RESPONSE, GSUSA AND THE GIRL SCOUT MOVEMENT PIVOTED QUICKLY AND AGILELY. VIRTUAL PROGRAMMING FOR GIRLS WAS DEVELOPED NATIONALLY AND LOCALLY TO ENSURE GIRLS COULD STILL BENEFIT FROM THE GIRL SCOUT LEADERSHIP EXPERIENCE. IN-PERSON COOKIE SALES WERE SUSPENDED TO PROTECT THE HEALTH OF OUR GIRLS, VOLUNTEERS, AND CUSTOMERS. GIRL SCOUTS LAUNCHED COOKIE CARES WITH CORPORATE SPONSORSHIP TO REDUCE COOKIE INVENTORIES AND PROVIDE COOKIES TO FIRST RESPONDERS. GSUSA WENT TO A VIRTUAL WORK ENVIRONMENT EXCEPT FOR SELECT PERSONNEL AND ALSO IMPLEMENTED COST SAVINGS AND OTHER MEASURES TO REDUCE OPERATING EXPENSES AND PRESERVE CAPITAL, WHILE ENSURING SERVICES WERE PROVIDED TO GIRL SCOUT COUNCILS AND MEMBERS. DUE TO THE UNCERTAINTY OF THE CONTINUED SPREAD OF THE VIRUS AND ECONOMIC OUTLOOK, THERE MAY BE SHORT-TERM AND LONG-TERM IMPLICATIONS FOR OPERATIONS OF THE ORGANIZATION.

AS A RESPONSE TO THE COVID-19 PANDEMIC THE U.S. FEDERAL GOVERNMENT PASSED THE CORONAVIRUS AID, RELIEF, AND ECONOMIC SECURITY ACT ("CARES ACT"). DURING APRIL 2020 GSUSA RECEIVED A \$7,307,000 PAYROLL PROTECTION PROGRAM LOAN ("PPP") UNDER THE CARES ACT AND AN ADVANCE OF \$10,000 UNDER THE ECONOMIC INJURY DISASTER LOAN PROGRAM ("EIDL"), BOTH ADMINISTERED BY THE SMALL BUSINESS ADMINISTRATION. GSUSA ACCOUNTED FOR THE PPP LOAN AS A CONDITIONAL CONTRIBUTION THAT WILL BE RECOGNIZED AS GRANT REVENUE WHEN

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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THE CONDITIONS FOR USE OF THE FUNDS HAVE BEEN MET AND IT IS ACKNOWLEDGED BY THE LENDER THAT THE LOAN WILL BE FORGIVEN. GSUSA EXPECTS THAT THE LOAN WILL BE FULLY FORGIVEN. THEREFORE, THIS FUNDING WAS RECORDED AS DEFERRED REVENUE IN THE STATEMENT OF FINANCIAL POSITION AT SEPTEMBER 30, 2020. THE PPP LOAN IS FORGIVABLE AS LONG AS THE ORGANIZATION USES THE LOAN PROCEEDS FOR ELIGIBLE PURPOSES, PRIMARILY FOR PAYROLL AND BENEFITS.

FORM 990, PART I, LINE 6

TOTAL NUMBER OF VOLUNTEERS: ALL ADULT MEMBERS, WHO ARE NOT EMPLOYEES OF GIRL SCOUTS OF THE UNITED STATES OF AMERICA OR GIRL SCOUT COUNCILS, ARE CONSIDERED VOLUNTEERS OF THE ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 6, 7A, 7B

MEMBERSHIP

THE MEMBERSHIP OF THE CORPORATION CONSISTS OF THE MEMBERS OF THE NATIONAL COUNCIL OF GIRL SCOUTS OF THE USA. THE MEMBERSHIP OF THE NATIONAL COUNCIL INCLUDES: A. DELEGATES ELECTED BY GIRL SCOUT COUNCILS WHO ARE REGISTERED THROUGH SUCH LOCAL COUNCILS; B. DELEGATES FROM USA GIRL SCOUTS OVERSEAS; C. MEMBERS OF THE NATIONAL BOARD OF DIRECTORS; D. NATIONAL BOARD DEVELOPMENT COMMITTEE MEMBERS; E. PAST PRESIDENTS OF GSUSA; F. SUCH OTHER PERSONS AS MAY BE ELECTED BY THE NATIONAL COUNCIL. A REGULAR SESSION OF THE NATIONAL COUNCIL IS HELD TRIENNIALY TO ELECT A NATIONAL BOARD OF DIRECTORS AND DETERMINE GENERAL LINES OF POLICY BY ACTING UPON PROPOSALS.

FORM 990, PART VI, SECTION B, LINE 11

FORM 990 REVIEW

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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THE FORM 990 WAS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCE DEPARTMENT. THE DRAFT WAS THEN REVIEWED BY THE AUDIT COMMITTEE. A COPY OF THE DRAFT FORM 990 WAS CIRCULATED TO THE FULL BOARD OF DIRECTORS IN EITHER PAPER OR ELECTRONIC FORM FOR DISCUSSION AND COMMENT. EACH BOARD MEMBER WAS PROVIDED AMPLE OPPORTUNITY TO COMMENT ON THE INFORMATION CONTAINED IN THE 990 PRIOR TO ITS FILING WITH THE INTERNAL REVENUE SERVICE.

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

CONFLICT OF INTEREST POLICY

EACH EMPLOYEE AND BOARD MEMBER IS REQUIRED TO ANNUALLY COMPLETE A DISCLOSURE FORM THAT REQUIRES DISCLOSURE OF ANY CONFLICTS OF INTEREST. THE ORGANIZATION ENSURES EACH EMPLOYEE AND BOARD MEMBER HAS COMPLETED THE FORM AND MAINTAINS THE DOCUMENTATION. POTENTIAL BOARD CONFLICTS ARE DISCLOSED TO THE BOARD CHAIR, WHO REFERS THE MATTER TO THE FULL BOARD, THE EXECUTIVE COMMITTEE, AUDIT COMMITTEE, OR OTHER BOARD COMMITTEE HAVING AUTHORITY OVER THE SUBSTANTIVE MATTER IN QUESTION. FOR EACH CONFLICT DISCLOSED, THE BOARD OR BOARD COMMITTEE WILL DETERMINE WHETHER THE ARRANGEMENT IS IN GSUSA'S BEST INTEREST AND WHETHER IT IS FAIR AND REASONABLE TO GSUSA AND DETERMINE WHETHER TO ENTER INTO SUCH ARRANGEMENT. THE BOARD MEMBER MAY NOT BE PRESENT FOR DISCUSSION OF OR VOTE ON THE ARRANGEMENT AND IS NOT COUNTED IN A QUORUM FOR SUCH MEETING. DISCLOSED EMPLOYEE POTENTIAL CONFLICTS OF INTEREST ARE REVIEWED BY THE GENERAL COUNSEL, CFO OR, IN THE CASE OF KEY EMPLOYEES, THE AUDIT COMMITTEE OF THE BOARD, WHO MAY APPROVE THE MATTER ONLY IF IT IS FAIR, REASONABLE AND IN THE BEST INTEREST OF GSUSA.

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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FORM 990, PART VI, SECTION B, LINES 15A & 15B

COMPENSATION REVIEW

THE ORGANIZATION FOLLOWS A CONSISTENT PROCESS TO DETERMINE SALARIES OF THE CEO AND TOP MANGEMENT WHICH INCLUDES:

1. USING WILLIS TOWERS WATSON, AN INDEPENDENT COMPENSATION CONSULTING FIRM WHO COMPILES BENCHMARKS, MARKET ASSESSMENTS, SALARY AND TOTAL COMPENSATION DATA FOR THE CEO AND EXECUTIVE TEAM.

2. THE CHAIR OF THE NATIONAL BOARD AND THE CHAIR OF THE EXECUTIVE DEVELOPMENT AND COMPENSATION COMMITTEE REVIEW THE CEO'S PERFORMANCE BASED ON GSUSA'S PERFORMANCE AGAINST GOALS AND DETERMINE ANY RECOMMENDED SALARY OR INCENTIVE PAYMENTS.

3. THE CEO REVIEWS THE EXECUTIVE TEAM'S PERFORMANCE AND DISCUSSES INDIVIDUAL PERFORMANCE AND ANY RECOMMENDED SALARY OR INCENTIVE PAYMENTS WITH THE EXECUTIVE DEVELOPMENT AND COMPENSATION COMMITTEE.

4. BASED ON THIS INFORMATION, THE EDCC REVIEWS AND RECOMMENDS COMPENSATION; THE RECOMMENDATIONS ARE REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE OF THE BOARD.

FORM 990, PART VI, SECTION C, LINE 19

DISCLOSURES

THE ORGANIZATION MAKES ITS AUDITED FINANCIAL STATEMENTS AND FORM 990 AVAILABLE TO THE GENERAL PUBLIC VIA ITS WEBSITE. OUR GOVERNING DOCUMENTS

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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ARE ADDITIONALLY PUBLISHED IN A "BLUE BOOK OF BASIC DOCUMENTS" WHICH IS ALSO AVAILABLE TO THE GENERAL PUBLIC VIA OUR WEBSITE.

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS OR FUND BALANCES

PENSION RELATED GAIN	\$6,128,536
PENSION COSTS OTHER THAN	
NET PERIODIC PENSION COST	(\$520,101)
CHANGE IN VALUE OF CHARITABLE GIFT ANNUITY	\$32,117
CHANGE IN VALUE OF DEFERRED GIFTS	(\$1,486)
ADJUSTMENT DUE TO ROUNDING	(\$2,000)

TOTAL OTHER CHANGES IN NET ASSETS	\$5,637,066

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

GIRL SCOUTS OF THE UNITED STATES OF AMERICA (GSUSA), HEADQUARTERED IN NEW YORK CITY, IS A NATIONAL NONPROFIT ORGANIZATION WITH THE MISSION TO BUILD GIRLS OF COURAGE, CONFIDENCE, AND CHARACTER WHO MAKE THE WORLD A BETTER PLACE. FORMED IN 1912 IN SAVANNAH, GEORGIA, GSUSA IS NOW IN ITS SECOND CENTURY OF SERVING GIRLS, WITH MORE THAN 2.2 MILLION ADULT AND GIRL MEMBERS SPREAD ACROSS 111 INDEPENDENT GIRL SCOUT COUNCILS. THE GOVERNANCE OF THE ORGANIZATION RELIES ON AN EFFICIENT DEMOCRATIC PROCESS THAT IS RESPONSIVE TO OUR FAST-CHANGING WORLD.

AS THE WORLD'S FOREMOST GIRL LEADERSHIP ORGANIZATION, GSUSA PUTS

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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ATTACHMENT 1 (CONT'D)

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

GIRLS FRONT AND CENTER, UNDERSTANDING THAT WHEN GIRLS SUCCEED, SO DOES SOCIETY. THE GIRL-ONLY, GIRL-LED, AND ALL-AROUND GIRL-DEFINED ASPECTS OF GIRL SCOUTING ARE CRUCIAL TO WHAT THE ORGANIZATION OFFERS, AND THE FOUNDATION OF THE GIRL SCOUT PROGRAM IS THE GIRL SCOUT LEADERSHIP EXPERIENCE, WHICH HELPS GIRLS TAKE THE LEAD IN THEIR OWN LIVES AND THE WORLD.

WITH THE SUPPORT OF CARING ADULT VOLUNTEERS AND MENTORS, GIRL SCOUTS EXPLORE STEM (SCIENCE, TECHNOLOGY, ENGINEERING, AND MATH), THE OUTDOORS, AND ENTREPRENEURSHIP, ALL WHILE DEVELOPING CRUCIAL LIFE SKILLS THAT SERVE THEM WELL BEYOND THEIR TIME AS GIRL MEMBERS. THE GIRL SCOUT PROGRAM IS PROVEN TO HELP GIRLS THRIVE IN FIVE KEY WAYS AS THEY DEVELOP A STRONG SENSE OF SELF, SEEK CHALLENGES AND LEARN FROM SETBACKS, DISPLAY POSITIVE VALUES, FORM AND MAINTAIN HEALTHY RELATIONSHIPS, AND IDENTIFY AND SOLVE PROBLEMS.

GSUSA IS AN INCREASINGLY DIVERSE ORGANIZATION THAT SEEKS TO EMPOWER ALL GIRLS - IN EVERY COMMUNITY ACROSS OUR NATION; OF EVERY BACKGROUND, IDENTITY, AND ABILITY; AND IN EVERY ECONOMIC CIRCUMSTANCE - TO CREATE THE CHANGE THEY WANT TO SEE IN THE WORLD. TODAY APPROXIMATELY 30% OF YOUTH MEMBERS ARE GIRLS OF DIVERSE RACIAL AND ETHNIC BACKGROUNDS, AND GSUSA IS COMMITTED TO DOING THE DIFFICULT WORK TO BECOME AN ANTI-RACIST ORGANIZATION. IN JUNE 2020, GSUSA LAUNCHED ITS PLEDGE TO CREATE AN ANTI-RACIST ORGANIZATION AND WORLD AND ASKED ITS MEMBERS AND SUPPORTERS TO SIGN IT TO SIGNIFY THE ENTIRE GIRL SCOUT MOVEMENT'S COMMITMENT TO WORKING FOR JUSTICE AND EQUALITY

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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ATTACHMENT 1 (CONT'D)

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

- ENORMOUS AND ONGOING WORK THAT IS FOUNDATIONAL TO THE ORGANIZATION'S PROMISE TO SERVE ALL GIRLS.

THE PURPOSE OF GSUSA IS TO PROMOTE THE GIRL SCOUT MOVEMENT, WHICH CONSISTS OF ALL MEMBERS REGISTERED THROUGH THE NATIONAL OFFICE AND GIRL SCOUT COUNCILS. GSUSA RECEIVED A CONGRESSIONAL CHARTER BY A SPECIAL ACT OF THE UNITED STATES CONGRESS ON MARCH 16, 1950, AND GIRL SCOUTS' 111 COUNCILS ARE GRANTED CHARTERS BY THE GSUSA BOARD OF DIRECTORS. EACH GIRL SCOUT COUNCIL IS SEPARATELY INCORPORATED BUT CHARTERED BY GSUSA WITH TWO PRIMARY RESPONSIBILITIES: TO DELIVER THE GIRL SCOUT LEADERSHIP EXPERIENCE TO ANY GIRL IN GRADE K-12 WHO MEETS THE MEMBERSHIP REQUIREMENTS, AND TO FURTHER THE DEVELOPMENT OF THE GIRL SCOUT MOVEMENT IN THE UNITED STATES.

GSUSA PROVIDES SERVICES TO ITS CHARTERED COUNCILS. IN PROVIDING THESE SERVICES, GSUSA IS EXEMPT FROM FEDERAL INCOME TAX IN ACCORDANCE WITH SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.

ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

GIRL PROGRAM DEVELOPMENT AND ADULT LEARNING OPPORTUNITIES:

-DEVELOP AND EVALUATE TIMELY, GIRL-ENDORSED PROGRAMMING FOR GIRL MEMBERS OF GSUSA, UPHOLDING GSUSA'S REPUTATION AS THE PREMIER LEADERSHIP DEVELOPMENT EXPERIENCE FOR GIRLS.

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ATTACHMENT 2 (CONT'D)

-DRIVE THE FULL LIFECYCLE MANAGEMENT OF GIRL SCOUT PROGRAMS,
ENSURING RELEVANT AND ENGAGING IN-PERSON AND ONLINE EXPERIENCES
FOR GIRLS.

-PROVIDE OPPORTUNITIES FOR GIRL SCOUTS TO ENJOY VALUABLE
CROSS-CULTURAL EXPERIENCES THAT HELP THEM BETTER UNDERSTAND AND
RESPECT OTHER CULTURES AND GLOBAL ISSUES, AS WELL AS HOW THEY CAN
HELP WHERE THEY FEEL INSPIRED TO.

-LEAD COOKIE PROGRAM STRATEGY, GOVERNANCE AND NATIONAL EXECUTION
IN SUPPORT OF THE GIRL SCOUT COOKIE PROGRAM.

-DEVELOP AND ENHANCE DIGITAL COOKIE TECHNOLOGY PROVIDING GIRLS THE
OPPORTUNITY TO BUILD THEIR OWN E-COMMERCE WEBSITE FOR THEIR COOKIE
BUSINESS.

-DIVERSIFY AND GROW NATIONAL LICENSING RELATIONSHIPS.

-EFFECTIVELY UTILIZE GIRL SCOUT PROPERTIES TO PROVIDE UNIQUE
CUSTOMER EXPERIENCES AND GROW MEMBERSHIP INCLUDING THE JULIETTE
GORDON LOW BIRTHPLACE IN SAVANNAH, GA AND THE EDITH MACY CENTER IN
WESTCHESTER COUNTY, NY.

-DEVELOP AND MANAGE GSUSA'S RELATIONSHIP AND PROGRAMMING WITH THE

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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ATTACHMENT 2 (CONT'D)

WORLD ASSOCIATION OF GIRL GUIDES AND GIRL SCOUTS (WAGGGS) AND
OTHER GLOBAL ORGANIZATIONS.

-DEVELOP AND EVALUATE LEARNING OPPORTUNITIES FOR ADULT MEMBERS OF
GSUSA, SO THAT GIRL SCOUT VOLUNTEERS FEEL SUPPORTED AND ABLE TO
CONFIDENTLY AND EFFECTIVELY GUIDE AND DELIVER PROGRAMMING TO
GIRLS.

ATTACHMENT 3

FORM 990, PART III - PROGRAM SERVICE, LINE 4B

COMPREHENSIVE COUNCIL SUPPORT:

-PROVIDE DIRECT CONSULTING AND ASSISTANCE TO ALL 111 GIRL SCOUT
COUNCILS AND USA GIRL SCOUTS OVERSEAS TO ENSURE THAT GIRL SCOUT
PROGRAMS AND SERVICES ARE DELIVERED EFFECTIVELY AND CONSISTENTLY
NATIONWIDE AND OVERSEAS IN ACCORDANCE WITH THE MISSION, POLICIES,
AND GOALS OF THE ORGANIZATION.

-DRIVE SUSTAINABLE MEMBERSHIP GROWTH AND MOVEMENT HEALTH BY
ENGAGING OUR GIRLS, VOLUNTEERS, PARENTS, COUNCILS, AND SUPPORTERS
TO FULFILL THE GIRL SCOUT MISSION. THE TEAMS IN THIS COMMUNITY ARE
INVOLVED WITH NETWORK ALIGNMENT AND ADVANCEMENT OF MISSION
DELIVERY STRATEGIES; COUNCIL LEADERSHIP SUPPORT AND TRAINING;
CULTIVATION OF NATIONAL PARTNERSHIPS THAT DRIVE MEMBERSHIP GROWTH;
AND MOVEMENT PROPERTY STRATEGY AND SUPPORT. THE TEAMS WORK CLOSELY

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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ATTACHMENT 3 (CONT'D)

WITH ALL OTHER GSUSA COMMUNITIES TO BRING AN EXCEPTIONAL EXPERIENCE TO OUR MEMBERS AND TO ENSURE A VIBRANT, SUSTAINABLY GROWING MOVEMENT.

-ENHANCE THE CUSTOMER EXPERIENCE WITH A FOCUS ON ENGAGEMENT OF VOLUNTEERS, AND THE RETENTION AND RECRUITMENT OF MEMBERS, SUPPORTED BY DEVELOPMENT, IMPLEMENTATION AND OPERATIONS OF THE MOVEMENT-WIDE COMMON TECHNOLOGY PLATFORM AND PRODUCTS.

-PROVIDE DIRECT GRANTS TO COUNCILS TO ENHANCE THEIR FINANCIAL STABILITY AND BUILD PROGRAMMATIC CAPACITY.

ATTACHMENT 4

FORM 990, PART III - PROGRAM SERVICE, LINE 4C

BRAND PROMOTION AND EXTERNAL ENGAGEMENT:

-PROMOTE THE GIRL SCOUT BRAND, PROGRAM, AND MISSION FAR AND WIDE, EMPHASIZING THAT GIRL SCOUTS OF THE USA IS THE PLACE WHERE GIRLS AND YOUNG WOMEN LEARN TO TAKE THE LEAD IN THEIR OWN LIVES AND THE WORLD.

-MAINTAIN GSUSA'S POSITION IN THE MARKETPLACE AS THE SINGLE BEST LEADERSHIP DEVELOPMENT ORGANIZATION FOR GIRLS IN THE WORLD.

-RESEARCH AND ADVOCATE ON ISSUES THAT AFFECT GIRLS AND WOMEN

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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ATTACHMENT 4 (CONT'D)

LOCALLY, NATIONALLY, AND/OR GLOBALLY.

-DEVELOP AND PROMOTE THE GIRL SCOUT COOKIE PROGRAM, THE LARGEST GIRL-LED ENTREPRENEURIAL PROGRAM IN THE WORLD.

-DEVELOP, MARKET, AND SELL GIRL SCOUT-BRANDED ITEMS AND PROGRAM MATERIALS TO GIRL SCOUT MEMBERS AND THE GENERAL PUBLIC.

-PROVIDE GIRL SCOUT COUNCILS WITH MARKETING AND COMMUNICATIONS TOOLS AND RESOURCES TO HELP THEM REACH EXTERNAL AUDIENCES IN WAYS THAT ARE CONSISTENT WITH NATIONAL EFFORTS, TO DRIVE THE PUBLIC'S RECOGNITION OF GIRL SCOUTS OF THE USA AS A SINGLE COHESIVE MOVEMENT FOR GIRLS.

ATTACHMENT 5FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CO, CT,
DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI,
MN, MS, MO, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,
RI, SC, TN, UT, VT, VA, WA, WV, WI,

ATTACHMENT 6990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
ERNST & YOUNG U.S. LLP P.O. BOX 640382	IT DEVELOPMENT	5,891,184.

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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ATTACHMENT 6 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
PITTSBURGH, PA 15264-0382		
SALESFORCE.ORG FDN P.O. BOX 39000 SAN FRANCISCO, CA 94139-0001	TECHNICAL SERVICES	4,654,778.
DORSEY & WHITNEY, LLP 51 WEST 52ND STREET NEW YORK, NY 10019-6119	LEGAL SERVICES	2,951,422.
ACCENTURE, LLP 800 N. GELEBE ROAD ARLINGTON, VA 22203	IT DEVELOPMENT	2,496,137.
SAP PUBLIC SERVICES, INC. P.O. BOX 828795 PHILADELPHIA, PA 19182-8795	TECHNICAL SERVICES	1,625,248.

ATTACHMENT 7

FORM 990, PART IX - OTHER FEES

<u>DESCRIPTION</u>	(A) <u>TOTAL FEES</u>	(B) <u>PROGRAM SERVICE EXP.</u>	(C) <u>MANAGEMENT AND GENERAL</u>	(D) <u>FUNDRAISING EXPENSES</u>
TEMPORARY STAFFING	2,221,308.	2,221,308.		
RESEARCH	201,549.	201,549.		
MARKETING CONSULTANTS	1,494,190.	1,494,190.		
MEDIA CONTENT CONSULTANTS	1,113,795.	1,113,795.		
TRANSLATION SERVICES	610,483.	610,483.		
RECRUITMENT CONSULTANTS	854,368.	854,368.		
TRAINING CONSULTANTS	187,968.	187,968.		
LICENSING AGENT	237,095.	237,095.		
CONSTRUCTION CONTRACTORS	246,381.	246,381.		
OTHER	5,721,926.	4,982,172.	672,724.	67,030.

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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ATTACHMENT 7 (CONT'D)

FORM 990, PART IX - OTHER FEES

<u>DESCRIPTION</u>	(A) <u>TOTAL FEES</u>	(B) <u>PROGRAM SERVICE EXP.</u>	(C) <u>MANAGEMENT AND GENERAL</u>	(D) <u>FUNDRAISING EXPENSES</u>
TOTALS	<u>12,889,063.</u>	<u>12,149,309.</u>	<u>672,724.</u>	<u>67,030.</u>

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

Open to Public Inspection

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

▶ **Attach to Form 990.**

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

Department of the Treasury
Internal Revenue Service

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) NEW YORK GIRL SCOUTS, INC. (NOMINEE) 420 FIFTH AVENUE NEW YORK, NY 10018	REAL PROP HOL	NY	0.	19,720,000.	GSUSA
(2) ONE GS MEDIA, LLC 420 FIFTH AVENUE NEW YORK, NY 10018	MEDIA	DE	315,726.	780,846.	GSUSA
(3)					
(4)					
(5)					
(6)					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) WORLD FOUNDATION FOR GIRL GUIDES AND GIR 420 FIFTH AVENUE NEW YORK, NY 10018 23-7147834	GIRL SCOUTING	NY	501(C)(3)	07	GSUSA	X	
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2019

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) GIRL SCOUTS OF THE USA TRUST 30-6349021 400 HOWARD STREET SAN FRANCISCO, CA 94105	GRANTOR TRUST	NY	GSUSA	TRUST	786,667.	37,895,968.	100.0000	X	
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

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

Table with 3 columns: Description, Yes, No. Rows 1a through 1s detailing transactions like interest, gifts, loans, dividends, etc.

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

Table with 4 columns: (a) Name of related organization, (b) Transaction type (a-s), (c) Amount involved, (d) Method of determining amount involved. Rows (1) through (6) are empty.

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
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(15)													
(16)													

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.
