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Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

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

Inspection ?

AF	or the	2011 calendar year, or tax year beginning OCT 1, 2011 and ending	SEP 30, 2012	- ·
В	Check if	C Name of organization	D Employer identific	cation number
a	pplicable	GIRL SCOUTS OF THE GREEN AND WHITE		
	Address change	MOUNTAINS		
	Name change	Doing Business As	02-0	243160
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)  Room/su		r
	Termin- ated	PO BOX 10832	603-	627-4158
	Amende return	Crty or town, state or country, and ZIP + 4	G Gross receipts \$	8,522,797.
	Applica-	BEDFORD, NII 03110 0032	H(a) Is this a group re	eturn
	pending	F Name and address of principal officer:PATRICIA MELLOR	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inc	luded? LYes L No
17	Tax-exer	inpt states: (====================================	If "No," attach a	list. (see instructions)
		: ► WWW.GIRLSCOUTSGWM.ORG	H(c) Group exemptio	
		rganization: X Corporation Trust Association Other V	ear of formation: 1958 N	State of legal domicile: NH
Pa	art I	Summary		
ø	1 B	nefly describe the organization's mission or most significant activities: GIRL SCO	JTS OF THE GR	EEN AND
Governance		THITE MOUNTAINS IS RECOGNIZED THROUGHOUT NEW		
ern	2 0	theck this box 🕨 📖 if the organization discontinued its operations or disposed of m		ssets.
Š	3 1	lumber of voting members of the governing body (Part VI, line 1a)	3	19
ತ	4 N	lumber of independent voting members of the governing body (Part VI, line 1b)	4	19
es	5 T	otal number of individuals employed in calendar year 2011 (Part V, line 2a)	5	322
Activities &	1	otal number of volunteers (estimate if necessary)	6	5530
Act	1	otal unrelated business revenue from Part VIII, column (C), line 12		0.
	bΛ	let unrelated business taxable income from Form 990-T, line 34		0.
			Prior Year	Current Year
CB)	t	Contributions and grants (Part VIII, line 1h)	552,253.	436,862.
<b>E</b>	1	rogram service revenue (Part VIII, line 2g)	978,875. 404,342.	1,001,630.
<b>₩</b>	1	envestment income (Part VIII, column (A), lines 3, 4, and 7d)	3,485,266.	190,304.
$\overline{z}$		other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,420,736.	3,437,180. 5,065,976.
CHNHAME	+	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	91,190.	111,854.
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	91,190.	0.
EBosses33	1	denefits paid to or for members (Part IX, column (A), line 4)	3,005,065.	2,830,608.
യ്ക	1	dalanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,003,003.	2,030,000.
ens		Professional fundraising fees (Part IX, column (A), line 11e)		
		,,,,,	2,131,472.	1,961,260.
20		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	5,227,727.	4,903,722.
ಡು	18 1	otal expenses. Add lines 13-17 (must equal Part X column (A), line 25)  Revenue less expenses. Subtract line 18 from line 12	193,009.	162,254.
- 2	119		Beginning of Current Year	End of Year
sts			8,695,609.	8,974,460.
Sale	20 T	otal assets (Part X, line 16)	2,160,032.	1,941,235.
Net Assets or   Fund Balances	21 7	otal liabilities (Part X, line 26)  let assets or fund balances. Subtract line 21 from line 20 - 1 - 1 - 1 - 1	6,535,577.	7,033,225.
P	22 N	Signature Block	0,000,00	.,033,2231
		ties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of m	y knowledge and belief, it is
		, and complete. Declaration of preparer (other than officer) is based on all information of which prep		
		Martha R marley	2/13/1	<del></del>
Sig	.n.	Signature of officer	Date	
He		MARTHA MANLEY, SECRETARY		
		Type or print name and title	<u> </u>	
_		Print/Type preparer's name Preparer's signature	FEB 0 8 2015 Cheek	PTIN
Pai		RUSTY MOSCA, CPA CLASTIC CLASTIC CONTROL CONTR	LEB OO SOID	₩ ₽00366101
		Firm's name NATHAN WECHSLER & COMPANY, P.A.	Firm's EIN	02-0327524
Use	H	Firm's address 70 COMMERCIAL STREET, SULTE 401		
		CONCORD, NH 03301	Phone no. 6	03-224-5357
Ma	v the IR	S discuss this return with the preparer shown above? (see instructions)		X Yes No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2011)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

9-16

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

(Expenses \$ including grants of \$

Total program service expenses ► 4,079,721.

Form **990** (2011)

) (Revenue \$

Part IV | Checklist of Required Schedules

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A.  Is the organization required to complete Schedule B, Schedule of Contributors?  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  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II  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  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV  Did the organization, directly or through a related organization, hold assets in temporanly restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  The organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	x x x x x
2 Is the organization required to complete Schedule B, Schedule of Contributors?  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  4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II  5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical areas, or historic structures? If "Yes," complete Schedule D, Part III  9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  9 Did the organization directly or through a related organization services? If "Yes," complete Schedule D, Part IV  10 Did the organization, directly or through a related organization, hold assets in temporally restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	x x x x
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as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	
Part VI <u>11a X</u>	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	37
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<u> </u>
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	
Part X, line 16? If "Yes," complete Schedule D, Part IX	—
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FiN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  11f X	
, , , , , , , , , , , , , , , , , , ,	<del></del>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete  Schedule D. Parts XI. XII. and XIII  12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes." and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 12b	X
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional  13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	X
Didd	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	
investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	
or more? If "Yes," complete Schedule F, Parts I and IV	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	
or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	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, Parts III and IV	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	
1c and 8a? If "Yes," complete Schedule G, Part II	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	X
complete Schedule G, Part III	<u> </u>
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	x
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	

Form 990 (2011) MOUNTAINS
Part IV Checklist of Required Schedules (continued)

02-0243160 Page 4

	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		-55	
2.	United States on Part iX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
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		ŀ	
	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		
	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		X
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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27_		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):		İ	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	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 (or a family member thereof) 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			3.5
	contributions? If "Yes," complete Schedule M	_30_		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	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			<b>.</b>
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		x
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<del>                                     </del>	
34	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
		338	<u> </u>	<del>  ^</del>
Ъ	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		$ _{\mathbf{x}}$
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	<u> </u>		† <del></del>
50	If "Yes," complete Schedule R, Part V, line 2	36	1	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			† <del></del> -
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	<u> </u>	1	T
	Note. All Form 990 filers are required to complete Schedule O	38	X	

om	GIRL SCOUTS OF THE GREEN AND WHITE  990 (2011) MOUNTAINS 02-0243	160	Р	age 5
	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
ь	The state of the s			ł
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	ļ <sup>*</sup>
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 322			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
32	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	•	x
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	-		<u> </u>
74	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
h	If "Yes," enter the name of the foreign country:			
	See instructions for 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		Х
	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?	5c		
6a	the state of the s			
Oa	any contributions that were not tax deductible?	6a		х
h	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).		-	1
-	Dill and the second of the sec	7a		x
b	Market and the second of the s	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
·	to file Form 8282?	7c		X
А	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
q	16.11 and 16.12 and 16.12 and 16.13	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	1	
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
ь	District the second of the sec	9b		
10	Section 501(c)(7) organizations. Enter:			
а	A STATE OF THE STA		İ	
ь	ADL	1		
11	Section 501(c)(12) organizations. Enter:	1		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
	amounts due or received from them.)		1	
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
_	· · · · · · · · · · · · · · · · · · ·	-		

X

13a

14a 14b

13b

Section 501(c)(29) qualified nonprofit health insurance issuers.

a Is the organization licensed to issue qualified health plans in more than one state? .....

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

Note. See the instructions for additional information the organization must report on Schedule O **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans

MOUNTAINS

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Form 990 (2011) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 19			
	If there are material differences in voting rights among members of the governing body, or if the governing		- 1	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent		1	
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		X
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 governing documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>X</u>
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		_X_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	<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?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►NH			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar	d finar	ncial	
	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ition 🕨	<b>-</b>	
	ANDREA EWING, CHIEF FINANCIAL OFFICER - 603-627-4158			
	ONE COMMERCE DRIVE, BEDFORD, NH 03110			

#### Form 990 (2011) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

- 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 hours per	(do box	not c	Posi heck iss period a d	ition more	than	one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week (describe hours for related organizations in Schedule O)	Individual trustes or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) SUSAN DONNELLY										
PRESIDENT	6.40	X		X		<u> </u>		0.	0.	0.
(2) PATRICIA CASEY					ŀ	İ				_
1ST VICE PRESIDENT	2.70	X	_	X		<u> </u>		0.	0.	0.
(3) DENISE VAILLANCOURT										
2ND VICE PRESIDENT	1.60	X		X				0.	0.	0.
(4) SHANNON CHANDLEY										
3RD VICE PRESIDENT	2.50	X	<u> </u>	X				0.	0.	0.
(5) BARBARA BARRETT										
TREASURER	2.00	X		X		_		0.	0.	0.
(6) MARTHA MANLEY										_
SECRETARY	2.30	X		X		_		0.	0.	0.
(7) PETER BERGIN	1		1		İ					
DIRECTOR	0.60	X	_				<u> </u>	0.	0.	0.
(8) EMILY BOYD						ļ				١
DIRECTOR	0.50	X	<u> </u>			<u> </u>	-	0.	0.	0.
(9) KIMBERLY CASEY										
DIRECTOR	0.70	X	<u> </u>			<u> </u>	<u> </u>	0.	0.	0.
(10) SARAH CHAFFEE		1	ŀ	ļ						
DIRECTOR	4.00	X	<u> </u>	ļ		ļ	_	0.	0.	0.
(11) ANNE EDWARDS				l		1				
DIRECTOR	0.90	X	┞	<u> </u>	<u> </u>	ļ		0.	0.	0.
(12) ALYSON GENOVESE					Ì					
DIRECTOR	0.30	X	<u> </u>	_	<u> </u>	ļ	<u> </u>	0.	0.	0.
(13) JUDITH HENKIN	1									
DIRECTOR	0.50	X	ļ	<u> </u>	<u> </u>	L	ļ	0.	0.	0.
(14) PATRICIA MCMAHON						İ				
DIRECTOR	0.60	X	<u> </u>	ļ	<u> </u>	<u> </u>	_	0.	0.	0.
(15) KAREN NADEAU		Ì								
DIRECTOR	0.70	X	_	<u> </u>	ļ	_	<u> </u>	0.	0.	0.
(16) JUDITH SILVERBERG										
DIRECTOR	0.90	X	_	├-	$\vdash$	↓	1	0.	0.	0.
(17) DON SOMMESE										
DIRECTOR	1.00	<u> X</u>	<u> </u>	<u> </u>	<u> </u>		<u></u>	0.	0.	5 000 (22.4)
132007 01-23-12										Form <b>990</b> (2011)

Form 990 (2011) MOUNTAINS 02-024								02-0243	160	Page 8	
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)									ees (continued)		
` (A) Name and title .	(B) Average hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				l than is bol	one than	(D) Reportable compensation from the	(E) Reportable compensation from related	Est amo	(F) imated ount of other
	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		organizations (W-2/1099-MISC)	fro orga and	ensation om the inization related nizations						
(18) WILLIAM WILKES DIRECTOR	1.10	x						0.	0.		0.
(19) LEE WILLIAMS	1.10							0.	0.		0.
DIRECTOR (20) FRANCES BELCHER								0.	0.		
DIRECTOR (21) CONSTANCE MORRISON	0.20										0.
DIRECTOR (22) KELLIE WARDMAN	0.50							0.	0.	-	0.
DIRECTOR (23) PATRICIA MELLOR	0.20	X		_				0.	0.		0.
CHIEF EXECUTIVE OFFICER	45 00     77     114 430				0.	Ε	<u>,200.</u>				
1b Sub-total						<b>&gt;</b>		114,438.	0.	6	,200. 0.
d Total (add lines 1b and 1c)  2 Total number of individuals (including but	····			 		) w/e		114,438.	0.	[ 6	,200.
compensation from the organization				, G &I						1,	1 Yes No
3 Did the organization list any former officer											
line 1a? If "Yes," complete Schedule J for 4 For any individual listed on line 1a, is the s	um of reportab	le co	omp	ensa	ation	an	d otl	her compensation from	the organization	3	<u> </u>
and related organizations greater than \$15  Did any person listed on line 1a receive or	accrue compe	nsat	ion f	rom	any	uni			idual for services	4	X
rendered to the organization? If "Yes," con Section B. Independent Contractors	nplete Schedu	le <u>J 1</u>	for si	uch	pers	son			· ·	<u> 5</u>	X
Complete this table for your five highest countries organization. Report compensation for the organization.		-								sation fr	om
(A) Name and busines			INC					(B) Description of s		(C) Compen	
				,							
							_				
2 Total number of independent contractors	(including but r	not li	mite	d to	tho	se li	stec	d above) who received n	nore than		
\$100,000 of compensation from the organ	nization >				(	0		<u> </u>		Form 9	990 (2011)

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				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
fts, Grants r Amounts	b b	Federated campaigns 1a Membership dues 1b Fundraising events 1c	9,936.				310, 01 314
Contributions, Gifts, Grants and Other Similar Amounts	е	Related organizations 1d Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above 1f	426,926.				
E E	_	Noncash contributions included in lines 1a-1f \$	35,682.	426 262			1
<u>0 e</u>	<u>h</u>	Total. Add lines 1a-1f		436,862.			
Program Service Revenue	2 a b	CAMPING & PROGRAM FEES	Business Code 900099	1,001,630.	1,001,630.		
n S	С						
Rev	d		-				
õ	е			<u> </u>		<del></del>	<del> </del>
_		All other program service revenue		1,001,630.			
-+	<u>q</u> 3	Total. Add lines 2a-2f Investment income (including dividends, inf		1,001,030.			<del> </del>
	4	other similar amounts)		99,641.			99,641.
	5	Royalties	(ii) Personal				
	6 a	Gross rents	).			•	
ļ	b		),				
	С	Rental income or (loss) 13,200	0.				
	d	Net rental income or (loss)	_ <u>,</u>	13,200.		· -	13,200.
	7 a	Gross amount from sales of (i) Securitie					
		assets other than inventory 84,19	7. 82,500.				
	b	Less: cost or other basis					,
ĺ		and sales expenses 71,620	$\frac{4,414}{79,096}$	-			
	_	Gain or (loss) 12,57'		90,663.			90,663.
İ	di O =	Net gain or (loss)	·	30,003.		<del></del>	30,003.
92	o a	including \$ of					
Other Reven		contributions reported on line 1c). See					
æ		Part IV, line 18	a		1		ì
E	ь	Less: direct expenses	b				
9		Net income or (loss) from fundraising event	s <b>&gt;</b>				
ł		Gross income from gaming activities. See					
ĺ		Part IV, line 19	a	ļ ·	ļ		
i		Less: direct expenses	b				
		Net income or (loss) from gaming activities	. <u>,                                 </u>	ļ			<u> </u>
	10 a	Gross sales of inventory, less returns	5510105				
		and allowances	a 6718496.	_		•	
		Less cost of goods sold	ь 3380787.	2 227 700	2 227 700		]
	С	Net income or (loss) from sales of inventory		3,337,709.	3,331,/09.		<del> </del>
}	44 -	Miscellaneous Revenue	Business Code 900099	43,119.			43,119.
		LAPSED TROOP FUNDS LOGGING AND FOREST MAI		33,203.			33,203.
1		MISCELLANEOUS/DAM REMO		9,949.			9,949.
		All other revenue		7,7=7.			7,727.
		Total. Add lines 11a-11d		86,271.			<del>                                     </del>
_	12	Total revenue. See instructions.		5,065,976.		0.	289,775.
13200 01-23							Form <b>990</b> (2011)

#### Form 990 (2011)

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

сотр	Check if Schedule O contains a respons	es to any avestion in this	Port IV		
		(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Managèment and general expenses	Fundraising expenses
1	Grants and other assistance to governments and			•	
	organizations in the United States. See Part IV, line 21			-	<u> </u>
2	Grants and other assistance to individuals in	444 054	444 054		
	the United States. See Part IV, line 22	111,854.	111,854.		
3	Grants and other assistance to governments,	;			,
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		10.000	00 000	20 050
	trustees, and key employees	128,200.	12,820.	83,330.	32,050
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		4 545 454	40.505	015 560
7	Other salaries and wages	2,182,428.	1,916,161.	48,707.	217,560
8	Pension plan accruals and contributions (include	101 255	0.4.5.4.5	50 600	41 500
	section 401(k) and section 403(b) employer contributions)	184,967.	84,648.	58,630.	41,689
9	Other employee benefits	132,530.	62,868.	39,944.	29,718
10	Payroll taxes	202,483.	171,159.	13,877.	17,447
11	Fees for services (non-employees):				
а	Management				
b	Legal	6,240.	5,185.	493.	562
С	Accounting	26,800.	22,269.	2,118.	2,413
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17			15.011	<del></del>
f	Investment management fees	17,241.		17,241.	
g	Other	66,867.	43,891.	17,466.	5,510
12	Advertising and promotion			1 212	
13	Office expenses	35,800.	32,160.	1,213.	2,427
14	Information technology				
15	Royalties				
16	Occupancy	281,863.	251,304.	29,529.	1,030
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	21,657.	14,208.	4,450.	2,999
20	Interest	93,951.	82,681.	11,270.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	300,044.	252,972.	21,754.	25,318
23	Insurance	125,215.	95,932.	13,523.	15,760
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	CUDDI TEC	373,728.	361,640.	3,287.	8,801
b	MD 3 3 CD OD M 3 M T O 3 T	226,989.	209,794.	12,046.	5,149
С	TELEPHONE & DATABASE	100,061.	88,493.	5,207.	6,361
d	THE DATE OF THEFT	86,205.	86,205.		
	All other expenses	198,599.	173,477.	10,030.	15,092
25	Total functional expenses. Add lines 1 through 24e	4,903,722.	4,079,721.	394,115.	429,886
26	Joint costs. Complete this line only if the organization				•
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				
					Form <b>990</b> (2011

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Form 990 (2011)
Part X | Balance Sheet

MOUNTAINS

Pai	rt X	Balance Sheet			
		,	(A) Beginning of year		(B) End of year
-	1	Cash - non-interest-bearing	1,596.	1	2,245.
	2	Savings and temporary cash investments	1,414,705.	2	1,248,224.
	3	Pledges and grants receivable, net	16,552.	3	18,756.
	4	Accounts receivable, net	38,575.	4	31,885.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			•
				5	
	6	of Schedule L		Ĭ	
	6	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
				6	
ţ	_	employees' beneficiary organizations (see instructions)		7	<del></del>
Assets	7	Notes and loans receivable, net	194,787.	8	291,137.
ä	8	Inventories for sale or use	73,691.	9	50,007.
	9	Prepaid expenses and deferred charges	75,051.	9	30,007.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 8,922,421.			
	١.	101 F 007 760	3,974,389.	40-	3,824,652.
			1,194,665.	100	1,500,680.
	11	Investments - publicly traded securities	838,106.		916,523.
	12	Investments - other securities. See Part IV, line 11	636,100.		910,343.
	13	Investments - program-related See Part IV, line 11		13	· · · · · · · · · · · · · · · · · · ·
	14	Intangible assets	948,543.	14 15	1,090,351.
	15	Other assets. See Part IV, line 11	8,695,609.		8,974,460.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	466,370.		405,804.
	17	Accounts payable and accrued expenses	400,370.	18	403,004.
	18	Grants payable	31,795.		25,876.
	19	Deferred revenue	JI, 133.		23,010.
	20	Tax-exempt bond liabilities		20 21	
Liabilities	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	<del></del>
ij	22	Payables to current and former officers, directors, trustees, key employees,			_
Lia		highest compensated employees, and disqualified persons. Complete Part II		_ ~	
		of Schedule L	1,581,436.	22	1,456,751.
	23	Secured mortgages and notes payable to unrelated third parties	1,301,430.	24	1,400,101.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
	1	parties, and other liabilities not included on lines 17-24). Complete Part X of	80,431.	25	52,804.
		Schedule D	2,160,032.		1,941,235.
	26_	Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117, check here	2,100,002.	20	1,741,233.
		lines 27 through 29, and lines 33 and 34.			
ĕ	0.7	Unrestricted net assets	5,068,916.	27	5,362,207.
<u>la</u>	27		263,418.		325,967.
8	28	Temporarily restricted net assets	1,203,243.		1,345,051.
n d	29	Permanently restricted net assets  Organizations that do not follow SFAS 117, check here	1,200,240.	23	<u> </u>
Ē					
9	200	complete lines 30 through 34.		30	•
set	30	Capital stock or trust principal, or current funds	<del></del>	31	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		32	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	6,535,577.	_	7,033,225.
	33	Total lightitude and not appets found helpapper	8,695,609.		8,974,460.
	34_	Total liabilities and net assets/fund balances	0,033,003.	<u> 34</u>	0,3/4,400.

Form	orm 990 (2011) MOUNTAINS 02-024316								
Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response to any question in this Part XI				X				
1	Total revenue (must equal Part VIII, column (A), line 12)	1 5	,06	5,9	<u> 76.</u>				
2									
3	Revenue less expenses. Subtract line 2 from line 1	3	<u> 16</u>	<u>54.</u>					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4 6	,53	<u>5,5</u>	<u>77.</u>				
5	Other changes in net assets or fund balances (explain in Schedule O)	5_	33	5,3	94.				
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6 7	,03	3,2	<u> 25.</u>				
Pa	t XII Financial Statements and Reporting								
	Check if Schedule O contains a response to any question in this Part XII	. <u> </u>	<u></u>	<u> </u>	<u>X</u>				
				Yes	No				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		'		1				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				] 				
2a	and the contract of the contra								
b	Were the organization's financial statements audited by an independent accountant?		2b	X					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a	audit,							
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u></u>				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sched	ule O.			i				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued or	on a			r				
	separate basis, consolidated basis, or both:				i				
	X Separate basis Consolidated basis Both consolidated and separate basis								
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	e Audit			i				
	Act and OMB Circular A-133?		3a		X				
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	d audit							
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b						
			Form	<b>990</b> (	2011)				

## SCHEDULE A (Form 990 or 990-EZ)

Name of the organization

# **Public Charity Status and Public Support**

2011

OMB No 1545-0047

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

Open to Public

Department of the Treasury Internal Revenue Service

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

GIRL SCOUTS OF THE GREEN AND WHITE

Inspection Employer identification number

		MOUNTAI	NS						02	2-0243160	
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this part	.) See inst	tructions.			
The organ	zation is not a	a private foundation l	because it is: (For lines 1	through 1	11, check	only one b	ox.)				
1 🗀	A church, co	nvention of churches	s, or association of chur	ches desc	ribed ın se	ction 170	(b)(1)(A)(i)	).			
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
з 🔲	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	· ·		perated in conjunction					(b)(1)(A)(iii	i). Enter tl	ne hospital's name,	
	city, and stat	<del>-</del>	•		•				•		
5 🗀	•		benefit of a college or ur	niversity ov	wned or op	perated by	a governr	mental unit	describe	ed in	
	section 170(b)(1)(A)(iv). (Complete Part II.)										
6 🗀			ent or governmental unit	t described	d in sectio	n 170(b)(1	)(A)(v).				
7	·		-					or from the	general p	oublic described in	
_	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)										
8 🗔			ection 170(b)(1)(A)(vi).	(Complete	Part II.)						
9 X	<del>-</del>		erves: (1) more than 33 1			rom contri	butions, m	nembership	o fees, an	d gross receipts from	
	-	-	nctions - subject to certa								
			exable income (less sect								
		509(a)(2). (Complete									
10 🔲	An organizati	on organized and op	erated exclusively to te	st for publi	ic safety. S	See sectio	n 509(a)(4	<b>4</b> ).			
11 🔲	An organizat	ion organized and op	erated exclusively for th	ne benefit d	of, to perfo	orm the fur	nctions of,	or to carry	out the	purposes of one or	
	more publicly	supported organiza	itions described in secti	on 509(a)(°	1) or section	on 509(a)(2	) See sec	ction 509(a	a)(3). Che	ck the box that	
	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.										
	a Type	। ь□	] Type II c	: 🔲 Тур	e III - Func	tionally int	egrated		d 🗀	Type III - Other	
e 🗔	By checking	this box, I certify tha	t the organization is not	controlled	directly o	r ındırectly	by one or	r more disc	qualified p	ersons other than	
	foundation m	nanagers and other t	han one or more publicly	y supporte	d organiza	ations desc	cribed in s	ection 509	(a)(1) or s	section 509(a)(2).	
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III			
		rganization, check th					••			L	
g			rganization accepted ar								
	(i) A perso	n who directly or ind	rectly controls, either al	one or tog	ether with	persons d	lescribed i	ın (ii) and (i	ıi) below,	Yes No	
	the gov	erning body of the su	upported organization?							11g(i)	
		•	described in (i) above?							. 11g(ii)	
	(iii) A 35%	controlled entity of a	person described in (i) of	or (ii) above	e?					11g(iii)	
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s).						
		<del> </del>	(C) Torres of	,		т		T			
(i) Name	of supported	(ii) EIN	(iii) Type of organization			(v) Did you		(vi) ls organization	tne on in col	(vii) Amount of	
org	anization	J	(described on lines 1-9		sted in your document?			(i) organiz U.S	ed in the	support	
		1	above or IRC section	Yes		ļ					
<u> </u>			(see instructions))	Yes	NO	Yes	No	Yes	No	· <del></del>	
			<del></del>			<del> </del>	· · · · · · · · · · · · · · · · · · ·	-			
		1			Į.	1		}			
									<u></u>		
				<del>                                     </del>	-	<del> </del>			<del></del>	<del></del>	
				<del>                                     </del>		<del>                                     </del>		-	$\vdash$	· · · · · · · · · · · · · · · · · · ·	
				ļ							
				<del> </del>			<del>                                     </del>	<del> </del>			
T-4-1				1							

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

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support (e) 2011 (f) Total (c) 2009 (d) 2010 Calendar year (or fiscal year beginning in) (a) 2007 **(b)** 2008 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .... 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 through 3 . .. 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) 6 Public support. Subtract line 5 from line 4 Section B. Total Support (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Calendar year (or fiscal year beginning in) (a) 2007 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	9
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	9
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3 stop here. The organization qualifies as a publicly supported organization	3% or more, check this l	box and ▶ 🗀
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 3 and stop here. The organization qualifies as a publicly supported organization		this box
17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.	n in Part IV how the org	anization
b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 1 more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.	6b, or 17a, and line 15	ıs 10% or
organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly support		•

Schedule A (Form 990 or 990-EZ) 2011

# Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support	ciow, picaso comp	ioto i art ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	409,082.	318,041.	474,074.	552,253.	436,862.	2190312.
	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	5489391.	6682661.	7595279.	7307426.	7724540.	34799297.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	5898473.	7000702.	8069353.	7859679.	<u>8161402.</u>	36989609.
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			_			0.
c	: Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6)						<u>36989609.</u>
	ction B. Total Support				· · · · · · · · · · · · · · · · · · ·		,· · · ·
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
-	Amounts from line 6	5898473.	7000702.	8069353.	7859679.	8161402.	36989609.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	132,098.	85,688.	95,062.	104,529.	112,841.	530,218.
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on	132,098.	85,688.	95,062.	104,529.	112,841.	530,218.
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)	6030571.	7086390.	8164415.	7964208.	8274243.	<u>37519827.</u>
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	zation,
_	check this box and stop here	<del>: : : : :</del>			· · · · · · · · · · · · · · · · · · ·	•	
$\overline{}$	ction C. Computation of Publ						00.50
	Public support percentage for 2011 (		=			15	98.59 %
	Public support percentage from 2010 ction D. Computation of Investigation					16	98.31 %
				12 polymp (6)		47	1 41 0
	Investment income percentage for 20	-				18	1.41 % 1.69 %
	Investment income percentage from a 33 1/3% support tests - 2011. If the						
198	more than 33 1/3%, check this box a						
t	33 1/3% support tests - 2010. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%,	and
20	line 18 is not more than 33 1/3%, che Private foundation. If the organization		-			-	······ <b>[</b> ]

# **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Open to Public Inspection

Name of the organization

GIRL SCOUTS OF THE GREEN AND WHITE MOUNTAINS

Employer identification number 02-0243160

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	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 (dunng 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 adv	sed funds
	are the organization's property, subject to the organization's		Mar Mar
6	Did the organization inform all grantees, donors, and donor a		e used only
	for charitable purposes and not for the benefit of the donor of		
	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	ion (check all that apply).	
-	Preservation of land for public use (e.g., recreation or e		stoncally important land area
	Protection of natural habitat		rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	n 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
ь	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	nodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements		Yes No
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) about	ve satisfy the requirements of section 17	O(h)(4)(B)(I)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describe	s the organization's accounting for
	conservation easements.	(A. 1.15.1.3.1.T	Oth Circilan At-
Pa	t III Organizations Maintaining Collections of		Jiner Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A		
	historical treasures, or other similar assets held for public ex		rance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descr		
Ь	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of p	ublic service, provide the following amounts
	relating to these items:		<b>.</b> .
	(i) Revenues included in Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre		iai gain, provide
	the following amounts required to be reported under SFAS		<b>.</b> .
а	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

	dule D (Form 990) 2011 MOUNTAI						<u>43160</u>		
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or O	ther Simil	ar Asse	ts (continue	ed)	
3	Using the organization's acquisition, accessing	on, and other record	s, check any of the	following that are	a significant	use of its	collection rte	ems	
	(check all that apply):								
а									
	b Scholarly research e Other								
c									
	Provide a description of the organization's co	Mostions and avaloi	a how thou further th	no organization's	evemnt nurn	oco in Parl	· YIV		
4						USC IIII ZII	, AIV.		
5	During the year, did the organization solicit o				mar assets		٦, ۲	<b>-</b>	
-	to be sold to raise funds rather than to be ma						Yes	No_	
Par	t IV Escrow and Custodial Arran		ete if the organizatio	n answered "Yes	- to Form 99	J, Part IV, I	ine 9, or		
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contribution	s or other assets	not included		- r		
	on Form 990, Part X?					. L	」Yes	No	
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:						
							Amount		
С	Beginning balance				1c				
	A 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4				1d				
	Distributions during the year				1e				
f					1f				
-	Ending balance					·	Yes	No	
	_		21?				J 162 [	NO	
$\overline{}$	t V Endowment Funds. Complete it				10				
Par	t v Endowment Funds. Complete i				<u> </u>			<del></del>	
	,	(a) Current year	(b) Prior year	(c) Two years bad		years back	(e) Four yea	ars Dack	
1a	Beginning of year balance	1,418,282.	1,505,964.	1,346,00	7. 1.	186,272.			
b	Contributions	659.		1,00	0.	219,419.	. ,		
С	Net investment earnings, gains, and losses	231,735.	-110,100.	166,30	2.	-56.383.			
d	Grants or scholarships								
	Other expenditures for facilities								
	and programs	78,176.	13,338.	1.93	5.				
f	Administrative expenses	17,241.	15,164.	5,41		3,301.	-		
	End of year balance	1,555,259.	1,418,282.	<del></del>	<u> </u>	346 007.	-	<del></del>	
	Provide the estimated percentage of the curr								
2	Board designated or quasi-endowment	82.79	%	ij) ricia as.					
	· · · · · · · · · · · · · · · · · · ·	<u> </u>							
ь	Permanent endowment ► 15.85	<del></del> -							
С									
	The percentages in lines 2a, 2b, and 2c shou								
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered t	for the organ	zation			
	by						Ye		
	(i) unrelated organizations						3a(i)	<u> X</u>	
	(ii) related organizations						3a(ii)	X_	
ь	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedule R?				3b		
4	Describe in Part XIV the intended uses of the	organization's endo	owment funds.			_			
Par									
	Description of property	(a) Cost or o		or other (	c) Accumulat	ed	(d) Book va	alue	
	begonphish of property	basis (investr	1 ' '	(other)	depreciation		(4) 20011 11		
4-	Land	(		8,766.		<del> </del>	748	766.	
	Land				4,015,3	36	2,903,		
ь	Buildings	···	0,91	2,430.	±,∪10,3		4,303,	300.	
С	Leasehold improvements			0 212	070 (	10	140	<u> </u>	
d	Equipment			9,312.	972,6			696.	
	Other			5,047.	109,8	117.		230.	
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line 1	0(c).)		. ▶	3,824,	<u>652.</u>	

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011 MOUNTAINS			02	<u>-0243160</u>	Page 3
Part VII Investments - Other Securities. See	Form 990, Part X, line 12.				
(a) Description of security or category	(b) Book value		Method of valua		
(including name of security)		Cost or	end-of-year mari	et value	
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other (A) MONEY MARKET FUNDS	71,186.	END-OF-YEAR	MARKET	VALUE	
(B) US TREASURY OBLIGATIONS	96,583.	END-OF-YEAR			
(C) US GOVERNMENT AGENCIES	373,700.	END-OF-YEAR			
(D) CORPORATE AND FOREIGN					
(E) BONDS	268,399.	END-OF-YEAR	R MARKET	VALUE	
(F) MUNICIPAL OBLIGATIONS	106,655.	END-OF-YEAR	R MARKET	VALUE	
(G)					
(H)					
(0)		· · · ·			
Total (Col (b) must equal Form 990, Part X, col (B) line 12.)	916,523.	<del></del>			
Part VIII Investments - Program Related. Se	e Form 990, Part X, line 13		<del></del>	<del></del>	
(a) Description of investment type	(b) Book value	1-7	Method of valua end-of-year marl		
/4)			ond or your man		
(1)					
(2) (3)					
(4)					
(5)			•		
(6)					
(7)					
(8)			<del>-</del>		
(9)					
(10)					
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)					
Part IX Other Assets. See Form 990, Part X, line				(h) Book ve	
	Description	<del> </del>		(b) Book va	
(1) BENEFICIAL INTEREST IN TR	USTS			1,090	, 351.
(2)				· · · · · ·	
(3) (4)					
(5)		· · · · · · · · · · · · · · · · · · ·			
(6)					
(7)					
(8)					-
(9)					
(10)					
Total. (Column (b) must equal Form 990, Part X, col (B) line				1,090	<u>,351.</u>
Part X Other Liabilities. See Form 990, Part X,		:: <u>::</u>			
1. (a) Description of liability	(	b) Book value			
(1) Federal income taxes		52.004			
(2) FUNDS HELD FOR TROOPS		52,804.			
(3)					
(4)		<del></del>			
<u>(5)</u> (6)					
(7)					
(8)		_			
(9)					
(10)					
(11)					
Total. (Column (b) must equal Form 990, Part X, col (B) line	25.) ▶	52,804.			
FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to 2. FIN 48 (ASC 740).	the organization's financial statement	ents that reports the organization	's fiability for uncertain	n tax positions under	
132053 01-23-12			Sch	edule D (Form 9	90) 2011

Sche	dule D (Form 990) 2011 MOUNTAINS		02-0243160	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Finance	cial State	ements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	5,065	<u>,976.</u>
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,903	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		254.
4	Net unrealized gains (losses) on investments	4		586.
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior penod adjustments	7		
8	Other (Describe in Part XIV.)	8	141	808.
9	Total adjustments (net). Add lines 4 through 8	9		394.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		648.
	t XII Reconciliation of Revenue per Audited Financial Statements With Reven			,040.
1			1 5,308	896.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1 3,300	,000.
		3,586.		
d L		0,972.		
D		0,314.	{	
С	Recoveries of prior year grants	1 000	{	
d		<u>1,808.</u>		266
е	Add lines 2a through 2d			366.
3	Subtract line 2e from line 1		3 4,962	530.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а		<u>7,241.</u>		
ь		6,205.		
С	Add lines 4a and 4b			446.
_ 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5 5,065	<u>.976.</u>
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	nses per	Return	
1	Total expenses and losses per audited financial statements		1 4,811	248.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	0,972.		
ь	Pnor year adjustments		]	
С	Other losses			
d	Other (Describe in Part XIV.) 2d		1	
е	Add lines 2a through 2d		2e 10	972.
3	Subtract line 2e from line 1		3 4,800	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a		7.241.		
	Other (Describe in Part XIV.)  4b 8	7,241. 6,205.	i <sup>,</sup>	
	Add lines 4a and 4b	<u> </u>		446.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5 4,903	
	t XIV Supplemental Information	·-·	3   =,,00	122.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Pai	rt IV imes 1	h and 2h Part V line	4: Part
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to prov			4, Faut
	RT V, LINE 4: PERMANENTLY RESTRICTED NET ASSETS CONS			
<u> </u>	VI DINE 4. I DIGHENDINI REDIRICIED NEI REDEID CORD.	IDI OI	HINDOWIHINI	
गाम	DS AND BENEFICIAL INTEREST IN PERPETUAL TRUSTS TO B	слян я	TNDERTNITE	V.15
	and the name of the state of th		THE THEFT	
тні	INCOME FROM WHICH IS EXPENDABLE TO SUPPORT OPERATION	ONS.		
	ENOUGH THOSE WILLIAM TO MILLIAM TO DOLL OF GREET	0210 1	<del></del>	
				<del></del>
PAI	RT X, LINE 2: THE COUNCIL IS EXEMPT FROM FEDERAL INC	OME TA	XES UNDER	
SEC	TION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE CO	OUNCIL	IS ALSO	
EXI	EMPT FROM STATE INCOME TAXES BY VIRTUE OF ITS ONGOIN	G EXEM	PTION FROM	
FEI	DERAL INCOME TAXES. ACCORDINGLY, NO PROVISION FOR IN	COME T	AXES HAS BE	EEN
			Schedule D (Form 9	

Schedule D (Form 990) 2011

Part XIV Supplemental Information (continued)

RECORDED IN THE ACCOMPANYING FINANCIAL STATEMENTS.

THE COUNCIL HAS ADOPTED THE PROVISIONS OF FASB INTERPRETATION NO.48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES (FASB ASC 740). ACCORDINGLY. MANAGEMENT HAS EVALUATED THE COUNCIL'S TAX POSITIONS AND CONCLUDED THE COUNCIL HAD MAINTAINED ITS TAX-EXEMPT STATUS, DOES NOT HAVE ANY SIGNIFICANT UNRELATED BUSINESS INCOME AND HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT OR DISCLOSURE IN THE FINANCIAL STATEMENTS. WITH FEW EXCEPTIONS, THE COUNCIL IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL OR STATE TAX AUTHORITIES FOR YEARS BEFORE 2009. THIS PERIOD INCLUDES FILINGS FOR GIRL SCOUT COUNCIL OF VERMONT AND GIRL SCOUTS OF SWIFT WATER COUNCIL PRIOR TO THE MERGER ON JANUARY 1, 2009.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF BENEFICIAL INTEREST IN TRUSTS

141,808.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF BENEFICIAL INTEREST IN TRUSTS

141,808.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

PROGRAM FEES - FEES PAID TO INSTITUTIONS (REVENUE SHOWN NET

OF FEES ON F/S)

86,205.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

PROGRAM FEES - FEES PAID TO INSTITUTIONS (REVENUE SHOWN NET

OF FEES ON F/S)

86,205.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Attach to Form 990. GIRL SCOUTS OF THE GREEN AND WHITE Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990)

OMB No 1545-0047	2011	Open to Public	Inspection

Employer identification number

2 [] 02-0243160 (h) Purpose of grant or assistance X Yes 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 recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ame and address of organization (b) EIN (c) IRC section or government assistance assistance (d) Method of (g) Description of reach assistance assistance other) 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 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. General Information on Grants and Assistance criteria used to award the grants or assistance? MOUNTAINS 1 (a) Name and address of organization or government Part Part II

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

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

Schedule I (Form 990) (2011)

02 - 0243160

MOUNTAINS

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2011)

Part III

(f) Description of non-cash assistance THEIR CAMP FEES AND MEMBERSHIP FINANCIAL ASSISTANCE AWARDED TO GIRLS AS A DISCOUNT ON (e) Method of valuation (book, FMV, appraisal, other) COMMITTEE OF VOLUNTEERS MEETS MONTHLY FROM FEBRUARY TO JUNE TO REVIEW EACH AND Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. JURISDICTION WHO COULD NOT OTHERWISE AFFORD TO ATTEND A GREEN AND WHITE CIRCUMSTANCES, THE TOTAL NUMBER OF REQUESTS AND TOTAL MONEY AVAILABLE, ARE NOT DEPENDENT ON PRIOR GIRL SCOUT PARTICIPATION OR REGISTRATION. LINE 2: FINANCIAL AID (ALSO KNOWN AS CAMPERSHIP) NO CASH IS GIVEN DIRECTLY TO INDIVIDUALS PROVIDES ASSISTANCE TO GIRLS WHO LIVE IN GREEN AND WHITE MOUNTAINS' FMV MOUNTAINS CAMP. GRANTS ARE BASED ON FINANCIAL NEED, EXTENUATING (d) Amount of non-cash assistance 111,854 ୌ (c) Amount of cash grant (b) Number of recipients 1238 THEM TO GO ON EDUCATIONAL CAMPING TRIPS DURING THE YEAR, THERE WERE 848 RECIPIENTS OF FINANCIAL AID 390 GIRLS WERE AWARDED FINANCIAL ASSISTANCE FOR CONFIDENTIAL APPLICATION. (a) Type of grant or assistance PART I, FOR MEMBERSHIP DUES. SCHEDULE I Part IV

132102 01-27-12

Schedule I (Form 990) (2011)

#### SCHEDULE M (Form 990)

**Noncash Contributions** 

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

GIRL SCOUTS OF THE GREEN AND WHITE MOUNTAINS

Employer identification number 02-0243160

Pa	rt I Types of Property		<del></del>				2431	00	
Fa	it i Types of Property	(a)	(b)	(c)		(d)			
		Check if applicable	Number of contributions or	Noncash contril amounts report Form 990, Part VII	ed on	Method of de noncash contribu	eterminır		i
1	Art - Works of art		none oom nadoo		.,	•			
2	Art - Historical treasures								
3	Art - Fractional interests	·							
4	Books and publications		•						
5	Clothing and household goods			<u>-</u> .					
6	Cars and other vehicles					·			
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	ļ							
10	Securities - Closely held stock	<u> </u>				<del></del>			
11	Securities - Partnership, LLC, or					<del></del>			
• •		<u> </u>	<del></del>			<del></del>			
12	O 1 Mars 11								
13	Qualified conservation contribution -		-						
13	1.17-4								
14	Qualified conservation contribution - Other							<del>-</del>	
15	Real estate - Residential								
16	Real estate - Commercial								
17									
18	Real estate · Other			_					
19	Collectibles	X	1		100.	FMV			
_	Food inventory	<del></del> _	<del> </del>	<del></del> <del>.</del>	100.	L IA A			
20 21	Drugs and medical supplies								
22	Taxidermy					<del>-</del>			
23	Historical artifacts	ļ	<del> </del>					-	—
	Scientific specimens					<del></del>			
24 25	Archeological artifacts	X	4	35 (	057.	FMV			
		X	2			FMV			
26		<u> </u>		<u> </u>	223.	<u> Priv</u>			
27	Other ()								
28	Other ()		the tay year for a	L		<del></del>			
29	Number of Forms 8283 received by the organ		-	1	29			0	
	for which the organization completed Form 82	203, Part IV,	Donee Acknowled	gement [	29	<del></del>	т,	<del>-</del> -	
20-	D			and and in Dank I fina	a 1 00 tha	at at any cost booled for		/es	No
зua	During the year, did the organization receive b	•					1 1	1	
	at least three years from the date of the initial			-	i for exem	pt purposes for			<b>3</b> 7
		· · · · · · ·	· · · · · · · ·				30a	+	<u> </u>
	If "Yes," describe the arrangement in Part II.						-	- 1	7.
31	Does the organization have a gift acceptance					mons?	31		<u>X</u>
32a	Does the organization hire or use third parties		•	=					7-
	contributions?						32a		<u>X</u>
	If "Yes," describe in Part II.		_						-
33	If the organization did not report an amount in	column (c)	for a type of prope	rty for which colum	n (a) is ch	ecked,			
	describe in Part II.	<u></u>					<u> </u>	1	

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

Schedule M (Form 990) (2011)

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

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

GIRL SCOUTS OF THE GREEN AND WHITE MOUNTAINS

Employer identification number 02-0243160

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AS A LEADING EXPERT ON GIRLS. THE COUNCIL'S INNOVATIVE LEADERSHIP
PROGRAMS HELP GIRLS DISCOVER, CONNECT, AND TAKE ACTION AS THEY DEVELOP
STRONG VALUES, A SOCIAL CONSCIENCE, AND A DEEP SENSE OF SELF AND THEIR
POTENTIAL.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SENSE OF SELF AND THEIR POTENTIAL. GIRL SCOUTS BUILDS GIRLS OF COURAGE,
CONFIDENCE, AND CHARACTER, WHO MAKE THE WORLD A BETTER PLACE.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
ALL PROGRAMS OFFERED AIM:
- TO DEVELOP GIRL LEADERS WITH GREATER ENVIRONMENTAL UNDERSTANDING,
CONNECTION TO OUR NATURAL SURROUNDINGS AND ABILITY TO TRULY MAKE A
DIFFERENCE FOR FUTURE GENERATIONS
- TO BUILD GIRLS SELF-ESTEEM AND STRENGTHEN THEIR SENSE OF COMMUNITY AT
CAMPS BY ENABLING THEM TO MAKE NEW FRIENDS AND BUILD A SENSE OF
BELONGING
- TO SUPPORT ENVIRONMENTAL AND ECOLOGICAL EDUCATION IN ORDER TO FOSTER
ENVIRONMENTAL ACTIVISM
- TO INCREASE GIRLS' ABILITY TO TAKE APPROPRIATE RISKS AND INCREASE
SELF-CONFIDENCE THROUGH LEARNING BY DOING
- TO PROVIDE AN ACCESSIBLE OUTDOOR CAMPING ENVIRONMENT FOR ALL GIRL
MEMBERS WITHIN THE COUNCIL JURISDICTION

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

Name of the organization GIRL SCOUTS OF THE GREEN AND WHITE MOUNTAINS

Employer identification number 02-0243160

Schedule O (Form 990 or 990-EZ) (2011)

TAKE ACTION: GIRLS ACT TO MAKE THE WORLD A BETTER PLACE.

THE GIRL SCOUT LEADERSHIP EXPERIENCE PROVIDES THREE PROCESSES FOR ADULTS PARTNERING WITH GIRLS TO INCORPORATE: GIRL LED, COOPERATIVE LEARNING, AND LEARNING BY DOING.

FORM 990, PART VI, SECTION A, LINE 6: THE COUNCIL'S DELEGATES VOTE ON ELECTION OF THE BOARD.

FORM 990, PART VI, SECTION A, LINE 7A: THE COUNCIL'S DELEGATES, WHO ARE THE VOTING MEMBERS. ELECT THE BOARD OF DIRECTORS AND OFFICERS.

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 WAS REVIEWED BY A SUB-COMMITTEE OF THE AUDIT COMMITTEE, AS DELEGATED BY A RESOLUTION FROM THE BOARD OF DIRECTORS, IN DETAIL PRIOR TO FILING. QUESTIONS WERE ADDRESSED TO THE PREPARER AND RESOLVED TIMELY. A FINAL DRAFT VERSION OF THE RETURN WAS PROVIDED TO THE FULL BOARD PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF DIRECTORS REVIEW AND EXECUTE A CONFLICT OF INTEREST POLICY ANNUALLY. THE BOARD CHAIR IS CHARGED WITH ENSURING COMPLIANCE.

FORM 990, PART VI, SECTION B, LINE 15: SALARY RANGES FOR ALL POSITIONS WERE ESTABLISHED BY AN INDEPENDENT HR COMMITTEE IN CONSULTATION WITH PROFESSIONAL ADVISORS FROM THE COUNCIL'S NATIONAL ORGANIZATION. SALARY RANGES ARE BASED UPON SIMILAR RESPONSIBILITIES FOR SIMILAR POSITIONS WITHIN THE GEOGRAPHIC AREA TAKING INTO CONSIDERATION THE EXPERIENCE, EDUCATION AND SKILLS NEEDED FOR EACH POSITION. THE CEO'S SALARY IS ESTABLISHED BY A SUB-COMMITTEE OF THE BOARD OF DIRECTORS APPOINTED BY THE BOARD CHAIR AS 132212 01-23-12