

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

2014

Open to Public Inspection

A For the **2014** calendar year, or tax year beginning **10/01, 2014**, and ending **09/30, 2015**

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 10018-2798				
F Name and address of principal officer: ANNA MARIA CHAVEZ 420 FIFTH AVENUE NEW YORK, NY 10018			G Gross receipts \$ 238,965,827.		
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(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
J Website: WWW.GIRLSGOUTS.ORG			H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
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		
			H(c) Group exemption number ▶		

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	27.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	27.
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	433.
	6 Total number of volunteers (estimate if necessary)	6	776,000.
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	2,238,949.
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)	9,435,368.	9,860,736.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	44,509,412.	44,518,433.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,949,948.	7,076,196.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	31,648,408.	33,228,202.
		94,543,136.	94,683,567.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8,890,478.	3,880,917.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	389,399.	365,820.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	35,832,837.	36,607,186.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	256,383.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,698,191.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	44,593,021.	52,170,332.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	89,705,735.	93,280,638.	
19 Revenue less expenses. Subtract line 18 from line 12	4,837,401.	1,402,929.	
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)	199,618,501.	189,759,993.
	22 Net assets or fund balances. Subtract line 21 from line 20	63,220,671.	69,580,367.
	136,397,830.	120,179,626.	

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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		
	ANNA MARIA CHAVEZ Type or print name and title		CEO		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	DANIEL ROMANO		05/05/2016		P00504182
	Firm's name ▶ GRANT THORNTON LLP	Firm's EIN ▶ 36-6055558			
Firm's address ▶ 757 THIRD AVENUE, 4TH FLOOR NEW YORK, NY 10017-2014			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** (2014)

Part III Statement of Program Service Accomplishments

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

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 [X] No

[] Yes [X] 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 [X] No

[] Yes [X] No

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

4 Describe the organization's program service accomplishments for each of its three largest program 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 \$ 27,204,289. including grants of \$ 1,080,121.) (Revenue \$ 12,842,492.)

SERVICE DELIVERY TO LOCAL COUNCILS: PROVIDE DIRECT CONSULTING AND TECHNICAL ASSISTANCE TO ALL GIRL SCOUT COUNCILS TO ENSURE THAT GIRL SCOUT PROGRAMS AND SERVICES ARE DELIVERED EFFECTIVELY AND CONSISTENTLY NATIONWIDE, AND TO USA GIRL SCOUTS OVERSEAS, TO ASSURE THE DELIVERY OF SERVICES TO GIRLS AND ADULTS IN ACCORDANCE WITH THE MISSION, POLICIES, AND GOALS OF THE ORGANIZATION.

4b (Code:) (Expenses \$ 23,592,745. including grants of \$ 2,793,596.) (Revenue \$ 15,537,186.)

PROGRAM DEVELOPMENT AND VOLUNTEER LEARNING: RESEARCH, DEVELOP AND EVALUATE GIRL SCOUT PROGRAMS FOR GIRLS, DELIVER ADULT LEARNING OPPORTUNITIES AND PROVIDE THE NATION'S PREMIERE LEADERSHIP DEVELOPMENT EXPERIENCE FOR GIRLS.

4c (Code:) (Expenses \$ 15,156,241. including grants of \$ 0) (Revenue \$ 7,147,459.)

COMMUNICATION: COMMUNICATE KEY MESSAGES ABOUT GIRL SCOUTING WHICH PROMOTE THE GIRL SCOUT BRAND AND MISSION. DISSEMINATES MARKETING AND COMMUNICATIONS TOOLS AND MATERIALS FOR USE BY GIRL SCOUT COUNCILS.

4d Other program services (Describe in Schedule O.) ATTACHMENT 2 (Expenses \$ 15,061,839. including grants of \$ 7,200.) (Revenue \$ 28,255,954.)

4e Total program service expenses 81,015,114.

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 temporarily restricted endowments, permanent endowments, or 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?		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
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	
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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <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	
35b 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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 1a through 14b regarding IRS filings and tax compliance.

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 in 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 (27), 1b (27), 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 3
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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 in 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: ANGELA OLDEN 420 FIFTH AVENUE NEW YORK, NY 10018 212 852 8000

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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(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			
(1) KATHY HOPINKAH HANNAN NATIONAL PRESIDENT	10.00 0	X		X				0	0	0
(2) SHARON MATTHEWS 1ST VICE PRESIDENT	10.00 0	X		X				0	0	0
(3) WONYA LUCAS 2ND VICE PRESIDENT	10.00 0	X		X				0	0	0
(4) SYLVIA ACEVEDO SECRETARY	10.00 0	X		X				0	0	0
(5) CHARLES MCLANE TREASURER	10.00 0	X		X				0	0	0
(6) MONICA GIL BOARD MEMBER	5.00 0	X						0	0	0
(7) SAPREET KAUR SALUJA BOARD MEMBER	5.00 0	X						0	0	0
(8) CONNIE LINDSAY (THRU 10/31/14) NATIONAL PRESIDENT	10.00 0	X		X				0	0	0
(9) DEBRA NAKATOMI (THRU 10/31/14) SECRETARY	10.00 0	X		X				0	0	0
(10) DAVIA TEMIN (THRU 10/31/14) FIRST VICE PRESIDENT	10.00 0	X		X				0	0	0
(11) JOAN WAGNON (THRU 10/31/14) TREASURER	10.00 0	X		X				0	0	0
(12) PRISCILLA ALMODOVAR BOARD MEMBER	5.00 0	X						0	0	0
(13) JEANNE KWONG BICKFORD BOARD MEMBER	5.00 0	X						0	0	0
(14) LYNN GANGONE BOARD MEMBER	5.00 0	X						0	0	0

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

(A) Name and title	(B) Average hours per week (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) DINEEN GARCIA ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
16) STEVEN GILLILAND ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
17) JEANMARIE GRISI ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
18) JOHN HOM ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
19) NOORAIN KHAN ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
20) KAREN MALONEY ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
21) MINA NGUYEN ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
22) DEBBIE NIELSON ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
23) SUSAN PETERS ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
24) NORMA PROVENCIO PICHARDO ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
25) NANCY REARDON ----- 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							3,744,738.	0	488,678.	
d Total (add lines 1b and 1c)							3,744,738.	0	488,678.	

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 **▶** 71

	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 4		

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 **▶** 72

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) TROOPER SANDERS ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
(27) JULIE SYGIEL ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
(28) CARRI BAKER WELLS ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
(29) SHARON WIBBEN ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
(30) LINDA DESCANO (THRU 10/31/14) ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
(31) LISA GABLE (THRU 10/31/14) ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
(32) JEN GRANCIO (THRU 10/31/14) ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
(33) PAT HARRIS (THRU 10/31/14) ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
(34) INGRID JONES (THRU 10/31/14) ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
(35) BARB KRUMSIEK (THRU 10/31/14) ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
(36) MITCH MARTIN (THRU 10/31/14) ----- BOARD MEMBER	5.00 ----- 0	X					0	0	0	
1b Sub-total										
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 **▶** 71

	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) PAT ROMINES (THRU 10/31/14) BOARD MEMBER	5.00 0	X					0	0	0	
(38) MANISHA THAKOR (THRU 10/31/14) BOARD MEMBER	5.00 0	X					0	0	0	
(39) BRENDA FREEMAN (THRU 12/14/14) BOARD MEMBER	5.00 0	X					0	0	0	
(40) KATHY WORTHEN (THRU 12/14/14) BOARD MEMBER	5.00 0	X					0	0	0	
(41) CATHY COUGHLIN (THRU 4/23/15) BOARD MEMBER	5.00 0	X					0	0	0	
(42) JENNY ALONZO BOARD MEMBER	5.00 0	X					0	0	0	
(43) JUDITH BATTY BOARD MEMBER	5.00 0	X					0	0	0	
(44) ANNA MARIA CHAVEZ CHIEF EXECUTIVE OFFICER	35.00 0			X			542,889.	0	89,720.	
(45) ANGELA OLDEN CHIEF FINANCIAL OFFICER	35.00 0			X			300,134.	0	50,185.	
(46) JENNIFER ROCHON GENERAL COUNSEL	35.00 0				X		291,346.	0	48,462.	
(47) MARGARET MILLER (THRU 12/5/14) CHIEF INFORMATION OFFICER	35.00 0				X		276,780.	0	23,879.	
1b Sub-total										
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 **▶** 71

	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) DEBORAH TAFT(THRU 10/31/14) CHIEF DEVELOPMENT OFFICER	35.00 0				X			262,117.	0	30,725.
(49) BARRY HOROWITZ VP & GM - GS MERCHANDISE GSUSA	35.00 0				X			290,111.	0	38,597.
(50) NHADINE LEUNG CHIEF GOVERNANCE OFFICER	35.00 0				X			225,108.	0	18,354.
(51) DANIEL BOOCKVAR(THRU 08/15/14) CHIEF CUSTOMER OFFICER	35.00 0				X			196,971.	0	34,357.
(52) LISA MARGOSIAN CHIEF COUNCIL RELATIONSHIP OFF	35.00 0					X		237,906.	0	13,061.
(53) KRISTA KOKJOHN-POEHLER CHIEF GIRL EXPERIENCE OFFICER	35.00 0					X		223,801.	0	48,773.
(54) SARAH GORMLEY CHIEF MARKETING OFFICER	35.00 0					X		243,290.	0	24,021.
(55) KERRY CONNOLLY COUNCIL LEADERSHIP STRATEGIST	35.00 0					X		215,260.	0	22,562.
(56) CLAIRE FERRARIN TALENT MANAGEMENT & LEARNING A	35.00 0					X		219,860.	0	40,674.
(57) FLORENCE CORSELLO(THRU 07/13/1 FORMER CFO	0 0						X	219,165.	0	5,308.
1b Sub-total										
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 **71**

	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	10,421.					
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions),	1e	277,699.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	9,572,616.					
	g Noncash contributions included in lines 1a-1f: \$		578,178.					
	h Total. Add lines 1a-1f ▶			9,860,736.				
	Program Service Revenue				Business Code			
2a MEETING AND LEARNING EVENTS			721000	6,296,728.	4,135,598.	2,161,130.		
b MEMBERSHIP DUES			624100	38,221,705.	38,221,705.			
c _____								
d _____								
e _____								
f All other program service revenue								
g Total. Add lines 2a-2f ▶				44,518,433.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts). ▶			1,487,032.		61,965.	1,425,067.	
	4 Income from investment of tax-exempt bond proceeds ▶			0				
	5 Royalties ▶			10,184,364.			10,184,364.	
	6a Gross rents	(i) Real	(ii) Personal					
		b Less: rental expenses						
		c Rental income or (loss)						
		d Net rental income or (loss) ▶			0			
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		131,359,307.						
		b Less: cost or other basis and sales expenses			125,770,143.			
		c Gain or (loss)			5,589,164.			
	d Net gain or (loss) ▶			5,589,164.		15,854.	5,573,310.	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 a							
		b Less: direct expenses b						
		c Net income or (loss) from fundraising events. ▶			0			
9a Gross income from gaming activities. See Part IV, line 19 a								
	b Less: direct expenses b							
	c Net income or (loss) from gaming activities. ▶			0				
10a Gross sales of inventory, less returns and allowances a			39,937,905.					
	b Less: cost of goods sold b		18,512,117.					
	c Net income or (loss) from sales of inventory. ▶			21,425,788.	21,425,788.			
Miscellaneous Revenue			Business Code					
11a SOFTWARE MAINTENANCE		541900	1,550,379.			1,550,379.		
b INSURANCE RECOVERY		453220	5,896.			5,896.		
c MISCELLANEOUS		900099	61,775.			61,775.		
d All other revenue								
e Total. Add lines 11a-11d ▶			1,618,050.					
12 Total revenue. See instructions ▶			94,683,567.	63,783,091.	2,238,949.	18,800,791.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,668,417.	3,668,417.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	120,000.	120,000.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	92,500.	92,500.		
4 Benefits paid to or for members	365,820.	365,820.		
5 Compensation of current officers, directors, trustees, and key employees	1,975,614.	1,381,007.	431,253.	163,354.
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	25,654,704.	21,845,052.	3,034,456.	775,196.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,590,842.	3,096,693.	374,203.	119,946.
9 Other employee benefits	3,443,239.	2,967,260.	360,296.	115,683.
10 Payroll taxes	1,942,787.	1,675,432.	202,459.	64,896.
11 Fees for services (non-employees):				
a Management	170,532.	170,532.		
b Legal	1,151,049.	821,132.	329,917.	
c Accounting	388,978.	286,723.	61,984.	40,271.
d Lobbying	205,220.	205,220.		
e Professional fundraising services. See Part IV, line 17.	256,383.			256,383.
f Investment management fees	392,045.		392,045.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) ATCH 5	12,668,997.	11,870,689.	747,137.	51,171.
12 Advertising and promotion	1,642,599.	1,550,136.	25,833.	66,630.
13 Office expenses	2,598,856.	2,371,494.	125,192.	102,170.
14 Information technology	13,687,640.	12,676,986.	625,386.	385,268.
15 Royalties	0			
16 Occupancy	4,702,846.	4,352,363.	34,736.	315,747.
17 Travel	3,411,187.	3,131,818.	184,774.	94,595.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	0			
20 Interest	1,640.	1,640.		
21 Payments to affiliates	1,499,280.	1,499,280.		
22 Depreciation, depletion, and amortization	4,603,403.	3,843,929.	630,315.	129,159.
23 Insurance	2,028,119.	1,536,278.	491,841.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>COMMISSION EXPENSE</u>	883,191.	883,191.		
b <u>CREDIT CARD PROCESSING FEES</u>	785,151.	219,827.	562,452.	2,872.
c <u>FOOD SERVICES</u>	516,300.	335,297.	175,571.	5,432.
d <u>RECRUITING EXPENSE</u>	510,022.		510,022.	
e All other expenses	323,277.	46,398.	267,461.	9,418.
25 Total functional expenses. Add lines 1 through 24e	93,280,638.	81,015,114.	9,567,333.	2,698,191.
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	54,340.	1	63,775.
	2 Savings and temporary cash investments	12,593,952.	2	15,154,674.
	3 Pledges and grants receivable, net	3,135,257.	3	1,839,168.
	4 Accounts receivable, net	6,030,900.	4	5,443,815.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	7,800,536.	8	7,025,128.
	9 Prepaid expenses and deferred charges	1,907,561.	9	980,055.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 100,191,236.		
	b Less: accumulated depreciation	10b 68,342,245.	25,015,631.	10c 31,848,991.
	11 Investments - publicly traded securities	37,221,418.	11	34,685,479.
	12 Investments - other securities. See Part IV, line 11	104,448,819.	12	91,427,177.
	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	1,410,086.	15	1,291,731.
16 Total assets. Add lines 1 through 15 (must equal line 34)	199,618,501.	16	189,759,993.	
Liabilities	17 Accounts payable and accrued expenses	12,095,042.	17	13,402,346.
	18 Grants payable	0	18	0
	19 Deferred revenue	20,352,671.	19	18,578,140.
	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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	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	30,772,958.	25	37,599,881.
	26 Total liabilities. Add lines 17 through 25	63,220,671.	26	69,580,367.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	89,687,504.	27	73,159,657.
	28 Temporarily restricted net assets	24,393,949.	28	23,728,720.
	29 Permanently restricted net assets	22,316,378.	29	23,291,249.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	136,397,830.	33	120,179,626.
	34 Total liabilities and net assets/fund balances	199,618,501.	34	189,759,993.

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	94,683,567.
2	Total expenses (must equal Part IX, column (A), line 25)	2	93,280,638.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,402,929.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	136,397,830.
5	Net unrealized gains (losses) on investments	5	-9,171,232.
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 in Schedule O)	9	-8,449,901.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	120,179,626.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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 in Schedule O.
- 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?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, 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.)
- 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 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.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - 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 1-9 above or IRC section (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) 2014

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

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total; 5 The portion of total contributions by each person; 6 Public support.

Section B. Total Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support; 12 Gross receipts from related activities; 13 First five years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2014 (43.36%); 15 Public support percentage from 2013 Schedule A (44.57%); 16a 33 1/3% support test - 2014 (checked); 16b 33 1/3% support test - 2013; 17a 10%-facts-and-circumstances test - 2014; 17b 10%-facts-and-circumstances test - 2013; 18 Private foundation.

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
 If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2014. 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 - 2013. 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 on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d 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>		
3b	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>		
3c	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 11a or 11b in Part I, answer (b) and (c) below.</i>		
4b	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>		
4c	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>		
5b	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?		
5c	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 (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) 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 (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</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).</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>		
9b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9c	Did a disqualified person (as defined in line 9(a)) 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 IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer (b) below.</i>		
10b	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?		
b	A family member of a person described in (a) above?		
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>		

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>		
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>		

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>		

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, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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>		
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>		

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		Yes	No
2a			
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>			
b		Yes	No
2b			
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>			
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a		Yes	No
3a			
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>			
b		Yes	No
3b			
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>			

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. **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 2014 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-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2015. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2010	2011	2012	2013	2014	TOTAL
SOFTWARE MAINTENANCE	100,504.	128,585.	132,542.	246,328.	1,550,379.	2,158,338.
COOKIE PACKAGE REDESIGN		100,000.				100,000.
INSURANCE RECOVERY	3,176.				5,896.	9,072.
MISCELLANEOUS	367,818.	270,994.	48,263.	30,034.	61,775.	778,884.
TOTALS	<u>471,498.</u>	<u>499,579.</u>	<u>180,805.</u>	<u>276,362.</u>	<u>1,618,050.</u>	<u>3,046,294.</u>

Schedule of Contributors

2014

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

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 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. Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 does not 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	----- ----- -----	\$ 2,033,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	----- ----- -----	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	----- ----- -----	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	----- ----- -----	\$ 350,370.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	----- ----- -----	\$ 511,974.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	----- ----- -----	\$ 223,000.	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	----- ----- -----	\$ 227,987.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	----- ----- -----	\$ 200,834.	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.)
	----- ----- -----	\$ -----	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
1	COMPUTER HARDWARE ----- ----- -----	\$ 513,333.	06/03/2015
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----

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
----- ----- -----	----- ----- -----

(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
----- ----- -----	----- ----- -----

(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
----- ----- -----	----- ----- -----

(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
----- ----- -----	----- ----- -----

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

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

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.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

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) 2014

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 (grass roots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)		205,220.	
c Total lobbying expenditures (add lines 1a and 1b)		205,220.	
d Other exempt purpose expenditures		93,075,418.	
e Total exempt purpose expenditures (add lines 1c and 1d)		93,280,638.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		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) 2011	(b) 2012	(c) 2013	(d) 2014	(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	182,377.	303,971.	238,692.	205,220.	930,260.
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					

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)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d 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 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 required by the instructions.

Part IV Supplemental Information *(continued)*

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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

2014

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Open to Public Inspection

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

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" to Form 990, Part IV, line 6.

Table with 3 columns: Line number, Description, (a) Donor advised funds, (b) Funds and other accounts. Includes rows for total number at end of year, aggregate values, and yes/no questions about donor advisement.

Part II Conservation Easements.

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

Table with 3 columns: Line number, Description, and Held at the End of the Tax Year. Includes rows for purpose(s) of easements, total number, acreage, and monitoring expenses.

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

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

Table with 3 columns: Line number, Description, and Amount. Includes rows for reporting on art and historical treasures held for public service or for financial gain.

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

Schedule D (Form 990) 2014

JSA 4E1268 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 are a 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 programs
 - 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" to 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 in Part XIII.

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	138,518,000.	127,653,000.	121,665,000.	104,900,000.	109,766,000.
b Contributions	1,353,000.	968,000.	1,113,000.	1,029,000.	935,000.
c Net investment earnings, gains, and losses	-2,487,000.	11,933,000.	14,401,000.	20,195,000.	-1,672,000.
d Grants or scholarships	555,000.	716,000.	718,000.	779,000.	1,430,000.
e Other expenditures for facilities and programs	8,246,000.	1,320,000.	8,808,000.	3,680,000.	2,699,000.
f Administrative expenses					
g End of year balance	128,583,000.	138,518,000.	127,653,000.	121,665,000.	104,900,000.

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

- a** Board designated or quasi-endowment 69.4446 %
 - b** Permanent endowment 17.9502 %
 - c** Temporarily restricted endowment 12.6052 %
- The percentages in 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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(ii) related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input type="checkbox"/>

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" to 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		51,966,122.	40,767,286.	11,198,836.
c Leasehold improvements		2,128,199.	1,422,247.	705,952.
d Equipment		17,681,614.	16,700,956.	980,658.
e Other		28,038,242.	9,451,756.	18,586,486.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				31,848,991.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to 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	5,533,394.	FMV
(B) PRIVATE BOND FUND	5,742,365.	FMV
(C) COMMON COLLECTIVE TRUST	60,850,420.	FMV
(D) HEDGE FUND	15,700,229.	FMV
(E) REAL ESTATE	3,600,769.	FMV
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	91,427,177.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to 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" to 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" to 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	635,244.
(3) ACCRUED PENSION LIABILITY	36,964,637.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	37,599,881.

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	76,670,389.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-9,171,232.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	-8,449,901.	
e	Add lines 2a through 2d		2e	-17,621,133.
3	Subtract line 2e from line 1		3	94,291,522.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	392,045.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	392,045.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	94,683,567.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	92,888,593.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	92,888,593.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	392,045.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	392,045.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	93,280,638.

Part XIII Supplemental Information.

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

SEE PAGE 5

Part XIII Supplemental Information (continued)

FORM 990, SCHEDULE D, PART III, LINE 4

ORGANIZATIONS MAINTAINING COLLECTIONS OF ART, HISTORICAL TREASURES

GIRL SCOUTS OF THE USA OWNS AND MAINTAINS A SCHEDULE OF FINE ARTS CONSISTING OF VARIOUS PAINTINGS, FURNITURE, JEWELRY AND SILVER/GLASSWARE SETTINGS. MOST OF THE OWNED PROPERTY BELONGED TO OUR FOUNDERS, JULIETTE GORDON LOW'S FAMILY AND SOME ITEMS HAVE BEEN DONATED. MOST OF THESE ITEMS ARE ON DISPLAY FOR VISITORS AT THE JULIETTE GORDON LOW BIRTHPLACE IN SAVANNAH, GA. GSUSA ALSO PROVIDES VARIOUS ITEMS TO BE ON EXHIBITION AT VARIOUS GIRL SCOUT EVENTS SUCH AS OUR NATIONAL CONVENTION. GIRL SCOUTS OF THE USA, THE WORLD'S PREEMINENT ORGANIZATION FOR GIRLS, OWNS AND OPERATES THE JULIETTE GORDON LOW GIRL SCOUT NATIONAL CENTER TO PERPETUATE THE SPIRIT AND VISION OF THE FOUNDER, JULIETTE GORDON LOW, IN AN INSPIRING ENVIRONMENT, PROVIDE UNIQUE LEARNING OPPORTUNITIES AND HISTORIC INTERPRETATION OF THE LIFE OF JULIETTE LOW AND THE WAYNE-GORDON HOUSE AND TO FURTHER THE VALUES OF GIRL SCOUTING. THE COLLECTIONS ILLUSTRATE AND INSPIRE VISITING GIRL SCOUT TROOPS, FAMILIES AND OTHER VISITORS TO THE HOUSE AS THEY LEARN ABOUT THE REMARKABLE LIFE OF JULIETTE LOW.

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.

Part XIII Supplemental Information (continued)

FORM 990, SCHEDULE D, PART VI, LINE 1E

THE AMOUNTS SHOWN AS "OTHER" REPRESENT SOFTWARE DEVELOPMENT COSTS

FORM 990, SCHEDULE D, PART X, LINE 2

FIN 48 FOOTNOTE

THE ORGANIZATION FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS STANDARD PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN BE RECOGNIZED IN THE CONSOLIDATED FINANCIAL STATEMENTS ONLY IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE STANDARD ALSO PROVIDES GUIDANCE ON MEASUREMENT, CLASSIFICATION, INTEREST AND PENALTIES, AND DISCLOSURE AND HAD NO MATERIAL IMPACT ON THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS. THE TAX YEARS ENDED 2012, 2013, 2014 AND 2015 ARE STILL OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES. THE ORGANIZATION HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT UNRELATED INCOME; TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS; AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. MATTERS THAT MAY BE CONSIDERED TAX POSITIONS.

Part XIII Supplemental Information (continued)

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

RECONCILIATION OF OTHER

PENSION RELATED LOSSES OTHER THAN NET PERIODIC PENSION COST $-\$8,416,954$,
CHANGE IN VALUE OF DEFERRED GIFTS $\$-49,781$, CHANGE IN VALUE OF CHARITABLE
GIFT ANNUITY $\$-9,318$, FOREIGN CURRENCY FORWARD GAIN $\$26,152$ TOTAL
 $-\$8,449,901$

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2014

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

Name of the organization

Employer identification number

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

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 region	(d) Activities conducted in region (by type) (e.g., 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 region	(f) Total expenditures for and investments in region
(1) EUROPE		8.	PROGRAM SERVICES	SEE PART V	456,781.
(2) EAST ASIA AND THE PACIFIC		6.	PROGRAM SERVICES	SEE PART V	223,510.
(3) CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		14,941,648.
(4) SOUTH AMERICA			GRANTMAKING		67,500.
(5) NORTH AMERICA			GRANTMAKING		20,000.
(6) CENTRAL AMERICA/CARIBBEAN			GRANTMAKING		5,000.
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total		14.			15,714,439.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)		14.			15,714,439.

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

Schedule F (Form 990) 2014

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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	FINANCIAL EM	22,500.				
(2)			NORTH AMERICA	FINANCIAL EM	20,000.				
(3)			SOUTH AMERICA	FINANCIAL EM	45,000.				
(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.

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 non-cash assistance	(g) Description of non-cash 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 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; do not 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 file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)* Yes No

Part V Supplemental Information

Complete this part to 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 3, COLUMN C

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

GIRL SCOUTS OF THE UNITED STATES OF AMERICA HAS 14 STAFF MEMBERS LOCATED OUTSIDE THE UNITED STATES SERVING DEPENDENT MILITARY FAMILIES.

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.

FORM 990, SCHEDULE F, PART I, LINE 2

GRANTS PAID

GIRL SCOUTS OF THE USA MONITORS GRANTS AND SCHOLARSHIPS AWARDED 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.

Part V **Supplemental Information**

Complete this part to 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 II, LINE 1

PURPOSE OF THE GRANT:

FINANCIAL EMPOWERMENT GRANT: THE GRANT ENHANCED THE GIRL SCOUT FINANCIAL LITERACY PLATFORM, ELEVATING IT TO NEW LEVELS OF INNOVATION AND SIGNIFICANCE FOR TODAY'S GIRLS. THE PLATFORM INCREASED GSUSA'S CAPACITY TO ENCOURAGE GIRLS TO PARTICIPATE IN FINANCIAL EMPOWERMENT ACTIVITIES.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

Part I

Fundraising Activities. Complete if the organization answered "Yes" to 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 ten 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 ORR ASSOCIATES, INC.	SEE PART IV		X		256,383.	
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total					256,383.	

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, 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,

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	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: _____

10 a 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).

SCHEDULE G, PART I, LINE 2B, COLUMN II - ACTIVITY

STAFFING ASSESSMENTS; CREATING CASE FOR SUPPORT AND DEVELOPMENT;

STRATEGIC COUNSEL AND PROJECT MANAGEMENT; STRATEGIC PHILANTHROPIC

COUNSEL; PROJECT MANAGEMENT AND INTERIM LEADERSHIP OF PARTNERSHIP TEAM

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

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" to 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 non-cash assistance	(h) Purpose of grant or assistance
(1) GSC OF TROPICAL FLORIDA 11347 SW 160 ST MIAMI, FL 33157-2703	59-0651087	501(C)3	51,528.				PROGRAM FULFILMENT
(2) GS OF THE GREEN & WHITE MOUNTAINS PO BOX 10832 BEDFORD, NH 03110-6835	02-0243160	501(C)3	21,701.				PROGRAM FULFILMENT
(3) GS OF CENTRAL & WESTERN MASSACHUSETTS 301 KELLY WAY HOLYOKE, MA 01040-9685	04-2317694	501(C)3	11,927.				PROGRAM FULFILMENT
(4) GS OF EASTERN MASSACHUSETTS 95 BERKELEY ST BOSTON, MA 02116-6229	04-2703281	501(C)3	43,252.				PROGRAM FULFILMENT
(5) GIRL SCOUTS OF RHODE ISLAND 500 GREENWICH AVE WARWICK, RI 02886	05-0300724	501(C)3	15,879.				PROGRAM FULFILMENT
(6) GS OF CONNECTICUT 340 WASH. ST HARTFORD, CT 06106-3317	06-0646756	501(C)3	32,894.				PROGRAM FULFILMENT
(7) GIRL SCOUTS OF NASSAU COUNTY 110 RING RD W. GARDEN CITY, NY 11530-3296	11-2041443	501(C)3	14,048.				PROGRAM FULFILMENT
(8) SUFFOLK COUNTY GSC INC 442 MORELAND RD COMMACK, NY 11725-5708	11-2164434	501(C)3	24,029.				PROGRAM FULFILMENT
(9) GREATER NY GIRL SCOUT COUNCIL 40 WALL STREET, SUITE #708 NY, NY 10005	13-1624014	501(C)3	98,882.				PROGRAM FULFILMENT
(10) GS HEART OF THE HUDSON 2 GREAT OAK LANE PLEASANTVILLE, NY 10570	13-2985898	501(C)3	58,802.				PROGRAM FULFILMENT
(11) GS OF NORTHEASTERN NEW YORK, INC. 8 MOUNTAIN VIEW AVE ALBANY, NY 12205-2804	14-1438466	501(C)3	7,956.				PROGRAM FULFILMENT
(12) GS OF WESTERN NEW YORK 3332 WALDEN AVE #106 DEPEW, NY 14043-2400	16-0743096	501(C)3	10,479.				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) (2014)

JSA

4E1288 1.000

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(1) GS OF NY PENN PATHWAYS, INC. 8170 THOMPSON RD CICERO, NY 13039	16-0844808	501(C)3	14,125.				PROGRAM FULFILMENT
(2) GS OF THE JERSEY SHORE 242 ADELPHIA RD FARMINGDALE, NJ 07727-3525	21-0731966	501(C)3	27,974.				PROGRAM FULFILMENT
(3) GS HEART OF NEW JERSEY 120 VALLEY RD MONTCLAIR, NJ 07042-2399	22-1638950	501(C)3	13,989.				PROGRAM FULFILMENT
(4) GS OF CENTRAL & SOUTHERN NEW JERSEY 40 BRACE RD CHERRY HILL, NJ 08034-2621	22-1928958	501(C)3	17,465.				PROGRAM FULFILMENT
(5) GS OF EASTERN PENNSYLVANIA 330 MANOR RD MIQUON, PA 19444-1741	23-1352309	501(C)3	135,894.				PROGRAM FULFILMENT
(6) ORANGE COUNTY GS COUNCIL 9500 TOLEDO WAY IRVINE, CA 92618	23-7395094	501(C)3	16,069.				PROGRAM FULFILMENT
(7) GS HEART OF PENNSYLVANIA 350 HALE AVE HARRISBURG, PA 17104-1518	24-0795960	501(C)3	17,009.				PROGRAM FULFILMENT
(8) GS OF WESTERN PENNSYLVANIA 30 ISABELLA ST, PITTSBURGH, PA 15212-5862	25-1126094	501(C)3	55,707.				PROGRAM FULFILMENT
(9) GS OF WESTERN OHIO 4930 CORNELL RD CINCINNATI, OH 45242-1804	31-0679091	501(C)3	53,806.				PROGRAM FULFILMENT
(10) GS OF NORTH EAST OHIO ONE GIRL SCOUT WAY MACEDONIA, OH 44056-2156	34-0726094	501(C)3	77,031.				PROGRAM FULFILMENT
(11) GIRL SCOUTS OF CENTRAL INDIANA, INC. 2611 WATERFRONT PKWY E.DRIVE, IND, IN 46214	35-0876381	501(C)3	17,563.				PROGRAM FULFILMENT
(12) GS OF NORTHERN INDIANA-MICHIANA 10008 DUPONT DRIVE E. FT WAYNE, IN 46825	35-1054339	501(C)3	9,850.				PROGRAM FULFILMENT

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

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(1) GS OF NORTHERN ILLINOIS 12 N. 124 COOMBS RD ELGIN, IL 60124-8000	36-2358083	501(C)3	14,732.				PROGRAM FULFILMENT
(2) GS OF GREATER CHICAGO AND NW. INDIANA 20 SOUTH CLARK ST, #200 CHICAGO, IL 60030	36-3871241	501(C)3	193,709.				PROGRAM FULFILMENT
(3) GS OF CENTRAL ILLINOIS 3020 BAKER DRIVE SPRINGFIELD, IL 62703-5918	37-0681529	501(C)3	13,067.				PROGRAM FULFILMENT
(4) GS OF SOUTHERN ILLINOIS #4 GINGER CREEK PKWY GLEN CARBON, IL 62034	37-0811488	501(C)3	80,007.				PROGRAM FULFILMENT
(5) GS OF SOUTHEASTERN MICHIGAN 3011 W. GRAND BLVD, #500 DETROIT, MI 48202	38-1359207	501(C)3	54,466.				PROGRAM FULFILMENT
(6) GS OF MICHIGAN SHORE TO SHORE 3275 WALKER AVE NW GRAND RAPIDS, MI 49544	38-1366924	501(C)3	5,782.				PROGRAM FULFILMENT
(7) GS HEART OF MICHIGAN 601 W. MAPLE ST KALAMAZOO, MI 49008-1923	38-1581300	501(C)3	32,126.				PROGRAM FULFILMENT
(8) GS OF WISCONSIN-BADGERLAND 2710 SKI LANE MADISON, WI 53713-3267	39-0806331	501(C)3	10,244.				PROGRAM FULFILMENT
(9) GS OF THE WISCONSIN SOUTHEAST PO BOX 14999 MILWAUKEE, WI 53214-1663	39-0892833	501(C)3	27,511.				PROGRAM FULFILMENT
(10) GS OF NORTHWESTERN GREAT LAKES 4693 NORTH LYNNDALE DR. APPLETON, WI 54913	39-1016314	501(C)3	10,324.				PROGRAM FULFILMENT
(11) GS OF MINNESOTA & WISCO LAKES & PINES 400 2ND AVE S. WAITE PARK, MN 56387-1470	41-0877820	501(C)3	6,983.				PROGRAM FULFILMENT
(12) GS OF MINNESOTA AND WISCONSIN RIVER 400 S. ROBERT ST ST. PAUL, MN 55107-2214	41-0877820	501(C)3	20,634.				PROGRAM FULFILMENT

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(1) GS OF GREATER IOWA 10715 HICKMAN RD DES MOINES, IA 50322-3733	42-0698218	501(C)3	32,119.				PROGRAM FULFILMENT
(2) GS OF EASTERN IOWA & WESTERN ILLINOIS 940 GOLDEN VALLEY DR. BETTENDORF, IA 52722	42-1008848	501(C)3	10,660.				PROGRAM FULFILMENT
(3) GS OF EASTERN MISSOURI 2300 BALL DRIVE ST. LOUIS, MO 63146	43-0662471	501(C)3	23,415.				PROGRAM FULFILMENT
(4) GS NE KANSAS & NW MISSOURI 8383 BLUE PARKWAY DR. KC, MO 64133-4750	43-0892926	501(C)3	18,044.				PROGRAM FULFILMENT
(5) GS OF MISSOURI HEARTLAND 210 S. INGRAM MILL RD SPRINGFIELD, MO 65802	44-0594943	501(C)3	9,341.				PROGRAM FULFILMENT
(6) GS DAKOTA HORIZONS 1101 S. MARION RD SIOUX FALLS, SD 57106	46-0250744	501(C)3	22,894.				PROGRAM FULFILMENT
(7) GS-SPIRIT OF NEBRASKA 2121 S. 44TH ST OMAHA, NE 68105-2809	47-0432299	501(C)3	6,845.				PROGRAM FULFILMENT
(8) GS OF KANSAS HEARTLAND 360 LEXINGTON RD WICHITA, KS 67218-1700	48-0556718	501(C)3	8,456.				PROGRAM FULFILMENT
(9) GS OF CHESAPEAKE BAY 501 SOUTH COLLEGE AVE NEWARK, DE 19713-1301	51-0064337	501(C)3	22,873.				PROGRAM FULFILMENT
(10) GIRL SCOUTS OF CENTRAL MARYLAND 4806 SETON DRIVE BALTIMORE, MD 21215-3247	52-0780207	501(C)3	81,566.				PROGRAM FULFILMENT
(11) GIRL SCOUT COMMONWEALTH COUNCIL 4900 AUGUSTA AVE., #200 RICHMOND, VA 23230	54-0534506	501(C)3	8,969.				PROGRAM FULFILMENT
(12) NATIONS CAPITAL GS COUNCIL 4301 CONN. AVE, NW, STE. M-2 WASH, DC 20008	54-0732966	501(C)3	112,262.				PROGRAM FULFILMENT

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(1) VIRGINIA SKYLINE GSC, INC. 3663 PETERS CREEK RD NW ROANOKE, VA 24019	54-0737207	501(C)3	18,006.				PROGRAM FULFILMENT
(2) COLONIAL COAST GS COUNCIL 912 CEDAR RD CHESAPEAKE, VA 23322-7002	54-1158412	501(C)3	9,140.				PROGRAM FULFILMENT
(3) GS HORNETS NEST COUNCIL 7007 IDLEWILD RD CHARLOTTE, NC 28212-5751	56-0563842	501(C)3	11,534.				PROGRAM FULFILMENT
(4) GS CAROLINAS PEAKS TO PIEDMONT, INC. 8818 WEST MARKET ST COLFAX, NC 27235	56-0577629	501(C)3	16,356.				PROGRAM FULFILMENT
(5) GS OF NORTH CAROLINA COASTAL PINES 6901 PINECREST RD RALEIGH, NC 27613-4538	56-0791500	501(C)3	16,961.				PROGRAM FULFILMENT
(6) GS OF S. CAROLINA-MOUNTAINS TO MIDLANDS 5 IND. POINTE, GREENVILLE, SC 29615	57-0314433	501(C)3	22,512.				PROGRAM FULFILMENT
(7) GIRL SCOUTS OF EASTERN SOUTH CAROLINA 7257 CROSS CTY. ROAD N.CHARLESTON, SC 29418	57-0341216	501(C)3	23,459.				PROGRAM FULFILMENT
(8) GS OF GREATER ATLANTA 5601 NORTH ALLEN RD MABLETON, GA 30126	58-0566190	501(C)3	149,737.				PROGRAM FULFILMENT
(9) GS OF HISTORIC GEORGIA 6869 COLUMBUS RD LIZELLA, GA 31052-1710	58-0566191	501(C)3	39,365.				PROGRAM FULFILMENT
(10) GS OF WEST CENTRAL FLORIDA 4610 EISENHOWER BLVD. TAMPA, FL 33634	59-0624454	501(C)3	33,895.				PROGRAM FULFILMENT
(11) GATEWAY GIRL SCOUT COUNCIL 1000 SHEARER ST JACKSONVILLE, FL 32205-6055	59-0637857	501(C)3	10,382.				PROGRAM FULFILMENT
(12) GS OF SOUTHEAST FLORIDA 1224 W. INDIANTOWN RD JUPITER, FL 33458	59-0657327	501(C)3	11,054.				PROGRAM FULFILMENT

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(1) CITRUS GIRL SCOUT COUNCIL 341 N. MILLS AVE ORLANDO, FL 32803-5753	59-0696293	501(C)3	20,703.				PROGRAM FULFILMENT
(2) GIRL SCOUTS OF THE FLORIDA PANHANDLE 1515 ST. ANDREWS BLVD PANAMA CITY, FL 32405	59-0760209	501(C)3	10,382.				PROGRAM FULFILMENT
(3) KENTUCKIANA GSC 2115 LEXINGTON RD LOUISVILLE, KY 40206-2335	61-0444698	501(C)3	32,734.				PROGRAM FULFILMENT
(4) GS OF KENTUCKY'S WILDNESS ROAD 2277 EXECUTIVE DRIVE LEXINGTON, KY 40505	61-0608104	501(C)3	6,447.				PROGRAM FULFILMENT
(5) GS HEART OF THE SOUTH PO BOX 240246 MEMPHIS, TN 38117-4538	62-0502197	501(C)3	18,256.				PROGRAM FULFILMENT
(6) GS OF THE SOUTHERN APPALACHIANS 1567 DOWNTOWN WEST BLVD KNOXVILLE, TN 37919	62-0505206	501(C)3	10,751.				PROGRAM FULFILMENT
(7) GS OF MIDDLE TENNESSEE, INC. 4522 GRANNY WHITE PIKE NASHVILLE, TN 37204	62-0589380	501(C)3	6,250.				PROGRAM FULFILMENT
(8) GS OF NORTH CENTRAL ALABAMA 105 HEATHERBROOKE DR. BIRMINGHAM, AL 35242	63-0288834	501(C)3	10,226.				PROGRAM FULFILMENT
(9) GS OF SOUTHERN ALABAMA 3483 SPRINGHILL AVE MOBILE, AL 36608-1522	63-0421430	501(C)3	5,038.				PROGRAM FULFILMENT
(10) GS DIAMONDS OF ARKANS,OKLAH & TEXAS 11311 ARCADE DR., LITTLE ROCK, AR 72112	71-0309373	501(C)3	9,425.				PROGRAM FULFILMENT
(11) GS OF LOUISIANA EAST PO BOX 10800 NEW ORLEANS, LA 70121-3119	72-0453615	501(C)3	22,501.				PROGRAM FULFILMENT
(12) GS OF LOUISIANA PINES TO THE GULF 1720 KALISTE SALOOM RD, LAFAYETTE. LA 70508	72-0488660	501(C)3	6,646.				PROGRAM FULFILMENT

- Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ _____
- 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) (2014)

JSA

4E1288 1.000

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

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" to 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 non-cash assistance	(h) Purpose of grant or assistance
(1) GS OF EASTERN OKLAHOMA 2432 EAST 51ST ST TULSA, OK 74105-6002	73-0579240	501(C)3	9,988.				PROGRAM FULFILMENT
(2) GS OF WESTERN OKLAHOMA, INC. 6100 N. ROBINSON AVE OK CITY, OK 73118	73-0677849	501(C)3	11,592.				PROGRAM FULFILMENT
(3) GS OF CENTRAL TEXAS 12012 PARK 35 CIRCLE AUSTIN, TX 78753	74-1109644	501(C)3	72,951.				PROGRAM FULFILMENT
(4) GS OF SOUTHWEST TEXAS 811 N. COKER LOOP RD SAN ANTONIO, TX 78216	74-1109759	501(C)3	59,657.				PROGRAM FULFILMENT
(5) GS OF THE DESERT SW-S NEW MEXICO & WT 9700 GIRL SCOUT WAY EL PASO, TX 79924-3828	74-1189693	501(C)3	5,183.				PROGRAM FULFILMENT
(6) GIRL SCOUTS OF SAN JACINTO COUNCIL 3110 SW. FREEWAY HOUSTON, TX 77098	74-6001254	501(C)3	39,250.				PROGRAM FULFILMENT
(7) GS OF THE TEXAS OKLAHOMA PLAINS 4901 BRIARHAVEN RD FT. WORTH, TX 76109	75-0818162	501(C)3	14,224.				PROGRAM FULFILMENT
(8) GIRL SCOUTS OF NORTHEAST TEXAS 6001 SUMMERSIDE DRIVE DALLAS, TX 75252	75-1101571	501(C)3	118,543.				PROGRAM FULFILMENT
(9) GS OF MONTANA AND WYOMING 2303 GRAND AVE BILLINGS, MT 59102	81-6001486	501(C)3	8,299.				PROGRAM FULFILMENT
(10) SILVER SAGE G.S.C. 1410 ETHERIDGE LANE BOISE, ID 83704-8407	82-0259644	501(C)3	5,586.				PROGRAM FULFILMENT
(11) THE TETON SCIENCE SCHOOL 700 COYOTE CANYON RD JACKSON, WY 83001	83-0219163	501(C)3	10,000.				PROGRAM FULFILMENT
(12) GS OF COLORADO 3801 SOUTH FLORIDA AVE, #720 DV, CO 80210	84-0410630	501(C)3	29,605.				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) (2014)

JSA

4E1288 1.000

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
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Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

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" to 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 non-cash assistance	(h) Purpose of grant or assistance
(1) ARIZONA CACTUS PINE GSC 119 EAST CORONADO RD PHOENIX, AZ 85004-1512	86-0133397	501(C)3	16,288.				PROGRAM FULFILMENT
(2) GIRL SCOUTS OF UTAH 445 E. 4500 S. , #125 MURRAY, UT 84107	87-0221612	501(C)3	19,821.				PROGRAM FULFILMENT
(3) GIRL SCOUTS OF SOUTHERN NEVADA, INC 2941 HARRIS AVE LAS VEGAS, NV 89101-2309	88-0060273	501(C)3	56,190.				PROGRAM FULFILMENT
(4) GS OF WESTERN WASHINGTON PO BOX 900961 SEATTLE, WA 98109-4229	91-6060940	501(C)3	47,170.				PROGRAM FULFILMENT
(5) GS OF OREGON & SW WASHINGTON INC. 9620 SW BARBUR BLVD PORTLAND, OR 97219	93-0399051	501(C)3	13,533.				PROGRAM FULFILMENT
(6) GS OF NORTHERN CALIFORNIA 1650 HARBOR BAY PKWY. ALAMEDA, CA 94502	94-1551410	501(C)3	127,543.				PROGRAM FULFILMENT
(7) GS OF CALIFORNIA'S CENTRAL COAST 1500 PALMA DRIVE, #110 VENTURA, CA 93003	94-1567162	501(C)3	11,477.				PROGRAM FULFILMENT
(8) GS HEART OF CENTRAL CALIFORNIA 6601 ELVAS AVE SACRAMENTO, CA 95819-4339	94-1582429	501(C)3	10,104.				PROGRAM FULFILMENT
(9) GS OF GREATER LOS ANGELES 801 S. GRAND AVE, #300 LA, CA 90017	95-1644033	501(C)3	271,744.				PROGRAM FULFILMENT
(10) GS SAN DIEGO-IMPERIAL COUNCIL 1231 UPAS ST SAN DIEGO, CA 92103-5199	95-1644585	501(C)3	16,299.				PROGRAM FULFILMENT
(11) GS OF CENTRAL CALIFORNIA SOUTH 1377 WEST SHAW AVE FRESNO, CA 93711-3604	95-1766795	501(C)3	16,472.				PROGRAM FULFILMENT
(12) GIRL SCOUTS SAN GORGONIO COUNCIL 1751 PLUM LANE REDLANDS, CA 92374-4533	95-1967727	501(C)3	49,046.				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) (2014)

JSA

4E1288 1.000

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

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" to 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 non-cash assistance	(h) Purpose of grant or assistance
(1) GIRL SCOUTS OF SOUTHERN ARIZONA 4300 E. BROADWAY BLVD TUCSON, AZ 85711	86-0008917	501(C)3	6,231.				PROGRAM FULFILMENT
(2) GS OF NORTHERN NEW JERSEY 95 NEWARK POMPTON TPKE. RIVERDALE, NJ 07457	22-1512252	501(C)3	22,521.				PROGRAM FULFILMENT
(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 98.

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) (2014)

JSA

Part III Grants and Other Assistance to Individuals in the United States. 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 2015 ALCOA 'CHUCK MCLANE SCHOLARSHIP' RECIPIENT	4.	20,000.			
2 2015 KAPPA DELTA FOUNDATION SCHOLARSHIP RECIPIENT	10.	100,000.			
3					
4					
5					
6					
7					

Part IV Supplemental Information. Complete this part to 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

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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

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 in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input 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 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 (e.g., 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 in line 1a?

3 Indicate which, if any, of the following the filing 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 in 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 in 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" to line 5a or 5b, describe in Part III.

6 For persons listed in 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" to line 6a or 6b, describe in Part III.

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

8 Were any amounts reported in 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" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
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) 2014

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

Note. The sum of columns (B)(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 in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	ANNA MARIA CHAVEZ CHIEF EXECUTIVE OFFICER	(i) 432,621.	109,553.	715.	54,239.	35,481.	632,609.	0
	(ii)	0	0	0	0	0	0	0
2	ANGELA OLDEN CHIEF FINANCIAL OFFICER	(i) 299,401.	0	733.	14,300.	35,885.	350,319.	0
	(ii)	0	0	0	0	0	0	0
3	FLORENCE CORSELLO (THRU FORMER CFO	(i) 0	0	219,165.	0	5,308.	224,473.	0
	(ii)	0	0	0	0	0	0	0
4	JENNIFER ROCHON GENERAL COUNSEL	(i) 243,378.	30,250.	17,718.	12,066.	36,396.	339,808.	0
	(ii)	0	0	0	0	0	0	0
5	MARGARET MILLER (THRU 12 CHIEF INFORMATION OFFICER	(i) 257,444.	0	19,336.	12,942.	10,937.	300,659.	0
	(ii)	0	0	0	0	0	0	0
6	DEBORAH TAFT (THRU 10/31 CHIEF DEVELOPMENT OFFICER	(i) 217,671.	0	44,446.	12,045.	18,680.	292,842.	0
	(ii)	0	0	0	0	0	0	0
7	BARRY HOROWITZ VP & GM - GS MERCHANDISE GSUSA	(i) 259,949.	26,826.	3,336.	14,601.	23,996.	328,708.	0
	(ii)	0	0	0	0	0	0	0
8	NHADINE LEUNG CHIEF GOVERNANCE OFFICER	(i) 224,794.	0	314.	16,382.	1,972.	243,462.	0
	(ii)	0	0	0	0	0	0	0
9	DANIEL BOOCKVAR (THRU 08 CHIEF CUSTOMER OFFICER	(i) 196,749.	0	222.	11,220.	23,137.	231,328.	0
	(ii)	0	0	0	0	0	0	0
10	LISA MARGOSIAN CHIEF COUNCIL RELATIONSHIP OFF	(i) 227,739.	10,167.	0	11,761.	1,300.	250,967.	0
	(ii)	0	0	0	0	0	0	0
11	KRISTA KOKJOHN-POEHLER CHIEF GIRL EXPERIENCE OFFICER	(i) 223,035.	0	766.	14,160.	34,613.	272,574.	0
	(ii)	0	0	0	0	0	0	0
12	SARAH GORMLEY CHIEF MARKETING OFFICER	(i) 233,286.	10,000.	4.	11,690.	12,331.	267,311.	0
	(ii)	0	0	0	0	0	0	0
13	KERRY CONNOLLY COUNCIL LEADERSHIP STRATEGIST	(i) 213,314.	0	1,946.	9,406.	13,156.	237,822.	0
	(ii)	0	0	0	0	0	0	0
14	CLAIRE FERRARIN TALENT MANAGEMENT & LEARNING A	(i) 217,736.	0	2,124.	14,485.	26,189.	260,534.	0
	(ii)	0	0	0	0	0	0	0
15		(i)						
	(ii)							
16		(i)						
	(ii)							

Part III Supplemental Information

Complete this part to 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 4A

COMPENSATION INFORMATION

SEVERANCE: FLORENCE CORSELLO-\$219,152

FORM 990, SCHEDULE J, PART I, LINE 5(A), 6(A) AND LINE 7

COMPENSATION INFORMATION(2)

EXECUTIVE TEAM INCENTIVE COMPENSATION IS BASED ON OPERATIONAL AND PROGRAM PERFORMANCE TARGETS, WHICH INCLUDE REVENUE AND OTHER METRICS AS APPROVED BY THE EXECUTIVE DEVELOPMENT AND COMPENSATION COMMITTEE (EDCC).

FORM 990, SCHEDULE J, PART I, LINE 4B AND 7

THE CEO IS ELIGIBLE FOR A RETENTION BONUS THAT IS 8% OF BASE SALARY AS A LONG-TERM RETENTION PAYMENT PLAN TO VEST 33.3% EVERY 3 YEARS OVER A NINE-YEAR PERIOD. THIS WAS DECIDED BY THE EXECUTIVE DEVELOPMENT AND COMPENSATION COMMITTEE AS ITS SOLE DISCRETION. IF NEEDED, THIS PLAN WILL

Part III Supplemental Information

Complete this part to 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.

BE EXTENDED BEYOND THIS PERIOD WITH THE SAME VESTING SCHEDULE.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2014

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

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				
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 ▶ (<u>ATCH 1</u>)		2.	578,178.	
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 is not 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 non-standard 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 did not 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) (2014)

JSA

4E1298 1.000

Part II **Supplemental Information.** Complete this part to 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.

ATTACHMENT 1

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

<u>DESCRIPTION</u>	<u>(A) CHECK</u>	<u>(B) NUMBER OF CONTRIBUTIONS</u>	<u>(C) REVENUES REPORTED</u>	<u>(D) METHOD OF DETERMINING</u>
DELL COMPUTER HARDWARE	X	1.	513,333.	FAIR MARKET VALUE
CONVENTION PROMO ITEMS	X	1.	64,845.	FAIR MARKET VALUE
TOTALS		<u>2.</u>	<u>578,178.</u>	

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

Employer identification number

13-1624016

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 III, LINE 4D

OTHER PROGRAM SERVICES

GIRL SCOUT MERCHANDISE: PROVIDES GIRL SCOUTS BRANDED RETAIL PRODUCTS, APPAREL AND PROGRAM MATERIALS TO MEMBERS PARTICIPATING IN GIRL SCOUT PROGRAMS AND PROMOTES THE GIRL SCOUT BRAND AND MISSION.

INTERNATIONAL SERVICES: PROVIDES OPPORTUNITIES FOR GIRLS AND ADULTS FROM ACROSS BORDERS AND DIVERSE CULTURES TO LIVE, PLAN, AND WORK TOGETHER FOR A PERIOD OF TIME.

FORM 990, PART VI, SECTION A, LINE 4

CHANGES IN CONSTITUTION AND BYLAWS

IN OCTOBER 2014 GSUSA (I) AMENDED ITS CONSTITUTION TO PROVIDE FOR FLEXIBILITY IN MEMBERSHIP CATEGORIES BEYOND ANNUAL AND LIFETIME MEMBERSHIPS, (II) AMENDED ITS CONSTITUTION TO PROVIDE THAT PAST

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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PRESIDENTS ARE NO LONGER EX OFFICIO MEMBERS OF THE NATIONAL BOARD, AND (III) AMENDED ITS CONSTITUTION AND BYLAWS TO PROVIDE THAT THE CFO REPORTS TO THE CEO RATHER THAN DIRECTLY TO THE BOARD OF DIRECTORS. IN JANUARY 2015 GSUSA AMENDED ITS BYLAWS TO CLARIFY THE RESPONSIBILITIES THAT FALL OUTSIDE THE EXECUTIVE COMMITTEE'S AUTHORITY AND THAT STANDING COMMITTEES OF THE BOARD ARE TO BE COMPRISED ENTIRELY OF BOARD MEMBERS APPROVED BY MAJORITY VOTE OF ALL BOARD MEMBERS IN OFFICE.

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

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 TRIENNIALLY 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

POLICIES (1)

GIRL SCOUTS OF THE UNITED STATES OF AMERICA (GSUSA) PERFORMS A COMPLETE REVIEW PROCESS OF ITS FORM 990 AND RELATED SCHEDULES. THE DOCUMENTS AND SUPPORTING SCHEDULES ARE PREPARED INTERNALLY BY MANAGEMENT AND THEN

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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REVIEWED BY OUR INDEPENDENT AUDITORS. OUR FORM 990 IS PROVIDED VIA THE BOARD INTRANET TO OUR BOARD MEMBERS AND IS REVIEWED BY THE AUDIT COMMITTEE OF THE NATIONAL BOARD.

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

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 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.

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

POLICIES (3)

THE ORGANIZATION FOLLOWS A CONSISTENT PROCESS TO DETERMINE SALARIES OF

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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THE CEO AND TOP MANAGEMENT WHICH INCLUDES: 1. USING 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 DETERMINES ANY 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.

FORM 990, PART VI, SECTION C, LINE 19
DISCLOSURES

THE ORGANIZATION PROVIDES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS UPON REQUEST. ADDITIONALLY, OUR AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE TO THE GENERAL PUBLIC VIA OUR WEBSITE.

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS OR FUND BALANCE

PENSION LOSSES -\$8,416,954, CHANGE IN VALUE OF DEFERRED GIFTS \$-49,781,
CHANGE IN VALUE OF CHARITABLE GIFT ANNUITY \$-9,318, FOREIGN CURRENCY
FORWARD \$26,152 TOTAL -\$8,449,901

Name of the organization

Employer identification number

GIRL SCOUTS OF THE UNITED STATES OF AMERICA

13-1624016

ATTACHMENT 1

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

GIRL SCOUTING BUILDS GIRLS OF COURAGE, CONFIDENCE, AND CHARACTER, WHO MAKE THE WORLD A BETTER PLACE. THE GIRL SCOUT PROGRAM IS A NONFORMAL, EXPERIENTIAL, AND COOPERATIVE EDUCATION PROGRAM THAT PROMOTES GIRLS' PERSONAL GROWTH AND LEADERSHIP DEVELOPMENT. PARTNERING WITH CARING ADULTS, GIRLS DESIGN FUN AND CHALLENGING ACTIVITIES THAT EMPOWER THEM AND RAISE THEIR VOICES WITHIN A LOCAL, NATIONAL, AND GLOBAL SISTERHOOD.

ATTACHMENT 2

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

<u>DESCRIPTION</u>	<u>GRANTS</u>	<u>EXPENSES</u>	<u>REVENUE</u>
GIRL SCOUT MERCHANDISE		12,889,753.	27,223,968.
INTERNATIONAL SERVICES	7,200.	2,172,086.	1,031,986.
TOTALS	<u>7,200.</u>	<u>15,061,839.</u>	<u>28,255,954.</u>

ATTACHMENT 3

FORM 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,

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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ATTACHMENT 4

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
ACCENTURE 800 N. GELEBE ROAD ARLINGTON, VA 22203	IT DEVELOPMENT	3,615,326.
ROUNDCORNER 2075 ALLSTON WAY SUITE 202 BERKELY, CA 94704	IT DEVELOPMENT	3,245,515.
LARRY WAYNE ASSOCIATES, INC. 25 WEST 43RD STREET SUITE 1403 NEW YORK, NY 10036	STAFFING	2,031,480.
NORTHPOINT DIGITAL LLC 1540 BROADWAY NEW YORK, NY 10036	IT DEVELOPMENT	1,872,262.
SALESFORCE P.O. BOX 39000 SAN FRANCISCO, CA 94139-0001	TECHNICAL SERVICES	1,135,795.

ATTACHMENT 5

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	5,334,297.	5,334,297.		
MARKETING AND COMMUNICATION	1,003,562.	1,003,562.		
LEARNING CONSULTANTS	690,616.	690,616.		
RESEARCH	586,468.	586,468.		
CUSTOMER ENGAGEMENT INITIATIVE	479,479.	479,479.		
MEETING PRODUCTION & SPEAKERS	289,502.	289,502.		
DIGITAL COOKIE	283,341.	283,341.		
STRATEGY CONSULTANTS	272,468.	272,468.		
OTHER	3,729,264.	2,930,956.	747,137.	51,171.

Name of the organization GIRL SCOUTS OF THE UNITED STATES OF AMERICA	Employer identification number 13-1624016
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ATTACHMENT 5 (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>12,668,997.</u>	<u>11,870,689.</u>	<u>747,137.</u>	<u>51,171.</u>

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

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		11,906,259.	GSUSA
(2)					
(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)	7	GSUSA	X	
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2014

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	1,931,664.	27,286,922.	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.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to related organization(s)	1b	X
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d	X
e Loans or loan guarantees by related organization(s)	1e	X
f Dividends from related organization(s)	1f	
g Sale of assets to related organization(s)	1g	X
h Purchase of assets from related organization(s)	1h	X
i Exchange of assets with related organization(s)	1i	X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	X
p Reimbursement paid to related organization(s) for expenses	1p	X
q Reimbursement paid by related organization(s) for expenses	1q	X
r Other transfer of cash or property to related organization(s)	1r	X
s Other transfer of cash or property from related organization(s)	1s	X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) WORLD FOUNDATION FOR GIRL GUIDES/GIRL SCOUTS	Q	59,234.	COST
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(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)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).
