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Form **990** 

# **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)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public

$\overline{\mathbf{A}}$	For th	e 2008 c	alendar	r year, or t	ax year be	eginning	Octob	er 1,	2008, aı	nd endi	ng (	Septe	mber 3	0 , 20	09	
R	Check if a	applicable	Please	C Name of	f organizatio	n Girl Sco	uts Susit	na Counc	il				D Em	ployer id	entification n	umber
_		change	use IRS		usiness As				•	_			92		600017	9
_	Name cl	-	print or		and street (or I	PO box if mail	is not delivere	d to street add	ress)	Room/s	uite	,	E Tele	phone nu	ımber	
	initial ref	_	type. See	3911 Tu	ırnagain	Blvd E							( 907	7 )	248-225	0
	Terminat		Specific Instruc-		own, state o	or country, an	d ZIP + 4			•						
		d return	tions		age, AK	99517							G Gros	s receipts	\$ 2,48	0,065
		on pending	F Na	me and add	ress of princ	ipal officer					Híz	a) Is this	a group re	eturn for affi	iliates? Yes	√ No
	. 1-1	,	Marg	aret Lars	on , addre	ess is san	ne as C ab	ove			1 '	•			ed? Yes	□No
ī	Tax-exe	empt status	s· 🔽	501(c) ( 3 )	(insert no	) 494	7(a)(1) or	527							see instruction	
j				Iscoutsal							H(c	) Group	exemption	number 1	<u> </u>	
K	Type of	organization.	. Corp	oration 🔲 Tru	ust 🗆 Assoc	ciation 🗌 Oth	ner ▶		L Year	of format	tion 1	951	M Stat	e of legal	domicile Al	Κ
P	art I	Summ						·								
	1	Briefly de	escribe	the orga	nızatıon's	mission o	r most sig	nificant a	ctivities:	Girl S	Scouti	ng bu	ilds gi	rls of c	ourage,	
•	1	confide	nce, a	nd charac	ter, who	make the	world a b	etter plac	e. The	organi	zation	runs	progra	ıms, ev	ents, cam	p
Š	1.	fundrais	sing ac	ctivities, a	ind memi	bership ac	tivities fo	r Girl Sco	outs in S	South \	Vest a	nd So	uth Ce	entral A	laska.	
Activities & Governance																
ŏ	2	Check this	s box ►	☐ If the c	organization	n discontinue	d its operat	ions or disp	osed of r	more tha	n 25% (	of its as	ssets			
ಶ	3	Number	of voti	ng memb	ers of the	governing	body (Pa	ırt VI, line	1a)				. 🔼			14
es	4	Number	of inde	ependent <sup>•</sup>	voting me	embers of	the gover	ning body	(Part V	I, line 1	b) .		. 4			14
Ξ	5	Total nur	mber c	of employe	es (Part '	V, line 2a)	<del>[ -</del>	·	VE 17 /	<u> </u>	·].		.   5	<u> </u>		68
Aci	_					ate if nece		,	EIVE		].		.   6	<del></del>		1,000
	7a	Total gro	oss unr	elated but	siness rev	venue from	Part VIII,	line 12, c	olumn (	C)	S.		. 7			
	b	Net unre	lated b	ousiness ta	axable inc	come from	Form 990	)-T, line 3	<sup>4</sup> 187	<del>1010 ·</del>	$ \Omega $		. 7	<u> </u>		
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ō	8			-		l, line 1h)		<del></del>			띰	_	301,83			0,242
Revenue	9	,			-	I, line 2g)	1	OG	DEN,	UI.			275,13			<u>25,550</u>
ě	10					mn (A), line		id 7d) .					95,04	- 1		8,484
_	11					A), lines 5,				40.	ļ		907,47			4,681
	+					11 (must ed				12)		1,	579,48			8,957
						(Part IX, co							99,48	9	14	1,648
s	14		•			Part IX, co					ļ		005.00			
Expenses	15			•		yee benefi			), lines 5	-10)			925,33	8	95	8,940
ē	16a			-		IX, column								-: :	<del></del>	۲.,
ū	~				•	column (D)			86,1	52		<u> </u>	400.00			
						A), lines 1							490,89			6,730
						(must equa		column (A	N), line 2	25)			515,72 63,76			17,318 14,620
_ 9		Revenue	iess ex	(penses. 5	ubtract iii	ne 18 from	iine 12 .	• • • •	• • •		Pos	ınning (		3	End of Year	21,639
ts or											Beg			<u> </u>		
SSe	20		•	art X, line	•							<u> </u>	349,82 70,01			90,728 80,813
Net Asset	21			(Part X, lir		tract line 2	 1 from lin		•				279.80			9,915
	art II			Block	ccs. oub	nact mic z	1 110111 1111	<u> </u>	<del></del>	••			<u> </u>			3,310
		Under pe	enalties o	of periury. I de	eclare that I	have examine	ed this return	, including a	company	ing sched	dules and	statem	ents, an	d to the b	est of my kno	wledge
		and belie	ef, it is tr	ue, correct,	and comple	te Declaratio	n of prepare	(other than	officer) is	based or	n all info	rmation	of which	prepare	r has any kno	wledge
Sig	an	<b>\</b> /	IJΛ.	11/2	~11	esS1	γ					1	5	12	-//)	
	ere	Sign	nature of	officer	4	,						Dat	е			
		$\Lambda$	Λu	Mari	veSt	IM	1500	1	61	<del>[</del> ]						
		Тур	e or prin	t name and t	iitle											
_		Preparer	's						Date		heck if				ng number	
Dai	ч	signature									elf- mployed		(see inst	ructions)		
Pai		_							<u> </u>	]						
	parer's Only	Firm's na									8	IN	•	1		
_	- Only	if self-em address.									F	hone n	o <b>&gt;</b> (	)		
Ma	y the	IRS disc	uss thi	s return w	vith the p	reparer sho	own above	e? (see in:	struction	ns) .		. ,			☐ Yes [	No
Fo	r Privac	cy Act an	ıd Pape	erwork Rec	duction Ac	t Notice, s	ee the sep	arate instr	uctions.		Cat	No 11	282Y		Form <b>990</b>	(2008)

Par	art III Statement of Program Service Accomplishments (see instructions)	
1	Briefly describe the organization's mission:  Girl Scouting builds girls of courage, confidence, and character, who make the world a better place. The organization runs programs, events, camp, fundraising activities, and membership activities for Girl Sco	
	South West and South Central Alaska. Girl Scouts provides informal education.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes ☑ No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	] Yes ☑ No
4	If "Yes," describe these changes on Schedule O.  Describe the exempt purpose achievements for each of the organization's three largest program services by Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code. ) (Expenses \$ 552,712 including grants of \$ ) (Revenue \$ Resident Camp and Day Camps Resident camp attendance 668 Day camp attendance 1,863	
4b	(Code: ) (Expenses \$ 574,699 including grants of \$ ) (Revenue \$ Recruitment and administration of Girl Scouts within council jurisdiction.  Registered girls 5,772  Registered adults 1,589	
4b	Recruitment and administration of Girl Scouts within council jurisdiction. Registered girls 5,772 Registered adults 1,589	
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	Recruitment and administration of Girl Scouts within council jurisdiction. Registered girls 5,772 Registered adults 1,589	
	Recruitment and administration of Girl Scouts within council jurisdiction.  Registered girls 5,772  Registered adults 1,589  (Code: ) (Expenses \$ 211,835 including grants of \$ ) (Revenue \$ General program to supplement troop activities, training and development of adult volunteers	
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	Recruitment and administration of Girl Scouts within council jurisdiction.  Registered girls 5,772  Registered adults 1,589  (Code: ) (Expenses \$ 211,835 including grants of \$ ) (Revenue \$ General program to supplement troop activities, training and development of adult volunteers	
4c	Registered girls 5,772 Registered adults 1,589  c (Code: ) (Expenses \$ 211,835 including grants of \$ ) (Revenue \$ General program to supplement troop activities, training and development of adult volunteers  Total participants 7,207	
4c	Recruitment and administration of Girl Scouts within council jurisdiction.  Registered girls 5,772  Registered adults 1,589  (Code: ) (Expenses \$ 211,835 including grants of \$ ) (Revenue \$ General program to supplement troop activities, training and development of adult volunteers	

Par	t V Checklist of Required Schedules			
	r		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
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 on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<b>√</b>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		1
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_		✓
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11_	✓	
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	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>√</b>
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		<b>✓</b>
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		✓
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		✓
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		<b>1</b>
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		<b>√</b>
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		<b>√</b>
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		<b>√</b>
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<b>√</b>
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		
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22	_	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		✓.
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25.	24a		1
h	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a				
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		✓
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		1

Pai	t IV Checklist of Required Schedules (continued)			
			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		<b>√</b>
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV.	28b		1
С	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		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓	ļ
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>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
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		1
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		1
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		1
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		1

Form **990** (2008)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of !			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c	· /	
_	gaming (gambling) winnings to prize winners?		_ <u>`</u> _	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 68			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			<b>-</b>
	this return?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a		1
L	account)?	70		-
D	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		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	1		
	Regarding Prohibited Tax Shelter Transaction?	5c		
6a	j ,	6a		<b>✓</b>
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		<b>✓</b>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
d	required to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
Ū	benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		V
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		ļ.
_	required?			
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		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		ļ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		ļ
10	Section 501(c)(7) organizations. Enter:	-		
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	1		
11_	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
a	aross mosme norm memors or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b			

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

<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			1
	circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			,
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			- ,
	any other officer, director, trustee, or key employee?	_2_		<b>V</b>
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		V
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<u></u>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	_5_		<b>V</b>
6	Does the organization have members or stockholders?	6	<u> </u>	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	7a	1	
	of the governing body?	7b	7	_
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7.5	_	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			,
_	the year by the following:	8a	1	'
	The governing body?	8b	1	
	Does the organization have local chapters, branches, or affiliates?	9a		1
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
b	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	10	./	
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	<u> </u>	
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		1
Sac	tion B. Policies			<u> </u>
	tion B. I olloids		Yes	No
122	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
-	rise to conflicts?	12b	✓	
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
·	describe in Schedule O how this is done	12c	✓	
13	Does the organization have a written whistleblower policy?	13		✓
14	Does the organization have a written document retention and destruction policy?	14	✓	<u> </u>
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:		٠.	
а	The organization's CEO, Executive Director, or top management official?	15a	<b>√</b>	<u> </u>
b	Other officers or key employees of the organization?	15b	✓	
	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	40-		<i>-</i>
	with a taxable entity during the year?	16a		-
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in 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	100		<u> </u>
<u> </u>	List the states with which a copy of this Form 990 is required to be filed ► AK			
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c	)(3)e	only)	
	available for public inspection. Indicate how you make these available. Check all that apply.	,,,,,,,,	Oi iiy)	
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds o	f the	

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

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

- 1a Complete this table for all persons required to be listed. 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.

Check this box if the organization did not co	(B)				) )	<u> </u>		(D)	(E)	(F)
Name and Title	Average	Positi	on (c	heci	all	that ap	ply)	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Peggy Rawitz Kugel Board Chair	3	1						0	0	0
Janet Ulrich 1st Vice Chair	1	1						О	0	0
Susan Gamache 2nd Vice Chair	1	1						0	0	0
Kathy Day Secretary		1						0	0	0
Meera Kohler Treasurer	1	1						0	0	0
George Vakalis Board Member at Large	0.5	1						0	0	0
Jane Angvik Board Member at Large	0.5	1						0	0	0
Delisa Culpepper Board Member at Large	0.5	1						0	0	0
Cathy Easter Board Member at Large	0.5	1						0	0	0
Jacqueline Evans Board Member at Large	0.5	1						0	0	0
Monica James  Board Member at Large	0.5	1						0	0	0
Karen Jordan Board Member at Large	0.5	1						0	0	0
Bill O'Leary  Board Member at Large	0.5	1						0	0	0
Lynne Seville Board Member at Large	0.5	1						0	0	0
Jane Straight CEO	37.5			1				74,966	0	9,568

Part VII Section A. Officers, Directors, Trustees, K			ey Employees, and Highest						Compensated	Employees (	continu	ed)	
	(A)	(B)				C)			(D)	(E)		(F)	
	Name and title	Average hours per week	Individual trustee Or director	nstitutional trustee	Officer	a Key employee	Highest compensated employee	S Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC	col	Estimation other other mpensa from the rganization of the ganization of the ganizati	of ation ne tion ted
											ļ		
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											-		
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											-		
											-		
											<del> </del>		
416	T-4-1								74,965.92		0	0.51	
2	Total			- ive	\ <u></u>		thor	\$ 1			<u> </u>		36.38
2	organization • 0	e iii iaj wii	io rec	GIVE	5U 11	11016	s unai	ТФТ	oo,ooo iii repo	rtable comper	isation	IIOIII	1116
												Yes	No
3	Did the organization list any former office employee on line 1a? If "Yes," complete S							oyee	e, or highest c	ompensated	3	<u> </u>	1
4	For any individual listed on line 1a, is the state organization and related organizations individual.										4	-	
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," comp	comp olete	cens Sch	sation	on 1 Ie J	rom for s	any <i>ach</i>	unrelated organization	anization for	5	-	1
Se	ction B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization.	ompensate	d ind	ере	nde	nt c	ontra	ctor	rs that received	d more than \$	100,00	0 of	
	(A) Name and business add	dress					_		(B) Description of se	ervices		C) ensatio	n
No	ne	···							·····				
_								_					
2	Total number of independent contractors compensation from the organization ▶ 0		hose	ın '	1) w	ho	recei	ved	more than \$10	00,000 in			

Pari			zenue	<del> </del>	<del> </del>		<del>, , , – </del>	1
Fall	- VIII	Statement of nev	enue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Fundraising events Related organizations Government grants (contrib All other contributions, gifts, gr and similar amounts not includ Noncash contributions included	ants, ed above 1f	27,796 346,467 142,285	460,242			
		_		Business Code				
Program Service Revenue	2a	Program Fees			375,550	375,550		
e R	b					<del></del>		<del></del>
<u>Ş</u> .	С							
တ္မ	d				· ·			<del> </del>
Jran	e	All other program service						
Proč	.	Total. Add lines 2a-2f		▶	375,550	<del></del>		
	3	Investment income (incluother similar amounts) Income from investment of	udıng dividends	i, interest, and	51,305			51,305
	5	Royalties	(ı) Real	(v) Devenuel			<del></del>	<del></del>
			(i) Heai	(ii) Personal				
	1	Gross Rents						
	1	Less' rental expenses						
		Rental income or (loss) L		<b>•</b>				
		` [	(i) Securities	(ii) Other				
	/a	Gross amount from sales of assets other than inventory	7,050	0				-
	b	Less: cost or other basis and sales expenses .	8,270	1,601				
		Gain or (loss)	(1,220)	(1,601)	:			
	ď	Net gain or (loss)			(2,821)			(2,821)
r Revenue	8a	events (not including \$ of contributions reported						
Other	b	Less direct expenses	b	<u>-</u>				
0	C	Net income or (loss) from	m fundraising e	vents ▶				<del> </del>
	ŀ	Gross income from gamin See Part IV, line 19	a					
		Less direct expenses. Net income or (loss) from		ities ►				1
	10a	Gross sales of inverteurns and allowances	ntory, less	1,591,490				
		Less: cost of goods sold		611,237	000.050	000.050	-	-
	F-	Net income or (loss) from Miscellaneous Rever		Business Code	980,253	980,253		
	14-	Miscellaneous		220000 0000	(5,572)	(5,572)	-	-
	11a		• • • • • • • • • • • • • • • • • • • •		(5,512)	(3,3,2)		
	p							
	d	All other revenue						<u> </u>
	1 -	Total. Add lines 11a-11			(5,572)			1
	12	Total Revenue. Add line						
	<u>l.                                    </u>	9c, 10c, and 11e		▶	1,858,957	1,350,231		48,484

# 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 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	141,648	141,648		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
5	Compensation of current officers, directors, trustees, and key employees	107,270	55,780	30,036	21,454
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	635,747	556,601	60,612	18,534
8	Pension plan contributions (include section 401(k)	20 544	46 052	2 520	1 150
^	and section 403(b) employer contributions)	20,541	16,853 106,821	2,530 24,077	1,158 6,607
9 10	Other employee benefits	57,877	46,811	8,014	3,052
11	Fees for services (non-employees):				-,,
	Management				
	Legal	15,765	_	15,765	
C	Accounting	11,500		11,500	
	Lobbying				· · · · · · · · · · · · · · · · · · ·
	Professional fundraising services See Part IV, line 17	7,362	25	7,337	
f	Investment management fees	20,366	12,368	6,155	1,843
12	Other	20,000	,,	3,133	1,040
13	Office expenses	174,132	154,244	11,059	8,829
14	Information technology	14,325	10,293	669	3,363
15	Royalties				
16	Occupancy	69,979	64,528	3,212	2,239
17	Travel	101,445	90,185	10,927	333
18	Payments of travel or entertainment expenses				
19	for any federal, state, or local public officials Conferences, conventions, and meetings.	10,787	2,022	4,925	3,840
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	65,792	50,475	6,470	8,847
23	Insurance	31,638	24,432	5,783	1,423
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	Recruitment	8,189	5,737	2,452	
b	Bad Debt	4,963	423		4,540
С	Miscellaneous	487		397	90
d					
e	All all and an area area.				
f 25	All other expenses Later through 24f	1,637,318	1,339,246	211,920	86,152
26	Joint Costs. Check here ► ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	.,557,161.0	-,,-		000,102

Pa	irt X	Balance Sheet			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	66,399	1	85,481
	2	Savings and temporary cash investments	564,392	2	545,310
	3	Pledges and grants receivable, net	142,102	3	154,572
	4	Accounts receivable, net	2,184	4	2,740
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties Complete Part II of Schedule L.		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	37,645		30,191
⋖	9	Prepaid expenses and deferred charges	62,379	9	44,825
	10a	Land, buildings, and equipment: cost basis 10a 1,656,078			!
	b	Less. accumulated depreciation. Complete Part VI of Schedule D	467,493	10c	634,325
	11	Investments—publicly traded securities	1,007,231	11	1,020,486
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,349,825	16	2,590,728
	17	Accounts payable and accrued expenses	70,018	-	80,813
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow account liability. Complete Part IV of Schedule D	·	21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties .		23	
	24	Unsecured notes and loans payable		24	·
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	70,018	26	80,813
ces		Organizations that follow SFAS 117, check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.		-	
Ī	27	Unrestricted net assets	2,149,081	_	2,367,000
B	28	Temporarily restricted net assets	130,726		142,915
힡	29	Permanently restricted net assets	·	29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.		_	
şţs	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ţ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Š	33	Total net assets or fund balances	2,279,807	33	2,509,915
_	34	Total liabilities and net assets/fund balances	2,349,825	34	2,590,728
Pê	irt XI	Financial Statements and Reporting			<del></del>
1	Acco	ounting method used to prepare the Form 990:   Cash  Accrual	Other		Yes No
<b>2</b> 8		e the organization's financial statements compiled or reviewed by an ind		?	2a ✓
		e the organization's financial statements audited by an independent according	•		2b ✓
c		es" to lines 2a or 2b, does the organization have a committee that assumes		sight of	
		audit, review, or compilation of its financial statements and selection of an inc			
<b>3</b> a	ı As a	result of a federal award, was the organization required to undergo an a	audit or audits as set		
		Single Audit Act and OMB Circular A-133?			3a ✓
t	If "Y	es," did the organization undergo the required audit or audits?			3b

#### SCHEDULE A (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)

2008
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service nonexempt charitable trusts.

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

Name of the organization Employer identification number 92 6000179 Girl Scouts Susitna Council Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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.) 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33\% % 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\% % 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). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 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 that describes the type of supporting organization and complete lines 11e through 11h. **c** Type III-Functionally integrated **d** ☐ Type III–Other a Type I **b** Type II e Dy checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (III) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the organizations the organization supports (iv) is the organization (I) Name of supported (n) EIN (III) Type of organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section. governing document? col (i) of your (i) organized in the US? (see instructions)) support? Yes Yes No Yes No No

Total

Sect	tion A. Public Support			or 8 of Part I.)			
~~				<u> </u>			
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	318,536	299,122	347,744	301,832	460,242	1,727,476
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1-3	318,536	299,122	347,744	301,832	460,242	1,727,476
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						261,134
6	Public support. Subtract line 5 from line 4						1,466,343
	tion B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	318,536	299,122	347,744	301,832	460,242	1,727,476
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	33,125	62,643	80,009	90,102	51,305	317,184
9	Net income from unrelated business activities, whether or not the business is regularly carned on						<del></del>
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 ,						2,044,660
12	Gross receipts from related activities, etc	. (see instructio	ns)			12	6,085,848
13	First five years. If the Form 990 is for organization, check this box and stop he	re		d, third, fourth,	-		n 501(c)(3)
<u>Sect</u>	tion C. Computation of Public Su	pport Percer	ıtage		<del></del>		
14	Public support percentage for 2008 (line	6, column (f) dıv	rided by line 11	, column (f))		14	72 %
15	Public support percentage from 2007 Sch	nedule A, Part I	V-A, line 26f			15	85 %
16a	33% % support test-2008. If the organizand stop here. The organization qualifies						ck this box ► ☑
b	33%% support test-2007. If the organization quality box and stop here. The organization quality			•		•	check this
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circum reganization meets the "facts-and-circum"	acts-and-circum	nstances" test,	check this box a	and stop here.	Explain in Part I	IV how the
b 18	10%-facts-and-circumstances test—2007 more, and if the organization meets the "facts-and-circumsta Private foundation. If the organization did	acts-and-circum inces" test The	stances" test, c organization qua	heck this box ai Jifies as a publicl	nd <b>stop here</b> . y supported org	Explain in Part l janization	V how the

	dule A (Form 990 or 990-EZ) 2008							Page 3
Pai	Support Schedule for Orga (Complete only if you checked)	nizations De	escribed in S n line 9 of Pa	<b>section 509(</b> a art I.)	1)(2)			
	tion A. Public Support							
Ca	llendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 20	108 (	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 1-5			- <del></del>		-		
	Amounts included on lines 1, 2, and 3 received from disqualified persons .					ļ		
b	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							
С	Add lines 7a and 7b		-			1		
8	Public support (Subtract line 7c from line 6)							
	tion B. Total Support	T	T	1		1	==	<u> </u>
Ca	llendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 20	108 (	(f) Total
9 10a	Amounts from line 6							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						· · · · · · · · · · · · · · · · · · ·	
С 11	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
13	Total support. (Add lines 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is for organization, check this box and stop	here .		nd, third, fourtl				
	tion C. Computation of Public Su	<del>· ·                                    </del>	<del></del>		453	T		
15 16	Public support percentage for 2008 (lin Public support percentage from 2007 S	Schedule A, P	art IV-A, line 2			15		<u>%</u>
	tion D. Computation of Investmen		-			1		
17 18	Investment income percentage for 200 Investment income percentage from 20	007 Schedule	A, Part IV-A, III	ne 27h .		17		<u>%</u>
19a	331/3 % support tests — 2008. If the organization is not more than 331/3 %, check this b							

b 331/3 % support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3 %, and line 18 is not more than 331/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

Schedule A (Fo	orm 990 or 990-EZ) 2008	Page 4
Part IV	<b>Supplemental Information.</b> Complete this part to provide the explanation required by Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see	Part II, line 10; instructions)
• • • • • • • • • • • • • • • • • • • •		
•		
	······	

#### SCHEDULE D . (Form 990)

# **Supplemental Financial Statements**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

Name	of the organization		$\neg$	Employer identification number
Girl	Scouts Susitna Council			92 6000179
Pai		nor Advised Funds or Other Similar	Fund	ds or Accounts. Complete if
	the organization answered "Yes	(a) Donor advised funds		(b) Funds and other accounts
	Takel museb on ak and of the ar	(a) Donor advised initios		(a) , and and ones accounts
1	Total number at end of year			
2	Aggregate contributions to (during year) Aggregate grants from (during year)		-	
3 4	Aggregate value at end of year			
5	Did the organization inform all donors and	donor advisors in writing that the assets h	held i	n donor advised
	funds are the organization's property, sub-	ect to the organization's exclusive legal co	ontrol	? <u>U</u> Yes <u>U</u> No
6	Did the organization inform all grantees, dused only for charitable purposes and not	onors, and donor advisors in writing that g	grant sor o	tunds may be r other
				· · · Yes No
Pai		plete if the organization answered "Yes"	to F	
1	Purpose(s) of conservation easements held			
•	Preservation of land for public use (e.g.			an historically important land area
	☐ Protection of natural habitat	· · · · · · · · · · · · · · · · · · ·		certified historic structure
	☐ Preservation of open space			
2	Complete lines 2a-2d if the organization hel	d a qualified conservation contribution in the	e forn	n of a conservation easement
	on the last day of the tax year.			
				Held at the End of the Year
а	Total number of conservation easements .			1 1
b	Total acreage restricted by conservation e			2c
C	Number of conservation easements on a c			. 2d
d	Number of conservation easements includ			
3	Number of conservation easements modifithe taxable year ▶			
4	Number of states where property subject			
5	Does the organization have a written police enforcement of the conservation easemen			
6	Staff or volunteer hours devoted to monitor			
7	Amount of expenses incurred in monitorin			
8	Does each conservation easement reporte 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			L. Yes L. No
9		the text of the footnote to the organization	enue 's fin	and expense statement, and ancial statements that describes
Day	the organization's accounting for conserva	ections of Art, Historical Treasures, or	r Oth	oor Similar Assats
	Organizations Maintaining Coll Complete if the organization ansi	wered "Yes" to Form 990, Part IV, line 8.	. Ju	ici dilinai Assets.
10	If the organization elected, as permitted un	nder SEAS 116, not to report in its revenue	s stat	ement and balance sheet works of
14	art, historical treasures, or other similar ass			
		te to its financial statements that describes		
b	If the organization elected, as permitted un	nder SFAS 116, to report in its revenue sta	iteme	ent and balance sheet works of art,
-	historical treasures, or other similar assets provide the following amounts relating to	s held for public exhibition, education, or re these items:	esear	ch in furtherance of public service,
	(i) Revenues included in Form 990, Part V	/III, line 1		
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works following amounts required to be reported	of art, historical treasures, or other similal under SFAS 116 relating to these items:	ar as	
а	Revenues included in Form 990, Part VIII,			
b	Assets included in Form 990, Part X			> \$

Page	2

	Tule D (Form 990) 2008									age Z
Par	t III Organizations Maintain	ing Collections	of Art, H	istorica	l Treasures,	or Ot	ther Similar As	sets (c	ontini	ued)_
3	Using the organization's accession items (check all that apply):	and other record	s, check	any of th	e following th	at are	e a significant us	e of its	colle	ection
а	Public exhibition		d	L <sub>i</sub>	oan or exchan	ge pr	ograms			
ь	Scholarly research		е	□ 0	ther				<b>-</b>	
С	Preservation for future general	tions								
4	Provide a description of the organize Part XIV.	ation's collection	s and exp	lain how	they further t	he or	ganization's exer	npt pur	pose	ın
5	During the year, did the organization assets to be sold to raise funds rathe	solicit or receive d r than to be maint	onations o ained as p	f art, hist art of the	torical treasures organization's	s, or c	other similar ction?	Y	es 🗌	] No
Par	Trust, Escrow and Cust Part IV, line 9, or reported					answ	vered "Yes" to F	Form 9	90, ——	
	Is the organization an agent, trusted included on Form 990, Part X? .								es 🗆	No
b	If "Yes," explain the arrangement in	Part XIV and cor	nplete the	e followir	ng table:		1			
						<u> </u>	Am	ount		
C	Beginning balance					1c				
d	Additions during the year			•		1d				
е	Distributions during the year					1e				
f	Ending balance					1f	!			1
2a		ount on Form 990	), Part X,	line 21?				L. Y€	es L	No
	If "Yes," explain the arrangement in t V Endowment Funds. Co		zation ar	Seworod	"Vee" to Fo	rm Q	90, Part IV, line	10		
Fal	Endowment Funds. Co	(a) Current year	(b) Pric		(c) Two years ba		d) Three years back	(e) Four	vears	hack
		(a) Current year	(0) FIIC	и усаг	(c) Two years be	- I	d) Three years back	(0) 1 0 0 1		
1a	Beginning of year balance									
b	Contributions		<u> </u>				·			
C	Investment earnings or losses .			<del>-</del> -						
d	Grants or scholarships		<del> </del>	<del></del>		-+				
е	Other expenditures for facilities and programs									
f 9	Administrative expenses  End of year balance									
2	Provide the estimated percentage of	of the year end ba	lance hel	d as.						
а	Board designated or quasi-endown	nent ▶	%							
b	Permanent endowment ▶	%								
С	Term endowment ▶%	6								
За	Are there endowment funds not in the	ne possession of the	ne organiz	ation tha	it are held and	admi	nistered for the	1		
	organization by:							2-(1)	Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		<del></del>
4	If "Yes" to 3a(II), are the related org Describe in Part XIV the intended u							3b		L
	t VI Investments—Land, Bu					t X li	ne 10			
ra		(a) Cost or o			st or other			(d) Roo	le value	
	Description of investment	(a) Cost or o			s (other)	(C) D	epreciation	(d) Boo	k value	,
40	Lond			224	1,434			224,	434	
_	Land				6,616	77	74,219	312,		
b	Buildings			-,,-,		•				
Ç				34	5,027	24	17,533	97,4	194	
	Other				·					
	I. Add lines 1a-1e. (Column (d) should e	equal Form 990, Pa	rt X, colun	nn (B), Iın	e 10(c).)			•	634	,325
				•			•			

Part VII Investments—Other Securitie	s. See Form 990, Part X	(, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year ma	
Financial derivatives and other financial products .			
Closely-held equity interests			
Other			
			<del> </del>
		<u> </u>	
		-	· · · · · · · · · · · · · · · · · · ·
	•		
			<del></del>
	•		
	-		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments - Program Relate	ed. See Form 990, Part X	(, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of value Cost or end-of-year ma	
	ļ. <u>-</u>		
		-	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.)		·	
Part IX Other Assets. See Form 990, Part IX	art X. line 15.		
,	(a) Description		(b) Book value
	-		
			<del></del>
Total. (Column (b) should equal Form 990, Part X, co	ol (R) line 15.)		
Part X Other Liabilities. See Form 990		· · · · · · · · · · · · · · · · · · ·	
(a) Description of liability	(b) Amount		<del></del>
Federal income taxes			
		_	
	<u> </u>	_	
	ļ		
	ļ	_	
		$\dashv$	
Total (Oak are A) should a well for a OOO Dad V and (D) 1 or 1 or		_	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 ) ▶	1		

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Par	t XI Reconciliation of Change in Net Assets from Form 990	to Financial Statemen	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	1,858,957
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	1,637,318
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	221,639
4	Net unrealized gains (losses) on investments		4	(11,046)
5	Donated services and use of facilities		5	19,515
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	(11,046)
10	Excess or (deficit) for the year per financial statements. Combine lines	3 and 9	10	230,108
Pai	t XII Reconciliation of Revenue per Audited Financial Sta	tements With Revenu	e per	
1	Total revenue, gains, and other support per audited financial statemer	nts	1	1,867,426
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a (11,046	<u>)</u>	
b	Donated services and use of facilities	2b 19,51	5	
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
e	Add lines 2a through 2d		2e	8,469
3	Subtract line 2e from line 1		3	1,858,957
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		
b	Other (Describe in Part XIV)	4b		
č			4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, lin	e 12)	5	1,858,957
Par	t XIII Reconciliation of Expenses per Audited Financial St	atements With Expen	ses p	er Return
1			1	1,637,318
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	Losses reported on Form 990, Part IX, line 25	2c		
d	Other (Describe in Part XIV)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	1,637,318
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i		
•	Investment expenses not included on Form 990, Part VIII, line 7b.	4a		
a	Other (Describe in Part XIV)	4b		
b	Add lines 4a and 4b		4c	-
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Par	rt I. line 18.)	5	1,637,318
Par	t XIV Supplemental Information	<u> </u>		1 1,00,10.0
Com	aplete this part to provide the descriptions required for Part II, lines 3, 5 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and		nd 4;	Part IV, lines 1b
	•••••••••••••••••••••••••••••••••••••••			

Schedule D (Forr	m 990) 2008	Page <b>5</b>
Part XIV	Supplemental Information (continued)	
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# SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

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

1545-0047	9
OMB No	0

Open to Public 

ŝ (h) Purpose of grant or assistance Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use **Employer identification number** 6000179 ✓ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance • 92 . . . . . (f) Method of valuation (book, FMV, appraisal, other) . . . Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance . . . . (d) Amount of cash grant . . Part IV and Schedule I-1 (Form 990) if additional space is needed . . Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable the selection criteria used to award the grants or assistance? Part | General Information on Grants and Assistance (P) EIN Enter total number of other organizations 1 (a) Name and address of organization **Girl Scouts Susitna Council** or government Name of the organization Part II

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. Use Schedule I-1 (Form 990) 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
Membership Fee Assistance	2,550	25,018	None		
Program Assistance	1,303	26,566	None		
Camp Assistance	545	90,064	None		
	4	- 4 f			and the same of such as a same

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Procedures for monitoring the use of grant funds

Schedule I, Part I, Line 2

Membership Fee Assistance is financial assistance with membership dues. Funds are not given to members. The amount of membership dues owed by the

member is either discounted or relieved. Therefore, monitoring of grant funds is not necessary for membership fee assistance. The members' accounts are updated

with a discount or relief of the fee.

Program Assistance is financial assistance for program/event fees. Like membership assistance, funds are not given to members. The amount of the program fee is

either discounted or relieved. Therefore, monitoring of grant funds is not necessary for program assistance.

Camp Assistance is financial assistance for camp fees. Like membership and program assistance, funds are not given to members. The amount of the camp fee is

either discounted or relieved. Therefore, monitoring of grant funds is not necessary for camp assistance.

#### **SCHEDULE M** (Form 990)

### **NonCash Contributions**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Inspection

Employer identification number

Gir	l Scouts Susitna Council				92	60	0017	9	
Pa	rt I Types of Property							-	
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported Form 990, Part VIII, I		Method o	(d) of dete venue:		ıg
1	Art—Works of art ,								
2	Art—Historical treasures								
3	Art—Fractional interests .						•		
4	Books and publications								
5	Clothing and household goods	1		1,005		Sale Price	of Co	mpar	able
6	Cars and other vehicles								
7	Boats and planes	<b>✓</b>	1	500		Sale Price	of Co	mpar	able
8	Intellectual property				-				
9	Securities—Publicly traded .	<b>/</b>	1	140,780		Fair Ma	arket	Value	
10	Securities—Closely held stock .	L							
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 ▶ ()								
26	Other ▶ ()								
27 28	Other ► () Other ► ()								
29	Number of Forms 8283 received	d by the or	ganization during the tax	vear for contribution	s for				-
	which the organization complete					29	0		
			,		-			Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prop	erty reported in Part	l line	s 1–28 that			
	it must hold for at least three ye								- 1
	used for exempt purposes for the					-	30a		✓_
b	If "Yes," describe the arrangement								
31	Does the organization have a contributions?	gift accep		es the review of a	ny no	n-standard	31	1	
32a	Does the organization hire or us contributions?		ties or related organization	ns to solicit, process	s, or se	ell noncash	32a		<b>✓</b>
ь	If "Yes," describe in Part II.	•	· · ·		•				-
33	If the organization did not report describe in Part II.	revenues in	column (c) for a type of pro	perty for which colu	mn (a)	is checked,			ſ

Schedule M (Form 990) 2008 Page :		
Part II	<b>Supplemental Information.</b> Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.	
·		
·		
·		
·		

#### **SCHEDULE 0** (Form 990)

# **Supplemental Information to Form 990**

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

**Girl Scouts Susitna Council** 

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.

Inspection

6000179

Employer identification number

92

Classes of Members or Stockholders				
Form 990, Part VI, Section A, Line 6 and 7A				
The organizations' voting membership consists of Delegates, members of the Board of Directors, members of the Board				
Development Committee who are not otherwise members of the organization, and past Presidents or Board Chairs of the				
organization. The organization is divided into geographic subdivisions called Associations. Associations are made up of				
Girl Scouts registered though the organization over the age of 14 in the specified geographic area. Each Association is				
entitled to elect one Delegate. Each Association with more than 100 girl members is entitled to elect one additional				
Delegate for each additional 100 girl members. Members of the Board Development Committee are elected by the				
voting members of the organization. New members of the Board of Directors are elected by current members of the				
Board of Directors.				

Schedule O (Form 990) 2008	Page <b>2</b>
Name of the organization	Employer identification number
Girl Scouts Susitna Council	92 600179
D. Course Course Course Date	
Review of Form 990 by Governing Body	
Form 990, Part VI, Section A, Line 10	
A copy of the 990 is emailed to the board members for their re	eview prior to filing. The draft of the 990 is also discussed
and antiqued skills Board Fireness Committee and action and	611
and reviewed at the Board Finance Committee meeting prior t	o tiling.
	······
•••••••••••••••••••••••••••••••••••••••	•

Schedule O (Form 990) 2008	Page 2				
Name of the organization	Employer identification number				
Girl Scouts Susitna Council	92 6000179				
Conflict of Interest Compliance					
Form 990, Part VI, Section B, Line 12C					
Each member of the Board of Directors, Officers, and Key Employees (CEO, CFO, COO, as	nd all Vice Presidents) are				
equired to complete and sign a Conflict-of-Interest Policy Statement annually. Board members and key employees shall					
advise the Board Chair in writing of any potential conflicts of interest which arise after sig	ning the agreement. When any				
such conflict of interest is relevant to a matter requiring action by the board, the intereste	d person shall call it to the				
attention of the president, and such person shall not vote on the matter. Moreover, the pe	rson having the conflict shall				
leave the room in which the meeting is held and not participate in the final deliberations o	r decision regarding the matter				
under consideration.					
······································					
<u></u>	······				
	•••••				

Schedule O (Form 990) 2008	Page 2
Name of the organization  Girl Scouts Susitna Council	Employer identification number 92 6000179
Policies - Compensation	
Form 990, Part VI, Section B, Line 15	
15A - CEO compensation is subject to Board approval. The Board reviews surv	veys of comparable compensation for
comparable qualifications, comparable positions, and comparable organization	s to help determine CEO compensation.
Annual CEO performance reviews are documented and considered by the Boa	rd when approving compensation.
15B - Other Officers and Key Employee Compensation decisions are based on	documented annual performance
evaluations, supervisor recommendations, surveys of comparable compensati	on, and budget expectations approved by
the Board.	
•	

Schedule O (Form 990) 2008	Page 4
Name of the organization	Employer identification number
Girl Scouts Susitna Council	92 6000179
Policies Disclosure	
Policies - Disclosure	
Form 990, Part VI, Section C, Line 19	
Governing documents, conflict of interest policy, and financial state	ments are available to the public upon request.
•••••••••••••••••••••••••••••••••••••••	