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$_{\text{Form}}$ 990

Department of the Treasury

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

Internal Revenue Service

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

Open to Public Inspection

A	For the	2009 calendar year, or tax year beginning and ending	19							
В	Check if applicable	Please use IRS		D Employer identific	ation number					
	Addre	ss label or CTDI GCOITMG I OTITGTANA EAGH TNG								
1	Name	type		72-0	453615					
Ē	Instial		ı/suite	E Telephone number						
Ē	Termir	Specific		•	733-8220					
	Ameno	5,140,752.								
	Application	L MEW ORDERNS, DR / 0101		H(a) Is this a group re						
F Name and address of principal officer F Name and address of principal officer F Name and address of principal officer F Name and address of principal officer										
_		SAME AS C ABOVE		H(b) Are all affiliates inc	luded? Yes No					
		empt status X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527		If "No," attach a	list (see instructions)					
		e: > WWW.GSLE.ORG		H(c) Group exemption						
			_ Year (of formation: 1967 N	State of legal domicile: LA					
Р	art I	Summary		TMG DUTT DG	GTDT G OF					
çe	1	Briefly describe the organization's mission or most significant activities: GIRL SC								
Governance		COURAGE, CONFIDENCE, AND CHARACTER WHO MAKE Check this box ▶ ☐ if the organization discontinued its operations or disposed or								
Ver	3	Number of voting members of the governing body (Part VI, line 1a)	ii iiiOle	3	19					
ගී	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	19					
ళ	5	Total number of employees (Part V, line 2a)		5	151					
itie.	6	Total number of volunteers (estimate if necessary)		6	5275					
Activities &	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12		7a	0.					
⋖	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.					
				Prior Year	Current Year					
o	8	Contributions and grants (Part VIII, line 1h)		569,704.	540,801.					
Revenue	9	Program service revenue (Part VIII, line 2g)	266,525.	305,760.						
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and the	53,733.	21,327.						
u.	11	Other revenue (Part VIII, column (A), lines 5,760, 8c, 9c, 10c, and 11e		1,800,073.	<u>2,457,216.</u>					
	12	Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line)1/2)		2,690,035.	3,325,104.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1.3)		12,326.	15,821.					
	14	Benefits paid to or for members (Part IX, column (a) Tite 4)		0.065.100	0 200 022					
ses	15	Salaries, other compensation, employee benefits (Part 12 bolumn (A) (Res 5-10)	-	2,065,180.	2,398,933.					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)								
X) _b	Total fundraising expenses (Part IX, column (D), line 25) 246, 249.		1,594,990.	1,451,363.					
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	-	3,672,496.	3,866,117.					
	t .	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12	-	-982,461.	-541,013.					
<u></u>	19 3	Thevenue less expenses Subtract line to north line 12	Re	ginning of Current Year	End of Year					
ets (20	Total assets (Part X, line 16)	- 50	5,178,393.	4.762.205.					
Assets or	21	Total liabilities (Part X, line 26)		89,167.	157.101.					
Net A	22	Net assets or fund balances Subtract line 21 from line 20		5,089,226.	4,605,104.					
	art II	Signature Block								
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and state and complete. Declaration of preparer (other than officers is based on all information of which preparer has any known of the preparer has a preparer to the preparer to the preparer to the preparer has a preparer to the preparer to the preparer has a preparer to the	ements,	and to the best of my knowled	ge and belief, it is true, correct,					
		And I Walander	•	a						
Sig	gn	Jacquetine & Magarian		Sept	21,20/8					
He	re	Signature of gricer V Alaka is deser		Date V	•					
		Type or print name and title								
_		A D A	I Ch	eck if Prepare	er's identifying number					
Pai	id	Preparer's signature AMAN A THE CDA 9/3/10	sel	f- (see in:	structions)					
Pre	Preparer's Firm's name (or LAPORTE, SEHRT, ROMIG & HAND) EIN D11) 18383									
Us	e Only	yours if LAFORIE, SERRI, ROMIG & HAND self-employed), 111 WETERANS MEMORIAL BLVD., SUITE	3 60		40.000					
		address, and ZIP + 4 METAIRIE, LA 70005-4958		- I	504)835-5522					
Ma	av the I	RS discuss this return with the preparer shown above? (see instructions)		1	X Yes No					
	001 02-		ate ins	tructions.	Form 990 (2009)					

'ai	rt III Statement of Program Service Accomp		72-0453615	Pag
<u> </u>	Briefly describe the organization's mission			
	GIRL SCOUTING BUILDS GIRLS OF	COURAGE, CONFIDE	NCE, AND CHARACTER WHO	`
	MAKE THE WORLD A BETTER PLACE		NCD, AND CHARACTER WITE	<u>/</u>
	THE THE WORLD IT DUTTER THE			
	Did the organization undertake any significant program set	rvices during the year which were	not listed on Yes	v
	the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O		L t.es	Λ
	Did the organization cease conducting, or make significant	t changes in how it conducts, any	program services?	Y
	If "Yes," describe these changes on Schedule O	t changes in now it conducts, any	program services:	Λ
	Describe the exempt purpose achievements for each of the	ne organization's three largest prog	ram services by expenses	
	Section 501(c)(3) and 501(c)(4) organizations and section 4			
	allocations to others, the total expenses, and revenue, if an		_	
_	(Code) (Expenses \$ 2,912,78	7 including grants of \$) (Revenue \$ 2,762,9	76
	(Code) (Expenses \$ 2,912,78 GIRL SCOUTS IS THE WORLD'S PR			
			NUTURING ENVIROMENT,	
	GIRLS BUILD CHARACTER AND THE			I
	PARTNERSHIP WITH COMMITTED AD	·		
		LIKE STRONG VALUE		
	AND CONVICTION ABOUT THEIR OW			
	OF GIRL SCOUTING IS TO INSPIR			
	<u></u>		AT THEY MAY BECOME HAP	PY
	AND RESOURCEFUL CITIZENS.			
	**			
	(Code.) (Expenses \$	including grants of \$) (Revenue \$	
		<u>.</u>		
			 -	

			<u> </u>	
	(Code:) (Expenses \$	including grants of \$) (Revenue \$	
				•
	Other program services (Describe in Schedule O)			-
_	(Expenses \$ including grants of \$) (Revenue	\$)	

			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		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 similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			Ì
	Part VI	ŀ		
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	1		
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		ĺ	ł
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	l		
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	ļ		
	Schedule D, Parts XI, XII, and XIII	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X		ļ <u>.</u>	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? 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	l		7.7
	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 a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		1	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
	1c and 8a? If "Yes," complete Schedule G, Part II	18	-	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	complete Schedule G, Part III	19	-	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	990	3000)
		LOM	930	2009)

Form 990 (2009) GIRL SCOUTS LOUISIANA EAST, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? 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 lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	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	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		<u>X</u>
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		<u> X</u>
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? 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?			7.5
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			7.7
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			٠ <u>-</u>
	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?			v
	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		<u> X</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	00		v
	If "Yes," complete Schedule R, Part V, line 2	_36_		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	х	
	Note. All Form 990 filers are required to complete Schedule O	Form		5UU0/
			~~~ .	

009) GIRL SCOUTS LOUISIANA EAST, INC.
Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Amual Summary and Transmittal of			
	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			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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  2a 151			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b_	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	_		v
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		<u>X</u>
	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	40		Х
L	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	-	<u> </u>
D	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			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		<u>x</u>
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 receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
	provided to the payor?	7a	Х	
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
	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	<b>-</b> -		v
	benefit contract?	<u>7e</u> 7f		X
f		7g	Х	
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	<u>/9</u> 7h	X	<del>                                     </del>
e II	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
٠	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			]
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter.	i		
а	Gross income from members or shareholders	l		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	i		
	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	F	000	(0000)
		torm	<b>550</b> (	(2009)

Form 990 (2009) GIRL SCOUTS LOUISIANA EAST, INC. 72-0453615 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body  1a 1	<u>9</u>					
b	Enter the number of voting members that are independent .	<u>9</u>					
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?						
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		_X_			
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		<u>X</u>			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the						
	governing body?	7a		<u>X</u>			
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	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9_		<u> </u>			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		,				
			Yes	No			
10a	Does the organization have local chapters, branches, or affiliates?	10a		<u>X</u>			
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?	10b					
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X				
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
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 rise						
	to conflicts?	12b	X				
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
	ın Schedule O how this is done	12c	Х				
13	Does the organization have a written whistleblower policy?	13	X				
14	Does the organization have a written document retention and destruction policy?	14	Х				
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	Х				
b	Other officers or key employees of the organization	15b	X				
_	If "Yes" to line 15a or 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 with a						
	taxable entity during the year?	16a		X			
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					
	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed NONE						
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	e tor					
	public inspection. Indicate how you make these available. Check all that apply						
	Own website						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	incial				
	statements available to the public.	_a					
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiz	ation.					
	JACKIE ALEXANDER - 504-733-8220 841 SOUTH CLEARVIEW PARKWAY, NEW ORLEANS, LA 70121-3119						
	841 SOUTH CLEARVIEW PARKWAY, NEW ORLEANS, LA 70121-3119	Form	990 /	2009)			

932006 02-04-10

## 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. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from 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) Average		(C) Position					( <b>D)</b> Reportable	<b>(E)</b> Reportable	(F) Estimated
	hours per week	<u> </u>	(check all that a			apply)		compensation from the	compensation from related organizations	amount of other compensation
	Week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
JACQUELYN S. DANIELS	1 00	v		х				0	0.	
CHAIR LINDA LAW CLARK	1.00	A		A				0.	0.	0
FIRST VICE CHAIR	1.00	x		X				0.	0.	0
MELINDA L. BOURGEOIS	1.00	1							<u>``</u>	
SECOND VICE CHAIR	1.00	x		x				0.	0.	0
ROBYN MERRICK										-
SECRETARY	1.00	X	<u></u>	X				0.	0.	0
PEGGY T. ARMSTRONG										
TREASURER	1.00	X	L	X		<u> </u>		0.	0.	0
CURTIS CHENEY										
BOARD MEMBER	1.00	X	ļ					0.	0.	0
GLENNA FALLIN			}							
BOARD MEMBER	1.00	X	ļ	_			ļ	0.	0.	0
PATRICIA DAY	1 00	,,							_	•
BOARD MEMBER	1.00	A	<u> </u>					0.	0.	0
DURINDA L. ROBINSON BOARD MEMBER	1.00	v						0.	0.	0
CHERI GIOE	1.00	^				├	<del>                                     </del>	0.	0.	<u>_</u>
BOARD MEMBER	1.00	x						0.	0.	0
LYNDIA M.G. JONES										
BOARD MEMBER	1.00	x						0.	0.	0
ANN LEBLANC										
BOARD MEMBER	1.00	X						0.	0.	0
MYRLE LEBLANC										
BOARD MEMBER	1.00	X	<u> </u>			<u> </u>		0.	0.	0
ISABEL LORET		1								
BOARD MEMBER	1.00	X	L_	_		ļ	<u> </u>	0.	0.	0
LORI MITCHELL			}							_
BOARD MEMBER	1.00	X	<u> </u>			-		0.	0.	0
VERONICA OSBY	1 1 1 1									_
BOARD MEMBER	1.00	X	$\vdash$			$\vdash$		0.	0.	0
PERRY SHOLES	1.00							0.	0.	0
BOARD MEMBER	1.00	1	Ь	L	L	Щ.	Ц			Form <b>990</b> (2009

932007 02-04-10

'	the organization NONE	Contractors that received more than \$100,000 or	compensation from
	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited \$100,000 in compensation from the organization	to those listed above) who received more than	

	1 990 (2			OUISIANA	EAST, INC	· · · · · · · · · · · · · · · · · · ·	72-0453	615 Page <b>9</b>
Pai	rt VIII	Statement of Rever	nue		(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	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo	ts, and ve 1f	309,354.				
and	g	Noncash contributions included in lines  Total. Add lines 1a-1f	1a-11 \$		540,801.			
				Business Code 900099	305,760.			
Program Service Revenue	c d e		· · · · · · · · · · · · · · · · · · ·					
يِّ	f	All other program service revertotal. Add lines 2a-2f	enue	<b>•</b>	305,760.			
	3 4 5	Investment income (including other similar amounts) Income from investment of tal Royalties	x-exempt bond	proceeds	21,327.			21,327.
	С	Gross Rents Less rental expenses Rental income or (loss) Net rental income or (loss)	(i) Real	(ii) Personal				
	b	Gross amount from sales of assets other than inventory Less. cost or other basis and sales expenses	(i) Securities	(ii) Other				
		Gain or (loss)	L					
Other Revenue		Net gain or (loss) Gross income from fundraisin including \$ contributions reported on line Part IV, line 18	of	P				
ŧ.	b	Less: direct expenses	t	,				
		Net income or (loss) from fund Gross income from gaming ad Part IV, line 19	-	,				
		Less. direct expenses	t	·		<u> </u>		
	10 a	Net income or (loss) from gam Gross sales of inventory, less and allowances	returns	4196363.			<u>.</u>	
		Less cost of goods sold  Net income or (loss) from sale	s of inventory		2,380,715.	2,380,715.		· · · · · · · · · · · · · · · · · · ·
	11 a	Miscellaneous Revenu		Business Code 900099	76,501.	76,501.		
	C							
	d	All other revenue			76 501			
	e 12	Total. Add lines 11a-11d  Total revenue. See instructions.			76,501. 3.325,104.	2,762,976.	0.	21,327.
93200 02-04	9	TOTAL TOTOLOGO. OCC MISTINGUOTIS.	<del></del>		<u>.,,104.</u>			Form <b>990</b> (2009)

#### Part IX | Statement of Functional Expenses

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

D-	All other organizations must complete not include amounts reported on lines 6b,	(A)			
	8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and		Схренаса	general expenses	Схренаса
·	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	15,821.	15,821.		
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	115,474.	94,456.	13,978.	7,040.
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	1,877,921.	1,536,426.	226,995.	114,500.
8	Pension plan contributions (include section 401(k)				
-	and section 403(b) employer contributions)				
9	Other employee benefits	263,525.	214,972.	32,274.	16,279
10	Payroll taxes	142,013.	116,772.	16,778.	8,463
11	Fees for services (non-employees)			1	· · · · · · · · · · · · · · · · · · ·
	Management				
	Legal	3,837.		3,837.	
c	, · .	42,134.	-	42,134.	
	Lobbying				
е	D ( 1/ 1 0 D- 4/// 1 47				
f	Investment management fees				
g		59,867.		59,867.	
12	Advertising and promotion				
13	Office expenses	124,792.	85,058.	15,312.	24,422
14	Information technology				
15	Royalties				
16	Occupancy	408,302.	300,587.	107,715.	
17	Travel	77,725.	71,212.	4,531.	1,982
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	27,142.	17,173.	7,466.	2,503
20	Interest				
21	Payments to affiliates		•		
22	Depreciation, depletion, and amortization	146,399.	119,777.	17,696.	8,926
23	Insurance				
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	GIIDDI TEG	379,083.	296,852.	70,126.	12,105
b	DESIGNATION AND AND	83,101.	10,067.	73,034.	
c	BAD DEBT	61,101.	13,656.		47,445
d	MISCELLANEOUS	37,470.	19,958.	14,928.	2,584
e	TAXES AND LICENSES	410.		410.	
f					
25	Total functional expenses. Add lines 1 through 24f	3,866,117.	2,912,787.	707,081.	246,249.
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				

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			(A) Beginning of year	ŀ	(B) End of year
	1	Cash - non-interest-bearing	1,756,127.	1	1,228,469.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	161,086.	3	174,832.
		Accounts receivable, net	101,000.	4	174,032.
	4			7	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II		5	
	_	of Schedule L	<del></del>		
	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	122 075	7	100 052
Assets	8	Inventories for sale or use	133,875.	8	192,053. 9,430.
•	9	Prepaid expenses and deferred charges	4,268.	9	9,430.
	10a				
		basis Complete Part VI of Schedule D 10a 6,438,250.	0 500 550		2 474 650
	b	Less accumulated depreciation 10b 3,963,591.	2,590,558.	10c	<u>2,474,659.</u>
	11	Investments · publicly traded securities	532,479.	11	682,762.
	12	Investments - other securities See Part IV, line 11		12	<del></del>
	13	Investments - program-related See Part IV, line 11		13	<del></del>
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	5 450 202	15	4 560 005
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,178,393.	16	4,762,205.
	17	Accounts payable and accrued expenses	89,167.	17	103,989.
	18	Grants payable		18	11 443
	19	Deferred revenue		19	11,443.
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Ē	22	Payables to current and former officers, directors, trustees, key employees,			
Liabilities		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 to unrelated third parties		24	41 660
	25	Other liabilities Complete Part X of Schedule D	0.	25	41,669.
	26	Total liabilities. Add lines 17 through 25	89,167.	26	157,101.
		Organizations that follow SFAS 117, check here   X and complete			
es		lines 27 through 29, and lines 33 and 34.	4 500 660		4 200 216
auc	27	Unrestricted net assets	4,798,669.	27	4,382,316.
3ai	28	Temporarily restricted net assets	261,820.	28	194,051.
ᅙ	29	Permanently restricted net assets	28,737.	29	28,737.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here			
þ		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et/	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	<u>5,089,226.</u>	33	4,605,104.
	34	Total liabilities and net assets/fund balances	<u>5,178,393.</u>	34	4,762,205.

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

#### SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

#### Public Charity Status and Public Support

Employer identification number

OMB No 1545-0047

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

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

Open to Public Inspection

72~0453615 GIRL SCOUTS LOUISIANA EAST Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in ection 170(b)(1)(A)(iii). 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) 9 🗓 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III ) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated d ____ Type III - Other __ Type I b ___ Type II By 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 I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No 11g(ı) the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (iii) Type of (vi) Is the (iv) is the organization (v) Did you notify the (vii) Amount of (i) Name of supported (ii) EIN organization in col. organization in col. (i) listed in your organization in col. organization support (i) organized in the (described on lines 1-9 aovernina document? (i) of your support? U S.? above or IRC section (see instructions)) Yes Yes

932021 02-08-10

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for

Pa	Support Schedule for (Complete only if you checke	-			(b)(1)(A)(iv) an	d 170(b)(1)(A)(\	/i)
Sec	tion A. Public Support	<del></del>	· · · · · · · · · · · · · · · · · · ·			<del></del>	
	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and			1	(-,	1	
	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					į	
3	The value of services or facilities				·		
	furnished by a governmental unit to						
	the organization without charge			1			
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
•	by each person (other than a	;					ļ
	governmental unit or publicly						
	supported organization) included						1
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest,		1	ļ			
	dividends, payments received on						
	securities loans, rents, royalties						Ì
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on					<u> </u>	
10	Other income Do not include gain			İ			
	or loss from the sale of capital		1				
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10		<u> </u>				ţ
12	Gross receipts from related activities	, etc (see instruct	tions)			12	
13	First five years. If the Form 990 is fo	r the organization	's first, second, th	ırd, fourth, or fifth t	tax year as a section	on 501(c)(3)	
	organization, check this box and sto	p here			· · · · · · · · · · · · · · · · · · ·	·	
	ction C. Computation of Pub					1 1	
	Public support percentage for 2009 (	•	•	column (f))		14	9
	Public support percentage from 2008					15	- 9
16a	33 1/3% support test - 2009. If the c				14 is 33 1/3% or r	nore, check this bo	x and
	stop here. The organization qualifies	• •	-				. ▶∟
b	33 1/3% support test - 2008. If the c	-			l line 15 is 33 1/39	6 or more, check th	nis box
	and stop here. The organization qua						▶∟_
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac					art IV how the orga	nization
	meets the "facts-and-circumstances"					49	1004 -
b	10% -facts-and-circumstances tes	_					
	more, and if the organization meets t						e
	organization meets the "facts-and-cir						▝
<u>18</u>	Private foundation. If the organization	on did not check a	a box on line 13, 1	ba, 16b, 17a, or 17			
					Sch	edule A (Form 990	or <del>99</del> 0-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009

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

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

Schedule A (For	rm 990	or 990-E2	) 20 <u>09</u> G	IRL S	COUTS	S LOU	ISIANA	EAST	, INC.		<u>72-045</u>	<u>3615 F</u>	Page 4
Part IV Su	upplei	mental	Informa	tion. Cor	mplete th	his part to	provide the e	xplanatio	ns required	by Part II, line	0, Part II, line	e 17a or 17	b,
an	d Part I	II, line 12.	Provide a	ny other a	dditional	Information	on See instru	ictions					
•												-	
SCHEDULE	. A	PART	III.	LINE	12.	EXPL	ANATION	FOR	OTHER	INCOME:			
<del></del>					<u> </u>								
MISCELLA	NEO	IS TN	COME										
MIDCEPER	11150	<u> </u>	COME				-						
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## Schedule DS

(Form 990)

Department of the Treasury Internal Revenue Service

#### upplemental Financial Statements

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

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Employer identification number

Name of the organization

72-0453615 GIRL SCOURS LOUISTANA BAST TNC

Par	t I Organizations Maintaining Donor Advise		s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
		(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	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the org	ganization 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	pleasure) Preservation of an his	storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax 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		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per		
_	violations, and enforcement of the conservation easements i		└ Yes
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	
_	and section 170(h)(4)(B)(ii)?		<del></del>
9	In Part XIV, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organizationservation easements	tion's illiancial statements that describes	the organization's accounting for
Par	t III Organizations Maintaining Collections o	f Art. Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and b	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	the footnote to its financial statements that describes these	·	
b	If the organization elected, as permitted under SFAS 116, to		nce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	e, provide the following amounts relating to
	these items	·	•
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financia	
	the following amounts required to be reported under SFAS 1	16 relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		► \$ ► \$

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Schedule D (Form 990) 2009

Sche <b>Par</b>		OUTS LOUIS				or Othe		72-04 ar Asse			ge <b>2</b>
3	Using the organization's acquisition, accessi										
	(check all that apply)				-		-				
а	Public exhibition	d		Loan or exc	hange progra	ams					
b	Scholarly research	е		Other _							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	ney further t	the organizati	on's exe	mpt purpo	ose in Pari	t XIV		
5	During the year, did the organization solicit of										
	to be sold to raise funds rather than to be m								Yes		No
Par	t IV Escrow and Custodial Arran					s" to For	m 990, Pa	art IV, line	9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	ns or other as	sets not	included				
	on Form 990, Part X?		,					{	Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	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				<u> </u>		Yes	T	No
	If "Yes," explain the arrangement in Part XIV	o ooo, . a., .,								_	
Par		f the organization ar	swered	"Yes" to Fo	orm 990, Part	IV. line	10				
		(a) Current year		Prior year	(c) Two yea		(d) Three y	ears back	(e) Four	vears b	ack
1a	Beginning of year balance	(4) 0 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1		1-/ /		<u> </u>	,	
b	Contributions			*			<del></del>				
_	Net investment earnings, gains, and losses	,									
d	Grants or scholarships		-		<u> </u>						
	Other expenditures for facilities										
	and programs		Ì								
f	Administrative expenses		-		1						
	End of year balance		ļ		· · · · · · · · · · · · · · · · · · ·				-		
2	Provide the estimated percentage of the year	r and halance held s	1		<del></del>	1					
a	Board designated or quasi-endowment	oria balarica riola e	 %								
b	Permanent endowment	%									
c	· · · · · · · · · · · · · · · · · · ·	^~ %									
-	Are there endowment funds not in the posse	· •	ation the	at are held a	and administe	ered for t	the organiz	zation			
-	by:	,00.011 01 tillo 01 garile							٦	Yes	No
	(i) unrelated organizations								3a(ı)		
	(ii) related organizations								3a(II)	<u> </u>	
h	If "Yes" to 3a(ii), are the related organization	s listed as required o	on Sched	dule R2					3b		
4	Describe in Part XIV the intended uses of the	•							, ,,,		
	t VI Investments - Land, Building				). Part X. line	10					
	Description of investment	(a) Cost or o		1	t or other		ccumulate	ed	(d) Book	value	
	Description of investment	basis (investi		, , ,	(other)		preciation		(4) 5001	14140	
1a	Land				8,845.		·		968	, 84	15 -
b	Buildings				31,060.	2.	936,7	10.	$\frac{300}{1,294}$		
5	Leasehold improvements			-,					-1-23	., <u>.</u> , .,	
d	Equipment			1.23	88,345.	1.	026,8	81.	211	, 46	4 .
	Other					-,	<u> </u>	<del> ' </del> -		,	
	. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	X. colur	nn (B). line	10(c) )	· · · · —			2,474	. 65	9.

Schedule D (Form 990) 2009

uncertain tax positions under FIN 48

Sche	dule D (	Form 990) 2009 GIRL SCOUTS LOUISIANA EAST,	INC	•		72-0	0453615	Page 4
Par	rt XI	Reconciliation of Change in Net Assets from Form 990 to			I State	ment	S	
1	Total re	evenue (Form 990, Part VIII, column (A), line 12)			1		3,325	104.
2	Total e	expenses (Form 990, Part IX, column (A), line 25)			2		3,866	
3		s or (deficit) for the year. Subtract line 2 from line 1			3		-541	
4		realized gains (losses) on investments			4			891.
5		ed services and use of facilities			5			
6	Investr	ment expenses			5			
7	Prior p	eriod adjustments			7			
8	Other (	(Describe in Part XIV)			3	·		
9	Total a	djustments (net) Add lines 4 through 8			9		56	891.
10_		s or (deficit) for the year per audited financial statements. Combine lines 3 and			<u>o                                    </u>		-484	122.
Par	t XII	Reconciliation of Revenue per Audited Financial Statemen	ts With	h Revenue	e per R	eturn		
1	Total re	evenue, gains, and other support per audited financial statements				1	3,381	<u>,995.</u>
2	Amour	nts included on line 1 but not on Form 990, Part VIII, line 12				]		
а	Net un	realized gains on investments	_2a	56	<u>,891.</u>	1		
b	Donate	ed services and use of facilities	2b			.		
С	Recove	eries of prior year grants	2c					
d		(Describe in Part XIV)	2d					001
е	Add Im	nes 2a through 2d				2e	56	891.
3		act line 2e from line 1				3	3,325	104.
4		nts included on Form 990, Part VIII, line 12, but not on line 1.	1 1					
а		ment expenses not included on Form 990, Part VIII, line 7b	4a			1 1		
b		(Describe in Part XIV.)	4b	•••		1 .		0
С		nes 4a and 4b				4c 5	3,325	104
5	Total re	evenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  Reconciliation of Expenses per Audited Financial Stateme	nte Wi	th Evnens	es ner			104.
	**	<del></del>	11113 1111	ui Experis	es per	1	3,866	117
1		expenses and losses per audited financial statements				<b>-</b> '-1	3,000	, <del>+ + / •</del>
2		nts included on line 1 but not on Form 990, Part IX, line 25: ed services and use of facilities	2a					
a			2b			1		
b	Other I	ear adjustments	2c			1 ]		
ی م		(Describe in Part XIV)	2d			1		
d		nes 2a through 2d				2e		0.
3		act line 2e from line 1				3	3,866	
4		nts included on Form 990, Part IX, line 25, but not on line 1						
a		ment expenses not included on Form 990, Part VIII, line 7b	4a					
		(Describe in Part XIV)	4b					
		nes 4a and 4b				4c		0.
5		expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				5	3,866	,117.
Pa	rt XIV	Supplemental Information						
		is part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III,						4, Part
X, lın	e 2, Par	t XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also compl	ete this p	part to provid	le any ad	ditional	ınformatıon	
							<u>.</u> .	
				·				
								_
				<del></del>				
						Sched	lule D (Form 9	90) 2009

HEDULE 1	orm 990)
SCH	(Forr

Department of the Treasury Internal Revenue Service

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

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

1545-0047	60
ş	0
OMB	2

Open to Public Inspection

Name of the organization CIDI SCOTTING LOTTING TAND	ניים דיים דיים	F O	, N.				Employer identification number 72-0453615
Part   General Information on Grants and Assistance	and Assistance	1 7 005					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the	e amount of the grants	s or assistance, the	e grantees' eligibilit	y for the grants or as	sistance, and the selec	: {
	stance?	•	:				X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States  Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990. Part IV, line 21, for any	ocedures for mon	toring the use of grant	t funds in the Unite	omplete if the org	anization answered "	Yes to Form 990. Part	IV. line 21. for any
٦	\$5,000 Check the	s box if no one recipies	nt received more tl	han \$5,000 Use P.	art IV and Schedule I-	1 (Form 990) if addition	nal space is needed
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations	and government o	rganizations					<b>A A</b>
4	uction Act Notice	, see the Instructions	s for Form 990.				Schedule I (Form 990) 2009

24

72-0453615

Schedule I (Form 990) 2009 GIRL SCOUTS LOUISIANA EAST, INC.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of non-	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
DITES ASTSTANCE, GIRLS & ADILITS	1235	15 821	_ ·	d Z	
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	ide the information	n required in Part I,	line 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: THE CO	COST OF ME	MEMBERSHIP F	FOR EACH GIRL	R IS A \$12	
FEE TO GIRL SCOUTS USA. IF A GIRL	CANNOT	AFFORD DUES,	S, A FINANCIAL	CIAL AID	
REQUEST FORM MUST BE COMPLETED. U	UPON APPROVAL,	OVAL, THE	GIRL	IS REGISTERED IN	
THE MEMBERSHIP DUES SYSTEM AS A GI	GIRL SCOUT	AND THE	FINANCIAL AID	ED IS	
RECORDED ON THE DAILY RECEIPTS RECAP	Ţ	OFFSET THE A	AMOUNT DUE	TO GIRL	
SCOUTS USA.					

#### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Information to Form 990**

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

GIRL SCOUTS LOUISIANA EAST, INC.

Employer identification number 72-0453615

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PLACE.
FORM 990, PART VI, SECTION B, LINE 11: THE FINANCE COMMITTEE WILL REVIEW
THE FORM 990. ONCE IT HAS BEEN REVIEWED, IT WILL BE PRESENTED TO THE BOARD
FOR APPROVAL. UPON APPROVAL, THE FORM 990 WILL BE SUBMITTED TO THE
INTERNAL REVENUE SERVICE.
FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION PERIODICALLY
REVIEWS ITS CONFLICT OF INTEREST POLICY TO ENSURE THE ORGANIZATION IS
OPERATING IN A MANNER CONSISTENT WITH IT'S EXEMPT PURPOSE. A DISCLOSURE
STATEMENT IS SUBMITTED ANNUALLY BY EACH MANAGEMENT LEVEL EMPLOYEE AND EACH
MEMBER OF THE BOARD TO DISCLOSE ANY SITUATIONS THAT MAY GIVE RISE TO A
CONFLICT OF INTEREST.
FORM 990, PART VI, SECTION B, LINE 15: ANY PERSON COMPENSATED HAS A JOB
DESCRIPTION WHICH IS SENT TO GIRL SCOUTS USA TO BE RANKED ACCORDINGLY.
BASED ON THAT RANKING, THE JOB IS PLACED IN A SALARY RANGE. THIS
INFORMATION IS SENT BACK TO THE ORGANIZATION, THE ORGANIZATION WILL THEN
COMPENSATE THOSE POSITIONS WITHIN THOSE RANGES, ALL CURRENT EMPLOYEES FALL
WITHIN THEIR ASSIGNED RANGES.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING
DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE
AVAILABLE TO THE PUBLIC UPON REQUEST.

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

Schedule O (Form 990) 2009

#### SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Information to Form 990**

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization  GIRL SCOUTS LOUISIANA EAST, INC.	Employer identification number 72-0453615
FORM 990, PART XI, LINE 2C	
THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONS	IBILITY FOR AUDIT
OVERSIGHT AND THE SELECTION OF INDEPENDENT AUDITORS.	· · · · · · · · · · · · · · · · · · ·
	1817

Form 886	3 (Rev 4-2009)			Page 2
• If you	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	×		<b>▶</b> X
	ly complete Part II if you have already been granted an automatic 3 month extension on a previously filed		8868	
	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)			
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	pies n	eeded)	
Type or	Name of Exempt Organization	Empl	oyer identifica	ation number
print	GIRL SCOUTS LOUISIANA EAST, INC.	7	2-04536	15
File by the extended due date for filing the	Number, street, and room or suite no. If a P O box, see instructions P.O. BOX 10800	For IF	S use only	
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW ORLEANS, LA 70181			
X Fo	ripe of return to be filed (File a separate application for each return) rm 990 Form 990-EZ Form 990 T (sec. 401(a) or 408(a) trust) Form 1041 A rm 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	=	rm 5227 [ rm 6069	Form 8870
STOP: D	o not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	d Form 8868,	
Telepi If the If this box 4 I re 5 Fo	ooks are in the care of   841 SOUTH CLEARVIEW PARKWAY - NEW ORLEAr none No  504-733-8220  FAX No  organization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) if the lift it is for part of the group, check this box and attach a list with the names and EINs of all equest an additional 3-month extension of time until NOVEMBER 15, 2010  To calendar year 2009, or other tax year beginning and ending his tax year is for less than 12 months, check reason initial return Final return	is is for memb	the whole gro	▶ □
	ate in detail why you need the extension			
	LL INFORMATION NECESSARY TO PREPARE A COMPLETE AND ACAS NOT YET BEEN RECEIVED.	CUR	ATE TAX	RETURN
	his application is for Form 990 BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nrefundable credits. See instructions	8a	<b>S</b>	
	his application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	- Ca	<u> </u>	
-	payments made include any prior year overpayment allowed as a credit and any amount paid			
	reviously with Form 8868	8b	\$	
	lance Due Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	1		
	th FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	N/A
	Signature and Verification			
Under per	nalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to th correct, and complete, and that I am authorized to prepare this form	e best o	f my knowledge	and belief,
Signature	and in The 111 Min man Via Day	Date	× 8-10	-10
				368 (Rev 4-2009)

LaPORTE SELECT MOMIG & HAND 111 Veterans Blvd., Suite 600, Metairie, LA 70005

923832 05-26-09

## 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

• If yo	u are filing for an Automatic 3-Month Extension, complete only Part I and check this box		)	<u> </u>
• If yo	u are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form)		
Do no	t complete Part II unless you have already been granted an automatic 3-month extension on a previously fil	ed For	m 8868	
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed)			
A corp	oration required to file Form 990-T and requesting an automatic 6-month extension check this box and com	plete		
Part I	'		)	<b></b>
All oth	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	extens	sion of time	
to file i	ncome tax returns			
noted (not au you m	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronication at month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or course submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Charities & Nonprofits.	cally if nsolida	(1) you want the a ted Form 990-T	additional
Туре	Name of Exempt Organization	Empl	oyer identification	n number
print			0.450615	
File by ti	GIRL SCOUTS OF LOUISIANA EAST, INC.		2-0453615	<u> </u>
due date	Number, street, and room or suite no. If a P.O. box, see instructions			
return S	ec			
	NEW ORLEANS, LA 70181			
Check	type of return to be filed (file a separate application for each return)			
	Form 990 Form 990-T (corporation) Form 47	720		
===	Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 52			
==	Form 990 EZ Form 990-T (trust other than above) Form 60			
	Form 990 PF			
	JACKIE ALEXANDER			
• The	books are in the care of > 841 SOUTH CLEARVIEW PARKWAY - NEW ORLEA	NS,	LA 70121	3119
Tel	ephone No ▶ <u>504-733-8220</u> FAX No ▶			
• If t	ne organization does not have an office or place of business in the United States, check this box			
• If t	nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)			
box 🕨	If it is for part of the group, check this box 🕨 🔲 and attach a list with the names and EINs of all	memb	ers the extension	will cover
1	I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time unit		71.	
	AUGUST 15, 2010 , to file the exempt organization return for the organization named a	above	The extension	
	is for the organization's return for  ▶ X calendar year 2009 or			
	► Later dairy year 2005 or tax year beginning , and ending			
	tax year degining, and ending		<del></del>	
2	If this tax year is for less than 12 months, check reason Initial return Final return		Change in accou	nting period
3a	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	3a	\$	
	If this application is for Form 990 PF or 990-T, enter any refundable credits and estimated			
	tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	<del></del>
	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	'		
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)			AT / 7
	See instructions	3c	\$	N/A
Cauti	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879	EO for payment I	nstructions
	E. D Ash and Danner and Deduction Ash Nation and Instructions		Form 9066	(Rev. 4-2009