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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 black lung benefit trust or private foundation)

2008

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

Open to Public Inspection

<u>A</u> I	or th	e 2008 calendar year, or tax year beginning $OCT~1$, 2008 and	ending S	EP 30, 2009						
В	Check if applicab	Please use IRS C Name of organization		D Employer identific	cation number					
Г	Addre	ess label or GIRL SCOUTS OF NEW MEXICO TRAILS, I	NC.							
	Name chang	type Doing Business As		85-60	011246					
L	Initial return	Number and street (or P.U. box it mail is not delivered to street address)	Room/suite	·						
	Termi ation	"" Instruc- 4000 JEFFERSON PLAZA, NE		505-343-1040						
	Amen	City or town, state or country, and ZIP + 4		G Gross receipts \$ 3,606,948.						
	Appli	ALBOQUERQUE, NM 8/103-3404		H(a) Is this a group return						
	pendi	F Name and address of principal officer: PEGGY SANCHEZ MILL	S	for affiliates?	Yes X No					
		SAME AS C ABOVE		H(b) Are all affiliates incl	luded? Yes No					
1	Tax-ex	tempt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527		If "No," attach a	list. (see instructions)					
		ite: ▶ WWW.NMGIRLSCOUTS.ORG		H(c) Group exemption	n number 🕨					
K	Type of	forganization: X Corporation Trust Association Other	L Year	of formation: 1958 M	State of legal domicile: NM					
P	art I	Summary								
a	1	Bnefly describe the organization's mission or most significant activities: DELT	VERING	THE GIRL SO	COUT					
Governance		PROGRAM								
r	2	Check this box In the organization discontinued its operations or dispositions.	sed of more	e than 25% of its assets	S.					
o Ve	3	Number of voting members of the governing body (Part VI, line 1a)		3	17					
	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	17					
80	5	Total number of employees (Part V, line 2a)		5	99					
įį	6	Total number of volunteers (estimate if necessary)		6	2447					
Activities &	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	•	7a	0.					
⋖	1	Net unrelated business taxable income from Form 990-T, line 34	•	7b	0.					
				Prior Year	Current Year					
Φ.	8	Contributions and grants (Part VIII, line 1h)		187,492.	154,081.					
Ž	9	Program service revenue (Part VIII, line 2g)		340,929.	212,162.					
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		41,444.	<24,526.>					
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,679,642.	1,757,599.					
	12	Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,249,507.	2,099,316.					
_	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,042.	26,563.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)		-, -, -						
s	l	Salaries, other compensation amprove value (Part X, column (A), lines 5-10)		1,277,178.	1,245,900.					
Expenses	16 a	Professional fundraising fees (Part IX, column (A), line 11e)	-							
per	.ca	Total fundraising expenses (Part IX, column (D), line 25	12.							
Щ	17	Other expenses (Part & columb (A), Aines 4 va 11d, 11 (24f)		1,418,321.	1,111,805.					
		Total expenses Add ines 13-17 (must equal Part IX, @ojumn (A), line 25)	•	2,696,541.	2,384,268.					
	19	Revenue less expenses. Subtract fine & from line 12	•	<447,034.	> <284,952.>					
100	3	OODEN, OF		Beginning of Year	End of Year					
Net Assets or	20	Total assets (Part X, line 16)		4,211,582.	4,126,378.					
Ass	21	Total liabilities (Part X, line 26)		405,864.	526,542.					
E SE	22	Net assets or fund balances. Subtract line 21 from line 20	. –	3,805,718.	3,599,836.					
	art II			<u> </u>						
_		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules ar	nd statements,	and to the best of my knowledg	ge and belief, it is true, correct,					
		and complete Declaration of preparer (other than officer) is based on all information of which preparer has a	any knowledge							
Sig	n			1)/19/1	(A)					
He		Signature of officer \(\frac{\lambda}{\rightarrow}\)		Date						
110		PEGGY SANCHEZ MILLS, CEO		•						
		Type or print name and type								
_		Preparer's Date			ar's identifying number					
Pai	d	signature Jaunders 7/16	10 sel	lf- oployed ▶	structions)					
	parer's	Firm's name (or MACK/F. REID & COMPANY P.A.	- 1011	EIN ►						
Use	Only	self-employed), \$4001 INDIAN SCHOOL RD NE SUITE	110							
		address, and ZIP+4 ALBUQUERQUE, NM 87110		Phone no. ► (505) 268-4335					
Ma	v the !	IRS discuss this return with the preparer shown above? (see instructions)			X Yes No					
	,	nie die en de la company de la								

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	III Statement of Program Service Accomplishments (see instructions)	<u>e Z</u>
1	nefly describe the organization's mission: O PROVIDE PROGRAMS AND ACTIVITIES IN ITS JURISDICTION BASED ON THE PROGRAM GOALS OF DEVELOPING COURAGE, CONFIDENCE, AND CHARACTER IN GIRLS.	
2	id the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
	"Yes", describe these new services on Schedule O.	
3	id the organization cease conducting, or make significant changes in how it conducts, any program services? "Yes", describe these changes on Schedule O	No
4	escribe the exempt purpose achievements for each of the organization's three largest program services by expenses ection 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and llocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	Code:)(Expenses \$ 1,797,123. including grants of \$)(Revenue \$ 2HE COUNCIL SERVED APPROXIMATELY 5,167 GIRLS AND 2471 ADULTS LIVING IN THE COUNCIL'S REGION (DETERMINED BY THE GIRL SCOUTS OF THE USA) BY PROVIDING PROGRAMS AND ACTIVITIES BASED ON THREE PROGRAM GOALS OF DEVELOPING COURAGE, CONFIDENCE, AND CHARACTER. 800 GIRLS PARTICIPATED IN CAMPING PROGRAMS, 770 IN THE ANNUAL ROAR AND SNORE SLEEP-OVER EVENT AT THE ZOO IN ALBUQUERQUE. THE COUNCIL ALSO SUPPORTED 3 FIRST LEGO LEAGUE TEAMS AS GIRL SCOUTS DEVELOPED COMPUTER AND ENGINEERING SKILLS.	
4b	Code) (Expenses \$ including grants of \$) (Revenue \$)
4c	Code) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services. (Describe in Schedule O.)	
4e	Expenses \$ including grants of \$) (Revenue \$) fotal program service expenses \$ 1,797,123. (Must equal Part IX, Line 25, column (B).)	

	1. 11		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		3.5	
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		7.7
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	_		
_	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice	_		3.5
_	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	_6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_	i	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		.,
	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	<u> </u>	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	_16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		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? If "Yes," answer questions 24b-24d and complete Schedule K			l
	If "No", go to question 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds? .	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			<u>_</u> _
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	рпот year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			<u>_</u> _
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	ļ	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
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			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			Ì
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

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			V	[N
4	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	-	Yes	No
ıa	13			1
_	U.S. Information Returns. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b. 0			1
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
С	(gambling) winnings to prize winners?	1c		X
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	IC.		
Za	filed for the calendar year ending with or within the year covered by this return 2a 99			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	1
U	Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	20	- 41	
22	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
74	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
h	If "Yes," enter the name of the foreign country. ▶			
_	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
_	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal]	
	benefit contract?	<u>7e</u>	<u> </u>	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<u>7f</u>		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>	<u> </u>	X
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	<u>7h</u>	<u> </u>	X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have	_		
_	excess business holdings at any time during the year?	8	<u> </u>	-
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	0-		
a	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?	9a		—
b 10	Section 501(c)(7) organizations. Enter N/A	<u>9b</u>	<u> </u>	-
10 a	Initiation fees and capital contributions included on Part VIII, line 12			1
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			1
11	Section 501(c)(12) organizations. Enter: N/A			1
''a	Gross income from members or shareholders			1
	Gross income from other sources (Do not net amounts due or paid to other sources against			1
_	amounts due or received from them.)			1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u>L</u> .
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			
			ÃOO.	(2008)

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Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sac	tion A. Governing Body and Management			
Sec	tion A. Governing body and Management		V	NI.
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,		Yes	No
_	processes, or changes in Schedule O See instructions. Enter the number of voting members of the governing body 13			
b	Enter the Hamber of Young Methods and the personal			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			7.7
	officer, director, trustee, or key employee?	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	_3_		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	_6_		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	_X_	
b	Each committee with authority to act on behalf of the governing body?	8b	_X_	
9a	Does the organization have local chapters, branches, or affiliates?	9a_		_X_
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	_X_	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		_X_
<u>Sec</u>	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give use			
	to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision.			
а	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization?	15b	X	
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u> </u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	ın joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶NM			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ncial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion. 🕨		
	FINANCE DIRECTOR - (505)343-1040			
	4000 JEFFERSON PLAZA, NE, ALBUQUERQUE, NM 87109-3404			

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List 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

(A) Name and Title	(B)			(0 Pos	C)			(D) Reportable	(E) Reportable	(F)
Name and Title	Average hours	(c				app	lv)	compensation	compensation	Estimated amount of
	per week	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	Ĺ	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
MARIAN WRAGE										
MEMBER AT LARGE	1.00	X	ļ		<u> </u>	ļ		0.	0.	0.
MARY HOMAN		l			1					
CHAIR	2.00	X	ļ		<u> </u>	ļ.,		0.	0.	0.
MARION SCHANTZ					ŀ				_	_
VICE CHAIR	1.00	X		<u> </u>	_			0.	0.	0.
JULIA MACCINI										
SECRETARY	1.00	X	ļ	_	-			0.	0.	0.
MARTHA BENN		l								
MEMBER AT LARGE	1.00	X	-	-	┞-	-		0.	0.	0.
MARTI FOURNIER-REVO		l								
MEMBER AT LARGE	1.00	X	-	<u> </u>	⊬	┼	_	0.	0.	0.
DEIDRE HIRSCHFELD	1 1 00	١.,								
MEMBER AT LARGE	1.00	X		╁	⊢	╁		0.	0.	0.
MARY MAH MEMBER AT LARGE	1.00	x					l	0.	0.	_
PAM RAY	1.00	┢	├	┢	\vdash	╫		0.	U .	0.
MEMBER AT LARGE	1.00	x					1	0.	0.	0.
MARGARET WOOD	1.00	<u> </u>	<u> </u>	<u> </u>	 -	╁	┢	<u> </u>		<u></u>
MEMBER AT LARGE	1.00	x					l	0.	0.	0.
BECKY TEAGUE	100	1			<u> </u>	╁┈	1			•
TREASURER	1.00	x						0.	0.	0.
DOUGLAS SIECK				1	1	†	İΤ			
MEMBER AT LARGE	1.00	x						0.	0.	0.
JAMES HARTOGENSIS										
MEMBER AT LARGE	1.00	x						0.	0.	0.
JANIE ROWE										
MEMBER AT LARGE	1.00	X						0.		0.
MAGGIE UNZE				İ						
MEMBER AT LARGE	1.00	X						0.	0.	0.
TAMMY ROOF		1								
MEMBER AT LARGE	1.00	X	_	↓_	1	↓_	_	0.	0.	0.
TOM DALY								_	_	_
MEMBER AT LARGE	1.00	X		<u>L.</u>	<u> </u>	\perp	<u> </u>	0.	0.	0 . Form 990 (2008)

Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, a	nd l	High	est	Compensated Employ	ees (continued)				
(A)	(B)	(C)						(D)	(E)	(E)			
Name and title	Average			Pos				Reportable	Reportable		-	tımate	_
	hours per	(C	heck	all	that	app	ly)	compensation from	compensation from related	1		nount o other	of
	week	rector						the	organizations	.		pensa	tion
		individual trustee or director	ee			sated		organization	(W-2/1099-MIS			om the	
		ruste	l trust		8	iid ii		(W-2/1099-MISC)		}	_	anızatı	
		dual t	nstitutional trustee	_	Key employee	st co				- 1		relate	
		Molvi	Instit	Officer	Key e	Highest compensated employee	Form				orga	ınızatıd	ons
YVONNE A. BRYAN					┢	 	_			\dashv			
FINANCE DIRECTOR	40.00	ı	ļ	X				50,571.		0.			0.
MELISSA R. BRUNEY						†		3073.23					
CHIEF OPERATING OFFICER	40.00			Х				59,300.		0.			0.
KAREN OLSON													
CHIEF EXECUTIVE OFFICER	40.00			Х		X		85,928.		0.			0.
SHIRLEY VALENTINE-ATTOH	-												
INTERIM CEO	40.00			X	_			0.		0.			0.
JENA SCHUTZ					ļ								
FINANCE DIRECTOR	40.00			X		<u> </u>		0.		0.			0.
AMY C'DE BACA													
DIRECTOR OF FUND DEVELOP	40.00		<u> </u>	X	<u> </u>	<u> </u>		43,270.		0.			0.
ANNETTE DURAN				i						_			_
DIRECTOR OF HUMAN RESOUR	40.00		<u> </u>	X	├	├		40,490.		0.			0.
PHYLLIS TROUARD	40.00			١,,				F1 1F0					^
DIRECTOR OF CAPITAL RESO	40.00	_	\vdash	X	┢	╁╌		51,159.		0.			0.
			\vdash			\vdash	-			\dashv			
1b Total				L		┢	L	330,718.		0.			0.
2 Total number of individuals (including those	ın 1a) who re	ceiv	ed n	nore	tha	an \$1	00,						
compensation from the organization	•							<u> </u>		_			0
												Yes	No
3 Did the organization list any former officer,	director or tru	stee	, ke	y en	nplo	yee,	or I	highest compensated er	nployee on		.	1	
line 1a? If "Yes," complete Schedule J for s	uch individual			-							3		X
4 For any individual listed on line 1a, is the su	•		•					*	the organization		.		
and related organizations greater than \$150									•	}	4		X
5 Did any person listed on line 1a receive or a	•			rom	an	y unr	elat	ted organization for serv	ices rendered to		_	ĺ	37
the organization? If "Yes," complete Schedu Section B. Independent Contractors	ule J for such	pers	on				_	-	-		5		X
Complete this table for your five highest con-	mnensated in	dend		nt c	ont	racto	ors i	that received more than	\$100 000 of com	nene			
the organization. NONE	inpensated int	лор.	Siluc		,0111	iacie	,,,,,,	mat rootived more than	Ψ100,000 01 com	<i>7</i> 01131	20011	0	
(A)					-			(B)			(C	;)	
Name and business	address							Description of s	ervices	С	omper		n
							_						
													
							- 1						
				_			_						
				1			\dashv						
								_					
2 Total number of independent contractors (ii	ncluding those	n e	1) wi	no r	ece	ıved	moi	re than \$100,000 in com	pensation				

from the organization

Part VIII	Statement of Rever	nue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
g 1 a	Federated campaigns	1a				· ·	
and other similar amounts 1 a b c d e f o r	Membership dues	1b					
E c	Fundraising events	. 1c					
<u>k</u> d	Related organizations	1d					
E e	Government grants (contribut	tions) 1e	<u>20,619.</u>				
f f	All other contributions, gifts, gran						
뒴	similar amounts not included abo	ve 1f 1:	33,462.				
열 9	Noncash contributions included in lines	s 1a-1f \$	2,749.	154 001	1		
n h	Total. Add lines 1a-1f	· .	_	<u> 154,081.</u>			<u> </u>
	CAMPING FEES &	EVENTS	Business Code 900099	212,162.	212,162.		
e de							
o d		1			 		-
e e	·	_ }		·			
f	All other program service reve	enue					
g	Total. Add lines 2a-2f		>	212,162.			
3	Investment income (including	dividends, interes	st, and				
	other similar amounts)		. ▶	22,996.			22,996
4	Income from investment of ta	x-exempt bond pr	roceeds 🕨				
5	Royalties .		.				
		(i) Real	(ıı) Personal				
6 a	Gross Rents	51,972.					
b	Less: rental expenses						
С	Rental income or (loss)	51,972.		E4 0E0			F4 050
d	Net rental income or (loss)		/D DU	51,972.			51,972
7 a	Gross amount from sales of	(i) Securities 233,410.	(ii) Other				
	assets other than inventory Less: cost or other basis	233,410.					
6	and sales expenses	280,932.					
	Gain or (loss)	<47,522.	<u> </u>				ł
1	Net gain or (loss)	(17/5220)	.	<47.522.	> <47,522.	>	
1	Gross income from fundraisin	a events (not		12,,022	127,70220		
	including \$	of					
8	contributions reported on line	2 1c). See					
	Part IV, line 18	a					
a a a a a a a a a a a a a a a a a a a	Less: direct expenses	ь					1
໌ ເ	Net income or (loss) from fund	draising events	>				
9 a	Gross income from gaming ac	ctivities See					
	Part IV, line 19	a					
1	Less: direct expenses	ь[
	Net income or (loss) from gan					· -	
10 a	Gross sales of inventory, less		2026655				
	and allowances		<u> 2926655.</u>				
	Less: cost of goods sold	_	1226700.	1 600 055	1 600 055		
- -	Net income or (loss) from sale Miscellaneous Revenu			<u> </u>	1,699,955.		†
14.5	FORFEITED DEPOS		Business Code 900099	5,000.			5,000
	ANNUAL MEETING	/	900099	672.			672
C	THIS THE THE		200033	012.	-		0,2
4	All other revenue						
6	Total. Add lines 11a-11d		•	5,672.			
1	Total Revenue Add lines th, 2g, 3,			2 000 216	1,864,595.	0	80,640

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp	lete column (A) but are	not required to comple	ete columns (B), (C), and	(D).
_	not include amounts reported on lines 6b, 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 governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	26,563.	26,563.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	339,173.	154,058.	178,698.	6,417.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	723,443.	561,831.	103,714.	57,898.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	11,860.	10,672.	146.	1,042.
9	Other employee benefits	96,558.	87,067.	4,185.	5,306.
10	Payroll taxes	74,866.	55,174.	14,174.	5,518.
11	Fees for services (non-employees):				
а	Management				
b	Legal	6,620.	964.	5,656.	
С	Accounting	22,306.		22,306.	
d	Lobbying			•	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	8,180.		8,180.	
g		19,680.	14,553.	3,977.	1,150.
12	Advertising and promotion				
13	Office expenses				-
14	Information technology				
15	Royalties				
16	Occupancy		·		
17	Travel	88,192.	54,883.	32,406.	903.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	12,490.	2,873.	9,506.	111.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	121,367.	101,098.	13,472.	6,797.
23	Insurance	73,959.	55,509.	14,755.	3,695.
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	DDOGDAM GUDDING	211,116.	202,625.	7,071.	1,420.
b	COOKIE SALES PROMOTIONS	104,359.	102,979.	1,380.	1,420.
	EQUIPMENT PURCHASE, REN	80,315.	67,370.	9,514.	3,431.
c d	UTILITIES LA TENCHASE, REN	68,673.	63,502.	3,218.	1,953.
e	BAD DEBT	67,453.	67,453.	3,210.	1,,,,,,,,
f	All other expenses	227,095.	167,949.	50,275.	8,871.
25	Total functional expenses. Add lines 1 through 24f	2,384,268.	1,797,123.	482,633.	104,512.
<u>25</u> 26	Joint Costs. Check here J if following	4,304,400.		_=04,033.	107,314.
20	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	concational campaign and futful along solicitation				

Form 990 (2008) GIRL SCOUTS OF NEW MEXICO TRAILS, INC. 85-6011246 Page 11 Part X Balance Sheet (A) (B) Beginning of year End of year 111.174382.825. 1 Cash - non-interest-bearing 210,206. 2 236. 2 Savings and temporary cash investments 51,529. <u> 29,850.</u> Pledges and grants receivable, net 3 3 5,125 3,962. Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 7 108,603 70,855. 8 Inventories for sale or use 60,491. 29,476. Prepaid expenses and deferred charges 5,441,241 10a Land, buildings, and equipment cost basis 10a b Less: accumulated depreciation Complete 2,779,394 2,681,035. 2,760,206 Part VI of Schedule D 10b 10c 874,260. 11 916,849. Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 14 10,800 11,290. 15 Other assets See Part IV, line 11 15 4,211,582. 16 4,126,378. 16 Total assets. Add lines 1 through 15 (must equal line 34) 214,621 53,751. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 9,499 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow account liability Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 357,987. 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable 24 Other liabilities. Complete Part X of Schedule D 181,744 114,804. 25 25 405,864. 526,542. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here

X and complete lines 27 through 29, and lines 33 and 34. **Net Assets or Fund Balances** 3,681,053. 3,462,893. 27 27 Unrestricted net assets 124,665. 136,943. 28 28 Temporarily restricted net assets Permanently restricted net assets 29 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 3,805,718 3,599,836. 33 Total net assets or fund balances 4,211,582. 4,126,378. Total liabilities and net assets/fund balances **Financial Statements and Reporting**

			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	<u> </u>
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			1
	review, or compilation of its financial statements and selection of an independent accountant?	2c	X	L
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			1
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits?	3b		1

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

Inspection

Name of the organization

Employer identification number

		GIRL SC	OUTS OF NEW	MEXIC	O TRA	ILS,	INC.		85	<u>5-6011</u>	246	
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this part	t) (see ins	tructions)				
		•	because it is (Please ch	-	-		/L\/4\/A\/:)					_
			s, or association of church			ction 1/U	(ІҚАҚГ)(О)).				
2	☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.)											
3										ha haandal	'a nam	_
4 🗀	city, and stat		operated in conjunction	with a nos	pitai desci	nbed in Se	ction 170	ііқақі қау	ı). Enter ti	ne nospitai	S nam	θ,
5	_	•	benefit of a college or ur	niversity ov	wned or or	perated by	a governi	mental unr	t descnbe	ed in		
• 🗀	section 170(b)(1)(A)(iv). (Complete Part II.)											
<u></u>	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 s	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 X	An organizati	ion that normally rec	eives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, n	nembershij	p fees, an	d gross red	eipts t	from
	activities rela	ted to its exempt fui	nctions - subject to certa	ın exceptı	ons, and (2) no more	than 33 1	1/3% of its	support t	from gross	ınvest	ment
	income and i	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization a	ifter June 3	0, 197	5.
	See section	509(a)(2). (Complete	e the Part III.)									
10	An organizati	on organized and or	perated exclusively to te	st for publ	ıc safety. S	See sectio	n 509(a)(4	1). (see ins	tructions)	1		
11 🔲	An organizati	ion organized and of	perated exclusively for th	ne benefit (of, to perfo	orm the fur	nctions of,	or to carr	y out the p	purposes o	f one o	or
	more publicly	supported organiza	ations described in secti	on 509(a)(¹	1) or section	on 509(a)(2	?) See sec	ction 509(a	a)(3). Che	ck the box	that	
	describes the	e type of supporti <u>ng</u>	organization and comple	ete lines 1	1e through	11h						
	a Type	l b ∟	_ Type II d	: Тур	e III - Fund	tionally int	egrated		d 📖	Type III - C	Other	
e 🔲	By checking	this box, I certify tha	at the organization is not	controlled	l directly o	r ındırectly	by one o	r more disc	qualified p	ersons oth	er thai	n
	foundation m	nanagers and other t	han one or more publicly	y supporte	d organiza	ations desc	cribed in s	ection 509	9(a)(1) or s	section 509	(a)(2).	
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check th	nis box									
g	Since Augus	t 17, 2006, has the c	organization accepted ar	ny gift or co	ontribution	from any	of the folk	owing pers	sons?			
	(i) A perso	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons d	lescribed	ın (ii) and (ııi) below,		Yes	No
	the gove	erning body of the s	upported organization?							11g(i)		
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)		
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	97					11g(iii)		
h	Provide the f	ollowing information	about the organizations	the organ	ization sup	oports.						
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the c	organization	(v) Did you	notify the	(vi) Is	the	(vii) Am	nount of	
	anization	(11, 2.11	organization (described on lines 1-9	in col. (i) lis	sted in your	organizat	ion in col.	l organizatio	on in col. I	Sup		•
•			above or IRC section	ا ا	document?	` ' '		(i) organiz U.S.	.?			
			(see instructions))	Yes	No	Yes	No	Yes	No			
				<u> </u>				 	 			
							-					
												
				1								

Schedule /	A (Form 990 or 990 EZ) 20	<u>80</u> 0
Part II	Support Schedul	e fo

Page 2

	rt II Support Schedule for	Organizations	Described in	n Sections 170)(b)(1)(A)(iv) ar	d 170(b)(1)(A)(vi)
_	(Complete only if you checke	d the box on line 5	, 7, or 8 of Part I.)			
Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						•
	or expended on its behalf					<u> </u>	
3	The value of services or facilities						
	furnished by a governmental unit to	n					
	the organization without charge			-			
4	Total. Add lines 1 · 3						
5	The portion of total contributions						
	by each person (other than a					1	
	governmental unit or publicly		:				
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
_	••				-		
	Public Support. Subtract line 5 from line 4 ction B. Total Support				1		
		(-) 2004	(L) 2005	(=) 2006	(-1) 0007	(-) 0000	(D. Takal
	endar year (or fiscal year beginning in) Amounts from line 4	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
8	Gross income from interest,		<u> </u>	 		· · · · · · · · · · · · · · · · · · ·	
•	dividends, payments received on						
	securities loans, rents, royalties				İ		
	and income from similar sources						
9	Net income from unrelated business			-		,	
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities	etc. (see instructi	ons)		 -	12	
13	First five years. If the Form 990 is fo	r the organization'	s first, second, th	ird, fourth, or fifth	tax year as a secti	on 501(c)(3)	
_	organization, check this box and stor					=-	<u>▶□</u>
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2008 (line 6, column (f) d	ivided by line 11,	column (f)) .		14	%
15	Public support percentage from 2007		•			15	%
16a	33 1/3% support test - 2008. If the	· ·		•	14 is 33 1/3% or	more, check this be	ox and
	stop here. The organization qualifies		_				▶□
t	33 1/3% support test - 2007. If the	-			d line 15 is 33 1/39	% or more, check to	his box
	and stop here. The organization qua				40 40 - 40		▶□
178	10% -facts-and-circumstances tes	_					
	and if the organization meets the "fac		·	•	·	art IV now the orga	nization
	meets the "facts-and-circumstances"	-	•		-	47a omd hr = 45 ··	109/ 07
t	10% -facts-and-circumstances tes	_				·	
	more, and if the organization meets to organization meets the "facts-and-cire		·		•		▶ □
10	Private foundation. If the organization		_	-			
_10	Filvate touridation, it tile organization	m ulu not check a	DOX OIT HITE 13, 1	ua, 100, 17a, 01 17	D, CHECK HIS DOX	and see monucion	13

Pa	edule A (Form 990 or 990-EZ) 2008 G art III Support Schedule for C	IRL SCOUT Organizations	S OF NEW Described in	MEXICO TR Section 509(a)	AILS, INC	. 85-601	1246 Page 3
	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and				- " -		
	membership fees received (Do not						
	include any "unusual grants ")	137,891.	206,351.	128,060.	187,492.	154,081.	813,875.
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	2896506.	2610234.			2926655.	13894270.
3	Gross receipts from activities that	2030000	20202020	23100001		25200551	130312701
3	are not an unrelated trade or bus-						
	iness 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 - 5	3034397.	2816585.	2674718.	3101709.	3080736.	14708145.
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ь	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
	c Add lines 7a and 7b		-				
-	Public support (Subtract line 7c from line 6)						14708145.
	ction B. Total Support					<u>. </u>	147001436
-	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 6	3034397.	2816585.	2674718.	3101709.		14708145.
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	19,037.	40,420.	54,557.	41,444.	22,996.	
b	Unrelated business taxable income			_			
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b	19,037.	40,420.	54,557.	41,444.	22.996.	178,454.
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on			32/33.1	/	22,3300	2.072020
	regularly carried on						
12	Other income Do not include gain or loss from the sale of capital						
	Other income Do not include gain				-		14886599.
13	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organı	
13	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12)	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organi	
13 14	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for	-		d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organı	
13 14	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ	ic Support Pe	rcentage		ax year as a sectio	n 501(c)(3) organi	zation,
13 14 Sec	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Support percentage for 2008 (ic Support Pe	rcentage ivided by line 13, o		ax year as a sectio		98.80 %
13 14 Sec 15 16	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ Public support percentage for 2008 (Public support percentage from 2007)	ic Support Pe line 8, column (f) d ' Schedule A, Part	rcentage Ivided by line 13, o IV-A, line 27g	column (f))	ax year as a sectio	15	zation,
13 14 Sec 15 16 Sec	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2008 (Public support percentage from 2007 ction D. Computation of Investigation	ic Support Pe line 8, column (f) d ' Schedule A, Part stment Incom	rcentage ivided by line 13, o IV-A, line 27g e Percentage	column (f))	ax year as a sectio	15	98.80 % %
13 14 Sec 15 16 Sec 17	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2008 (Public support percentage from 2007 ction D. Computation of Investment income percentage for 20	ic Support Pe line 8, column (f) d 7 Schedule A, Part stment Incom 008 (line 10c, colur	rcentage Ivided by line 13, of IV-A, line 27g e Percentage nn (f) divided by lii	column (f)) ne 13, column (f))	ax year as a sectio	15 16	98.80 % %
13 14 Sec 15 16 Sec 17 18	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2008 (Public support percentage from 2007 ction D. Computation of Investment income percentage from 2007 investment income percentage from 2007 ction D. Computation of Investment income percentage from 2007 investment income percentage from 2007 ction D. Computation of Investment income percentage from 2007 ction D. Computation of Investment income percentage from 2007 ction D. Computation of Investment income percentage from 2007 ction D. Computation of Investment income percentage from 2007 ction D. Computation of Investment income percentage from 2007 ction D. Computation of Investment income percentage from 2007 ction D. Computation of Investment income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Income percentage from 2007 ction D. Computation of Investment Investment Investment Investment Investment Investment Investment Investment Investment Investment Investment Inve	ic Support Pe line 8, column (f) d 7 Schedule A, Part stment Incom 2008 (line 10c, colur 2007 Schedule A,	rcentage Ivided by line 13, of IV-A, line 27g e Percentage mn (f) divided by line Part IV-A, line 27h	column (f)) ne 13, column (f))		15 16 17 18	98.80 % % 1.20 %
13 14 Sec 15 16 Sec 17 18	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2008 (Public support percentage from 2007 ction D. Computation of Investment income percentage from a 33 1/3% support tests - 2008. If the	ic Support Pe line 8, column (f) d 7 Schedule A, Part stment Incom 108 (line 10c, colur 2007 Schedule A, organization did n	rcentage IV-A, line 27g e Percentage mn (f) divided by lii Part IV-A, line 27h iot check the box	column (f)) ne 13, column (f)) on line 14, and line	15 is more than 3	15 16 17 18 3 1/3%, and line	98.80 % 98.80 % 1.20 % % 17 is not
13 14 Sec 15 16 Sec 17 18 19a	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2008 (Public support percentage from 2007 ction D. Computation of Investment income percentage from a 33 1/3% support tests - 2008. If the more than 33 1/3%, check this box a	ic Support Pe line 8, column (f) d 7 Schedule A, Part stment Incom 108 (line 10c, colur 2007 Schedule A, organization did n nd stop here. The	rcentage IV-A, line 27g e Percentage Inn (f) divided by line Part IV-A, line 27h iot check the box organization qual	ne 13, column (f)) on line 14, and line	: 15 is more than 3 supported organiza	15 16 17 18 33 1/3%, and line	98.80 % 98.80 % 1.20 % % 17 is not
13 14 Sec 15 16 Sec 17 18 19a	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2008 (Public support percentage from 2007 ction D. Computation of Investment income percentage from a 33 1/3% support tests - 2008. If the more than 33 1/3%, check this box a 23 3 1/3% support tests - 2007. If the	ic Support Pe line 8, column (f) d Schedule A, Part stment Incom 108 (line 10c, colur 2007 Schedule A, organization did n nd stop here. The organization did n	rcentage IV-A, line 27g e Percentage Inn (f) divided by line Part IV-A, line 27h tot check the box organization qualitot check a box or	column (f)) ne 13, column (f)) on line 14, and line ifies as a publicly s	15 is more than 3 supported organiza	15 16 17 18 13 1/3%, and line ation one than 33 1/3%,	2ation, 98.80 % % 1.20 % % 17 is not
13 14 Sec 15 16 Sec 17 18 19a	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2008 (Public support percentage from 2007 ction D. Computation of Investment income percentage from a 33 1/3% support tests - 2008. If the more than 33 1/3%, check this box a	ic Support Pe line 8, column (f) d ' Schedule A, Part stment Incom 08 (line 10c, colur 2007 Schedule A, organization did n organization did n organization did n eck this box and st	rcentage IV-A, line 27g e Percentage Inn (f) divided by line Part IV-A, line 27h Into check the box I organization qual I ot check a box or I top here. The organization organ	column (f)) ne 13, column (f)) on line 14, and line ifies as a publicly s I line 14 or line 19a anization qualifies a	15 is more than 3 supported organiza , and line 16 is mo as a publicly supp	15 16 17 18 13 1/3%, and line ation ore than 33 1/3%, orted organization	2ation, 98.80 % % 1.20 % % 17 is not

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

GIRL SCOUTS OF NEW MEXICO TRAILS INC.

Employer identification number 85 – 6.011.24.6

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	Is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	wnting that the assets held in donor adv	used funds
	are the organization's property, subject to the organization's $% \left(1\right) =\left(1\right) \left(1$	exclusive legal control?	. Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds may t	e used only
	for charitable purposes and not for the benefit of the donor o		
Pa	t II Conservation Easements. Complete if the org	janization answered "Yes" to Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or p	leasure) Preservation of an h	istorically important land area
	Protection of natural habitat	Preservation of cert	fied historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	ervation contribution in the form of a co	nservation easement on the last day
	of the tax year		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired a	·	2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	he organization during the taxable
	year ▶		
4	Number of states where property subject to conservation eas		-
5	Does the organization have a written policy regarding the per	nodic monitoring, inspection, violations,	
_	enforcement of the conservation easements it holds?		. Yes L No
6	Staff or volunteer hours devoted to monitoring, inspecting, an	- ·	
7	Amount of expenses incurred in monitoring, inspecting, and o		•
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 17	
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservati	· ·	
	include, if applicable, the text of the footnote to the organization conservation easements.	don's financial statements that describe	s the organization's accounting for
Pai	t III Organizations Maintaining Collections of	f Art. Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	•	
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	·	
	the footnote to its financial statements that describes these i	·	,
b	If the organization elected, as permitted under SFAS 116, to		ance sheet works of art, historical treasures.
_	or other similar assets held for public exhibition, education, o		
	these items:	, , , , , , , , , , , , , , , , , , ,	
	(i) Revenues included in Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financ	
_	the following amounts required to be reported under SFAS 1		3
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X	•	► \$ ► \$
_		• •	

		OUTS OF NE	_						11246	
Par	t III Organizations Maintaining (Collections of A	rt, Hist	torical Tre	easures, c	or Oth	<u>er Simil</u>	<u>ar Asse</u>	ts (contin	ued)
3	Using the organization's accession and other	er records, check any	of the f	ollowing tha	t are a signif	icant us	e of its col	lection ite	ms (check	all
	that apply):									
а	Public exhibition	d		Loan or excl	hange progra	ams				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explai	n how th	ney further th	ne organizati	ion's exe	empt purpo	se in Par	t XIV.	
5	During the year, did the organization solicit of	or receive donations	of art, hi	storical treas	sures, or oth	er simıla	r assets			
	to be sold to raise funds rather than to be m	aintained as part of t	he orga	nization's co	llection?				Yes	□ No
Par	t IV Trust, Escrow and Custodia	l Arrangements	. Comp	ete if organi	zation answ	ered "Ye	s" to Form	1 990, Pai	rt IV, line 9,	
	reported an amount on Form 990, Pa	rt X, line 21.								
	Is the organization an agent, trustee, custod	lian or other intermed	lary for	contribution	s or other as	sets no	t included			
	on Form 000. Dort V2		•						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV		llowina	table	• •			•		
_									Amount	
С	Beginning balance						1c			
	Additions during the year	•	•	••	•		1d		_	
	Distributions during the year	• •			•	•	1e			
f	Ending balance	•		•			1f		_	
	Did the organization include an amount on F	orm 990 Part X line	212						Yes	No
	If "Yes," explain the arrangement in Part XIV			•			•	_	_ 163	
Par			ered "Ye	s" to Form 9	90 Part IV	line 10				
	T. J. L. L. L. L. L. L. L. L. L. L. L. L. L.	(a) Current year		nor year	(c) Two yea		(d) Three v	ears hack	(e) Four y	ears hack
10	Beginning of year balance	(a) current year	(6)	noi yeai	(C) THO YOU	15 buok	(d) Thiod	rours buok	(e) our y	ours buok
	Contributions								 	
b	Investment earnings or losses	-			-					· · · · · · · · ·
C	-			-	_			_		
a	Grants or scholarships									
е	Other expenditures for facilities									
	and programs								-	
	Administrative expenses								1	
9	End of year balance					·			<u> </u>	
2	Provide the estimated percentage of the year	ar end balance neld a								
	Board designated or quasi-endowment		_%							
	Permanent endowment	%								
		_%	-4 4 1	-			.L	4		
3a	Are there endowment funds not in the possi	ession of the organiz	ation th	at are neid a	na aaminist	erea for	me organia	zation	Г	res No
	by:									<u>res No</u>
	(i) unrelated organizations						•		3a(i)	
	(ii) related organizations		٠.						3a(ii)	
	If "Yes" to 3a(ii), are the related organization	•							3b	
Bos	Describe in Part XIV the intended uses of the				Dark V. Ivaa	10				
Par		 			_					
	Description of investment	(a) Cost or o basis (investr		(b) Cost basis	or other (other)	(c) L	Depreciation	on	(d) Book	value
1a	Land			87	1,734.		-	1	871	,734.
	Buildings				9,496.	2.	222,7	82.		,714.
	Leasehold improvements									
d	Equipment		-	67	0,011.	ļ	537,4	24.	132	,587.
	Other				<u> </u>		_ 			
	I. Add lines 1a-1e (Column (d) should equal F	form 990, Part X. colu	ımn (B).	line 10(c).)		·			2,681	,035.

2,681,035. Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 GIRL SCC	OUTS OF NEW ME	XICO TRAILS,	INC. 85	-6011246 Page 3
Part VII Investments - Other Securition	9S. See Form 990, Part X,	line 12.		
(a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of valua st or end-of-year mar	
Financial derivatives and other financial products				
Closely-held equity interests				
Other				
				-
Total. (Col (b) should equal Form 990, Part X, col (B) line			_ ·	-
Part VIII Investments - Program Relat	ed. See Form 990, Part X	, line 13.		
(a) Description of investment type	(b) Book value	•	(c) Method of valua st or end-of-year mar	
			St or end-or-year mar	
				
			-	
Total. (Col (b) should equal Form 990, Part X, col (B) line	13 \			
Part IX Other Assets. See Form 990, Part			· · ·	
	(a) Description	 		(b) Book value
			· · · · - · · ·	
		<u></u>		
				<u>. </u>
<u> </u>	·			
Total. (Column (b) should equal Form 990, Part X, c			▶	
Part X Other Liabilities. See Form 990, (a) Description of liability	Part X, line 25.	(b) Amount	 	
	····-	(b) Amount		
Federal income taxes		20 154		
ACCRUED PAYROLL	7.0. DD 0.0D 3.14	20,154.		
COOKIE DOUGH PAYABLE- SALI	LO PROGRAM	04 650		
GIFT CERTIFICATES		94,650.		
		 		
				
				
Total. (Column (b) should equal Form 990, Part X, c	ol (B) line 25.)	114,804.		

In Part XIV, 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 832053 12-23-08

	dule D (Form 990) 2008 GIRL SCOU'L'S OF NEW MEXICO	<u> rai</u>	LS, INC		85-	<u>6011246</u>	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to	Finan	cial Staten	nents			
1	Total revenue (Form 990, Part VIII, column (A), line 12)		_	1		2,099	<u>,316.</u>
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		2,384	<u>,268.</u>
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		<284	,952.
4	Net unrealized gains (losses) on investments			4		79	,070.
5	Donated services and use of facilities			5			
6	Investment expenses			6			
7	Prior period adjustments			7			
8	Other (Describe in Part XIV)		. [8			
9	Total adjustments (net) Add lines 4-8			9	_	79	,070.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10			,882.
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts W	ith Revenu	e per F	<u>Returr</u>		
1	Total revenue, gains, and other support per audited financial statements				1	2,178	<u>,386.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains on investments .	2a	79	<u>,070.</u>	.] [
b	Donated services and use of facilities .	2b	· · · · · · · · · · · · · · · · · · ·] [
c	Recovenes of prior year grants	2c]		
d	Other (Describe in Part XIV)	2d]		
е	Add lines 2a through 2d .				2e		<u>,070.</u>
3	Subtract line 2e from line 1				3	2,099	<u>,316.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			_		
b	Other (Describe in Part XIV)	4b]		
C	Add lines 4a and 4b				4c		0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		·		5	2,099	<u>,316.</u>
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Expens	ses per	r Retu		
1	Total expenses and losses per audited financial statements				1	2,384	<u>,268.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.				1 1		
а	Donated services and use of facilities	2a			-l		
b	Prior year adjustments .	2b			- I		
C	Losses reported on Form 990, Part IX, line 25	2c					
d	Other (Describe in Part XIV)	2d					
е	Add lines 2a through 2d				2e		<u> </u>
3	Subtract line 2e from line 1	•	-		3	2,384	<u>,268.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			J 1		
þ	Other (Describe in Part XIV)	_4b			-l l		_
С	Add lines 4a and 4b	-			4c		0.
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	·			5	2,384	<u>,268.</u>
	rt XIV Supplemental Information						
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	I, lines 1	a and 4, Part	IV, lines	1b and 2	2b; Part V, line	4, Part
X; Pa	rt XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b						
							
							
_						·	
							
_							

CHEDULE			,					OMB No 1545-0047	- 1
Form 990)			Grants and Governm	Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	to Organizations uals in the U.S.	ج. ج.		2008	
epartment of the Treasury ternal Revenue Service		▼ Compl	Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.	n answered "Yes," on F ■ Attach to Form 990.	" on Form 990, Pa n 990.	ırt IV, lines 21 or 22.		Open to Public Inspection	•
I ₽	tion GIRL SCOUTS	IS OF NEW	MEXICO TRAILS	ILS, INC.				Employer identification number 85-6011246	و ۾
Part I General II	General Information on Grants and Assistance	nd Assistance							1
1 Does the organ	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	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	sstance, and the selec	×	2
criteria used to a	criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use	tance? cedures for monite	t de lise of grant t	of grant funds in the United States	States			₫	0
art II	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	sovernments and	Organizations in the	United States.	omplete if the orga	Inization answered "Y	res" on Form 990, Part	t IV, line 21, for any	
recipient t	recipient that received more than \$5,000. Check this box if no one	5,000 Check this	box if no one recipien	it received more th	an \$5,000 Use Pa	rt IV and Schedule I-1	recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	lal space is needed	П
1 (a) Name and ac or go	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	
2 Enter total numb	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	nd government orį	ganizations					A A	
	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	tion Act Notice,	see the Instructions t	for Form 990.				Schedule I (Form 990) 2008	8

85-6011246 GIRL SCOUTS OF NEW MEXICO TRAILS, Schedule I (Form 990) 2008. Part III

Page 2

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

(f) Description of non-cash assistance (book, FMV, appraisal, other) Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 0 (d) Amount of non-cash assistance 9 129 1,765 9,174 5,269 (c) Amount of cash grant 890 200 (b) Number of recipients FINANCIAL AID FOR GIRLS - PROGRAM FEES AND UNIFORM AND HANDBOOK ASSISTANCE FOR GIRLS DESTINATION/WIDER OPS PROGRAM SCHOLARSHIP FINANCIAL AID FOR GSUSA MEMBERSHIP DUES (a) Type of grant or assistance TROOP START UP FINANCIAL SUPPORT CAMPERSHIPS Part IV

Schedule I (Form 990) 2008	832102 12-18-08

Schedule I-1 (Form 990) 2008 GIRL SCOUTS OF NEW MEXICO TRAILS, INC. Part II Continuation of Grants and Other Assistance to Individuals in the U.S. (Schedule I (Form 990), Part III.) (a) Type of grant or assistance recipients cash grant or assistance cash grant or assistance recipients	NEW MEXICAL INTERPORT	(Schedule I (Form 9 cash grant	INC. 190), Part III.) (d) Amount of noncash assistance	(e) Method of valuation (book, FMV,	85-6011246 Page 2
	recipients	cash grant	cash assistance	valuation (book, FMV, appraisal, other)	•
	0	0	0.		

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

GIRL SCOUTS OF NEW MEXICO TRAILS, INC.

Employer identification number 85-6011246

FORM 990, PART VI, SECTION A, LINE IU: THE CEO AND THE RISK MANAGEMENT
COMMITTEE REVIEW THE FEDERAL FORM 990 IN DETAIL PRIOR TO FILING
FORM 990, PART VI, SECTION B, LINE 12C: ALL BOARD MEMBERS, BOARD STANDING
COMMITTEE MEMBERS, AND BOARD DEVELOPMENT COMMITTEE MEMBERS ARE REQUIRED TO
MAKE ANNUAL DISCLOSURE OF ALL POSSIBLE CONFLICTS; ANY POSSIBLE CONFLICT OF
INTEREST, NO MATTER HOW INSIGNIFICANT, SHALL BE DISCLOSED IN WRITING TO THE
BOARD CHAIR BY THE PERSON CONCERNED PRIOR TO ENGAGING IN A CONFLICT OF
INTEREST ACTION; A MEMBER THAT HAS A CONFLICT OF INTEREST POSTION SHALL
RETIRE FROM THE ROOM AND NOT PARTICIPATE IN FINAL DELIBERATIONS OR
DECISIONS REGARDING ANY MATTER UNDER CONSIDERATION THAT IS POSSIBLY
RELEVANT TO A CONFLICT SITUATION; ANY UNDISLOSED CONFLICTS THAT ARE NOT
DISCLOSED SHALL BE REFERRED TO THE BOARD FOR DETERMINATION OF CONTINUED
MEMBERSHIP OF THE INDIVIDUAL CONCERNED; ALL MEMBERS SIGN THE POLICY
STATEMENT AGREEING TO ITS TERMS.
FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION OF OFFICERS AND KEY
EMPLOYEES IS DETERMINED ANNUALLY BY PERFORMANCE EVALUATION WITH THE CEO (OR
IN THE CASE OF THE CEO WITH THE CHAIRPERSON OF THE BOARD OF DIRECTORS).
FORM 990, PART VI, SECTION C, LINE 19: THE COUNCIL MAKES ITS GOVERNING
DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE
TO THE PUBLIC UPON REQUEST AT THE COUNCIL HEADQUARTERS, 4000 JEFFERSON
PLAZA, NE, ALBUQUERQUE, NM 87109

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

	you are filing for an Automatic 3-Month Extension, complete only Part I and check this box		
Pai	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
	rporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and cor I only	nplete	· > □
	ther corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a e income tax returns.	n exten	sion of time
noted (not a you r	tronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensi d below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or compusite the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic forms, gov/efile and click on e-file for Chanties & Nonprofits.	ically if	(1) you want the additional ated Form 990-T. Instead.
Type print		Emp	loyer identification number
•	GIRL SCOUTS OF NEW MEXICO TRAILS, INC	8	5-6011246
file by due da filing y	to for Number, street, and room or suite no. If a P.O. box, see instructions.		
return	566		
Chec	ck type of return to be filed (file a separate application for each return):		
	Form 990 Form 990-T (corporation) Form 4 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5 Form 990-EZ Form 990-T (trust other than above) Form 6 Form 990-PF Form 1041-A Form 8	227 069	
Te • If: • If:	COUNCIL ACCOUNTANT ne books are in the care of 4000 JEFFERSON PLAZA, NE - ALBUQUERQUE, elephone No. FAX No. the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the control of the group, check this box and attach a list with the names and EINs of all		r the whole group, check this
1	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un MAY 15, 2009 , to file the exempt organization return for the organization named is for the organization's return for: Calendar year or X tax year beginning OCT 1, 2007 , and ending SEP 30, 2008		The extension
2	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period
2 3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
		3a	Change in accounting period
За	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.		
За	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	За	\$