Depar		PUBLIC DISCLOSURE COPY - STATE REGISTRAT Return of Organization Exempt From Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code Do not enter social security numbers on this form as it m Go to www.irs.gov/Form990 for instructions and the lateral and	(except private fo ay be made public	Tax undations)	OMB No. 1545-0047				
AF	or the	e 2018 calendar year, or tax year beginning OCT 1, 2018 and ending		2019					
B Chack if applicable: C Name of organization D Employer identification number									
	Addre chang Name chang	GIRL SCOUTS OF NORTHERN CALIFORNIA		94-15	51410				
]Initial]return]Final]return	Number and street (or P.O. box if mail is not delivered to street address) Room/ 1650 HARBOR BAY PARKWAY 100	suite E Telephone	e number (510)	562-8470				
	termir ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receip	ts \$	35,698,476.				
	Amen return	ALAMEDA, CA 94302	H(a) Is this a	ı group retu	ırn				
	Applic dition	Finame and address of principal officer: MAKINA FARK-50110M	for subo	ordinates?	Yes X No				
	pendi	⁹ SAME AS C ABOVE	H(b) Are all sub	ordinates inclu	ided? Yes No				
ΙT	ax-ex	empt status: 🗴 501(c)(3) 🗌 501(c) ()◀ (insert no.) 🗌 4947(a)(1) or 🦳	527 If "No,"	attach a lis	st. (see instructions)				
		te: > WWW.GSNORCAL.ORG	H(c) Group e	exemption r	number 🕨				
KF	orm of	organization: 🔀 Corporation 🔄 Trust 🔄 Association 🔄 Other 🕨 📘	Year of formation: 1	.963 M S	State of legal domicile: CA				
Pa	rtl	Summary							
_	1	Briefly describe the organization's mission or most significant activities: GIRL SCC							
Activities & Governance		COURAGE, CONFIDENCE AND CHARACTER WHO MAKE TH							
rna	2	Check this box 🕨 🛄 if the organization discontinued its operations or disposed of r	nore than 25% of it	ts net asset					
0 Ve	3	Number of voting members of the governing body (Part VI, line 1a)			22				
5 M	4	Number of independent voting members of the governing body (Part VI, line 1b)			22				
es	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5	405				
viti	6	Total number of volunteers (estimate if necessary)		6	28106				
Acti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.				
	b	Net unrelated business taxable income from Form 990-T, line 38	1	7b	0.				
			Prior Yea		Current Year				
e	8	Contributions and grants (Part VIII, line 1h)	1,800,		4,547,353.				
ent	9	Program service revenue (Part VIII, line 2g)	3,568,		3,662,264.				
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,469,		1,001,809.				
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	16,117,		15,480,434.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	22,956,		24,691,860.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2/1,	246.	319,366.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)	12 100	0.	12 042 502				
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	12,100,		12,943,502.				
ens		Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 1,411,712.		0.	0.				
Expenses			7,551,	440	8,180,190.				
	17 18	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	19,923,		21,443,058.				
		Revenue less expenses. Subtract line 18 from line 12	3,032,		3,248,802.				
-Sec			Beginning of Curre		End of Year				
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	34,587,		37,639,213.				
Ass Bal	21	Total liabilities (Part X, line 26)	2,840,		2,837,923.				
Net	22	Net assets or fund balances. Subtract line 21 from line 20	, 31,746,		34,801,290.				
	rt II	Signature Block							
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and st t, and complete. Declaration of preparer (other than officer) is based on all information of which pre			nowledge and belief, it is				
		h m s	9	3-6-2	020				
Sigr Here		Signature of officer MARINA PARK-SUTTON, CEO	Date						
		Type or print name and title							
		Print/Type preparer's name Preparer's signature	Date	Check	PTIN				
Paid		MAGA E. KISRIEV	8/05/2020	if self-employed	P01008919				
Prep	arer	Firm's name HOOD & STRONG LLP	Firm		94-1254756				
Use	Only	Firm's address 275 BATTERY ST, STE 900							
		SAN FRANCISCO, CA 94111	Phor	ne no. 415	.781.0793				

May the IRS dis	cuss this return with the preparer shown above? (see instructions)
832001 12-31-18	LHA For Paperwork Reduction Act Notice, see the separate instructions.

(Rev. January 2019)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

				Enter file	er's identifyi	ng number	
Type or						on number (EIN) or	
print						F1 41 0	
File by the			94-15				
due date for filing your return. See	n. See 1650 HARBOR BAY PARKWAY, NO. 100				Social security number (SSN)		
instructions.	City, town or post office, state, and ZIP code. For a fo $ALAMEDA$, CA 94502	reign addı	ress, see instructions.				
Enter the	Return Code for the return that this application is for (file	a separat	e application for each return)			01	
Applicat	ion	Return	Application			Return	
ls For		Code	Is For			Code	
Form 990) or Form 990-EZ	01	Form 990-T (corporation)			07	
Form 990)-BL	02	Form 1041-A			08	
Form 472	20 (individual)	03	Form 4720 (other than individual)			09	
Form 990)-PF	04	Form 5227			10	
Form 990	D-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990	D-T (trust other than above) CARL NICHOLS	06	Form 8870			12	
 If this box 1 I re the 	organization does not have an office or place of business is for a Group Return, enter the organization's four digit C . If it is for part of the group, check this box ▶ equest an automatic 6-month extension of time until e organization named above. The extension is for the orga calendar year or X tax year beginning OCT 1, 2018 he tax year entered in line 1 is for less than 12 months, ch Change in accounting period	Aroup Exe	mption Number (GEN) I ch a list with the names and EINs of ST 15, 2020 , to file return for: d ending SEP 30, 2019	f this is fo all memb	r the whole <u>o</u> ers the exter npt organizat	group, check this	
	his application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less	3a	\$	0.	
	y nonrefundable credits. See instructions. his application is for Forms 990-PF, 990-T, 4720, or 6069.	enter any	refundable credits and	3a	Ψ	<u></u>	
	imated tax payments made. Include any prior year overpa			Зb	\$	0.	
	c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by						
	ng EFTPS (Electronic Federal Tax Payment System). See	,	, i , j	3c	\$	0.	
instructio	If you are going to make an electronic funds withdrawal ons. For Privacy Act and Paperwork Reduction Act Notice, s			153-EO an		9-EO for payment 3868 (Rev. 1-2019)	

	990 (2018) GIRL SCOUTS OF NORTHERN CALIFORNIA	94-1551410	Page 2
Pa	rt III Statement of Program Service Accomplishments		37
1	Check if Schedule O contains a response or note to any line in this Part III		X
	GIRL SCOUTS BUILD GIRLS OF COURAGE, CONFIDENCE AND CHARA	CTER WHO MAK	Е
	THE WORLD A BETTER PLACE.		
2	Did the organization undertake any significant program services during the year which were not listed on the	Yes	V
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	Yes	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	XNo
Ū	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	rs, the total expenses, a	nd
	revenue, if any, for each program service reported.		
4a		nue \$ 2,428,	729.
	CAMPS AND OUTDOOR PROGRAMS - WE PROVIDE YEAR-ROUND OUTDO THAT GIVE GIRLS AN OPPORTUNITY TO DEVELOP WILDERNESS SKI		D
	AN AFFINITY FOR NATURE, AND SEEK OUT NEW CHALLENGES. WE		<u> </u>
	REGISTRATIONS FOR OUR RESIDENTIAL CAMPS.		
4b	(Code:) (Expenses \$4, 255, 412. including grants of \$85, 346.) (Rever	nues 15,546,	540.
1.0	GIRL SCOUT LEADERSHIP EXPERIENCE - THE GIRL SCOUT LEADER		
	ALIGNS TO FIVE RESEARCH-BASED YOUTH DEVELOPMENT OUTCOMES	. THESE	
	OUTCOMES ARE ACHIEVED THROUGH AGE-APPROPRIATE ACTIVITIES		
	GIRLS DISCOVER THEIR VALUES, SKILLS, AND THE WORLD AROUN	-	
	WITH OTHERS IN A MULTICULTURAL ENVIRONMENT; AND TAKE ACT DIFFERENCE IN THEIR WORLD.	TON TO MAKE .	A
	DIFFERENCE IN THEIR WORLD:		
	OUR PROGRAMS SERVE APPROXIMATELY 39,000 GIRL MEMBERS. AB	OUT 24.000	
	GIRLS PARTICIPATED IN OUR ENTREPRENEURSHIP PROGRAMS, WHI		
	BUSINESS SKILLS LIKE GOAL-SETTING, PUBLIC SPEAKING, BUDG	ETING AND	
	SALES.		
	2.061.100		600
4c	(Code:) (Expenses \$ 3,961,199. including grants of \$ 141,660. 141,660.) (Rever OUR COUNCIL SERVES 39,000 GIRL AND 28,000 ADULT MEMBERS		697.)
	CLARA COUNTY TO THE OREGON BORDER. OUR MEMBERS ENJOY THE		
	THE GIRL SCOUT LEADERSHIP EXPERIENCE THROUGH VOLUNTEER L		
	COMMUNITY OUTREACH PROGRAMS.		
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ 4,148,261. including grants of \$ 0.) (Revenue \$	574,474.)	
4e			
		Form 9	90 (2018)
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109	304 758661 29475 2018.06010 GIRL SCOUTS OF		29475

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			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	X	
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 X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			- v
-	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,	_		x
~	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
•	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	9	х	
10	If "Yes," complete Schedule D, Part IV	9	-11	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	10	х	
11	endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		- 23	
••	as applicable.			
-	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D.			
a		11a	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	114		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D. Parts XI and XII	12a	Х	
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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		37	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	gan	<u>X</u> (2018)
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
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	Х	
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 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ũ	any tax-exempt bonds?	24c		
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
		<u>24u</u>		
258	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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):			
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? <i>If "Yes," complete Schedule L, Part IV</i>	28b		x
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
C		28c		x
20	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	200	Х	
29 00	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	л	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
	contributions? If "Yes," complete Schedule M	30		X 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			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u> </u>
07	and that is tracted as a partnership for foderal income tax purposed (r. 1	37		x
20		31		- 23
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	0	х	
Par	Note. All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Λ	
I ai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 103			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
832004	12-31-18	Form	990	(2018)
	7			

	Form 990 (2018) GIRL SCOUTS OF NORTHERN CALIFORNIA 94-1551410 Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) 6					
			Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		100			
	filed for the calendar year ending with or within the year covered by this return 2a 405					
b	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)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X		
b	If "Yes," enter the name of the foreign country: ►					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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 as charitable contributions?	6a		X		
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).		37			
a	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	X			
	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	7.		х		
ام	to file Form 8282?	7c				
	, , , , , , , , , , , , , , , , , , , ,	7e		х		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X		
g	If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g				
-	If the organization received a contribution of quantee intellectual property, did the organization me rorm boos as required in	79 7h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the					
-	sponsoring organization have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.	_				
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a				
b	Did the sponsoring 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 10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b					
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders 11a					
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10				
а	· · ·	13a				
	Note. See the instructions for additional information the organization must report on Schedule O.					
D	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 13b Enter the amount of reserves on hand 13c					
с 14а	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x		
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or					
	excess parachute payment(s) during the year?	15		х		
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х		
	If "Yes," complete Form 4720, Schedule O.					

Form **990** (2018)

832005 12-31-18

Form 990	(2018)
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GIRL SCOUTS OF NORTHERN CALIFORNIA

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

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. 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		22			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	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	1b		22			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny other				
	officer, director, trustee, or key employee?				2		Х
3	Did the organization delegate control over management duties customarily performed by or under the						
	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 99			F	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's asse			F	5		Х
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 app						
	more members of the governing body?			·····	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto	ockholo	ders, or				
	persons other than the governing body?				7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		-				
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 reac						37
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		Х
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	/enue (Code.)				
				ſ		Yes	No
	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 cha					x	
			CII		10b	^	Х
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	Defore	tiling the to	orm?	11a		<u> </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				10-	х	
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	^	х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			·····	12b		<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	,			10-	x	
2	in Schedule O how this was done			Г	<u>12c</u> 13	X	
3	Did the organization have a written whistleblower policy?			· · · · · · · · · · · ·	14	X	
4 5				·····	14		
5	Did the process for determining compensation of the following persons include a review and approval persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	by ind	ependent				
~					150	х	
a h	The organization's CEO, Executive Director, or top management official			Γ	<u>15a</u> 15b	X	
b	Other officers or key employees of the organization			····· }	150	- 23	
6-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ont wit	h a				
ua					16a		х
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate			·····	104		
D.	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi	•	•				
	exempt status with respect to such arrangements?				16b		
ec	tion C. Disclosure				100		
7	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright CA						
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and	1 990-T	(Section 50	(1(c)(3)s)	onlv) a	availab	le
	for public inspection. Indicate how you made these available. Check all that apply.		(0000000000000	.(0)(0)0	,,,		
	X Own website Another's website X Upon request Other (explain	in Sch	edule ())				
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con			cy, and f	nanc	ial	
-	statements available to the public during the tax year.			,			
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	records	•			
-	LEINANI MALIG - (510) 562-8470						
		502					
32004	12-31-18				Form	990	(2018
	9				. 5111		12010
0.8	04 758661 29475 2018.06010 GIRL SCOU	TTS	OF NOR	THER		29	475

<u>Form 990 (2</u>	018) GIRL	SCOUTS 0	P NORTHERN	CALIFORNIA	94-1551410	Page /		
Part VII	Compensation of Office	cers, Directo	rs, Trustees, Key	/ Employees, Highes	t Compensated			
Employees, and Independent Contractors								
	Check if Schedule O contain	s a response or n	ote to any line in this	Part VII		X		
Section A.	Officers, Directors, Truste	es, Key Employe	es, and Highest Co	npensated Employees				

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	l	11124		C)	1001	ourc	(D)	(E)	(F)
				Pos		1				
Name and Title	Average hours per		not c	heck	more	than o s both		Reportable compensation	Reportable compensation	Estimated amount of
	week					r/trus		from	from related	other
	(list any	tor						the	organizations	compensation
	hours for	· direc				b B		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			ensati		(W-2/1099-MISC)		organization
	organizations	l trus	nal tri		oyee	om pe				and related
	below	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	Former			organizations
	line)	Indi	Inst	Officer	Key	e Hig	For			
(1) ELLEN RICHEY	4.00									
PRESIDENT		Х		Х				0.	0.	0.
(2) ELLEN BERMINGHAM	2.00									
FIRST VICE PRESIDENT		Х		Х				0.	0.	0.
(3) SUZANNE BELL	2.00									
SECOND VICE PRESIDENT		Х		Х				0.	0.	0.
(4) ZAIN OKE	2.00									
THIRD VICE PRESIDENT		Х		Х				0.	0.	0.
(5) SANDY SHIRAI	2.00									
TREASURER		х		X				0.	0.	0.
(6) KAREN DERR GILBERT	2.00									
SECRETARY		х		x				0.	0.	0.
(7) TINA AMBER	2.00									
DIRECTOR-AT-LARGE		х						0.	0.	0.
(8) JANA BARSTEN	2.00									
DIRECTOR-AT-LARGE (FROM 4/2019)		х						0.	0.	0.
(9) DIANA BELL	2.00									
DIRECTOR-AT-LARGE		х						0.	0.	0.
(10) KATHY BLOCH	2.00									
DIRECTOR-AT-LARGE		х						0.	0.	0.
(11) GINGER BRYANT	2.00									
DIRECTOR-AT-LARGE		х						0.	0.	0.
(12) LINDA CHONG	2.00									
DIRECTOR-AT-LARGE (FROM 4/2019)		х						0.	0.	0.
(13) MARY CRANSTON	2.00									
DIRECTOR-AT-LARGE		х						0.	0.	0.
(14) RAJIV DHOLAKIA	2.00									
DIRECTOR-AT-LARGE		х						0.	0.	0.
(15) CAROLINE GAFFNEY	2.00									
DIRECTOR-AT-LARGE		х						0.	0.	0.
(16) PEG MCALLISTER	2.00									
DIRECTOR-AT-LARGE		х						0.	0.	0.
(17) LESLIE MILLER	2.00									
DIRECTOR-AT-LARGE		х						0.	0.	0.
922007 12-31 19										Form 990 (2018)

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832007 12-31-18

Form 990 (2018)

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Form 990 (2018) GIRL SCOU	JTS OF N	IOR	TH	ER	Ν	CA	LΙ	FORNIA	94-15	5514	110	Page 8
Part VII Section A. Officers, Directors, Trust	tees, Key Emp	oloye	ees,	anc	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)				C)			(D)	(E)			(F)
Name and title	Average	(-1 -			ition			Reportable	Reportable			mated
	hours per	box,	, unles	s per	rson i	than o s both	an	compensation	compensatio			ount of
	week	offic	cer an	d a d	irecto	r/trust	ee)	from	from related		o	ther
	(list any	ector						the	organizations	s	comp	ensation
	hours for	r dire				ted		organization	(W-2/1099-MIS	6C)	fro	m the
	related	stee o	ustee			ensa		(W-2/1099-MISC)			orga	nization
	organizations	al trus	nal tr		oyee	e com					and	related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orgar	izations
	line)	lnd	lns	0#	Key	e mig	For					
(18) DEBRA ROSSI	2.00											•
DIRECTOR-AT-LARGE	2 00	Х						0.		0.		0.
(19) NEERACHA TAYCHAKHOONAVUDH	2.00	37						0				0
DIRECTOR-AT-LARGE	2 00	Х						0.		0.		0.
(20) TRACY TEALE	2.00	77						0				0
DIRECTOR-AT-LARGE	2 00	Х						0.		0.		0.
(21) LISA VIOLET	2.00	37						0				0
DIRECTOR-AT-LARGE (FROM 4/2019)	2 00	Х						0.		0.		0.
(22) MARCIE VU	2.00	37						0				0
DIRECTOR-AT-LARGE		Х						0.		0.		0.
(23) MARINA PARK SUTTON	37.50			77				222 272			-	710
CHIEF EXECUTIVE OFFICER (24) CARL M NICHOLS	37.50			Х				332,373.		0.	/	,712.
(24) CARL M NICHOLS CHIEF BUSINESS OFFICER (THRU 2/2019)	37.50			х				171 070		0.	16	270
(25) LILLIAN SAMUEL	37.50			<u> </u>				171,970.		0.	10	<u>,378.</u>
CHIEF DEVELOPMENT OFFICER	37.30				x			175,973.		0.	15	,039.
(26) CONCETTA RUGGIERO	37.50				^			1/3,9/3.		••	10	,039.
COO (THRU 12/2018)	37.30				x			235,791.		0.	6	,916.
							_	916,107.		0.	16	,9 <u>1</u> 0. ,045.
1b Sub-total								483,836.		0.		<u>,045.</u> ,587.
c Total from continuation sheets to Part VI						ا		1,399,943.		0.		<u>, 632.</u>
d Total (add lines 1b and 1c)						J			200 of reportable			,052.
2 Total number of individuals (including but no	or infined to th	ose	liste	u ac	ove) write	JIE	ceived more than \$100,0	Jou of reportable			8
compensation from the organization												/es No
3 Did the organization list any former officer,	director or tru	istor		v on	anla	voo	orl	highest componented on		ſ		
č	,		· ·	,	•			0	, ,		3	x
line 1a? If "Yes," complete Schedule J for stFor any individual listed on line 1a, is the su										····	3	
											4	x
and related organizations greater than \$1505 Did any person listed on line 1a receive or a										·····		
rendered to the organization? If "Yes." com							ald	su organization or individ	ual for services		5	x
Section B. Independent Contractors	piele Schedule	<u>; J /(</u>	or su	CI	Jers	011 .					5	
1 Complete this table for your five highest cor	mpensated ind	ene	nder		ontra	actor	e th	nat received more than \$	100 000 of comr	ensat	ion fron	n
the organization. Report compensation for t	-									crisat		
(A)				9 10	iun c			(B)			(C)	
Name and business	address							Description of s	ervices	С	ompens	
AUTOMATION SERVICES GROUP	INC.	7	12					-			-	
BANCROFT RD, #249, WALNUT				94	59	8	ŀ	IT SERVICES			568	,622.
SLALOM, LLC						-						<u></u>
P.O. BOX 101416, PASADENA	, CA 91	18	9					CONSULTING SI	ERVICES		203	,000.
ADVANTAGE MICROSYSTEMS, 2				Z	AV	Ε.						<u>,</u>
# 371, BERKELEY, CA 94705				-		-		SERVER MONITO	DRING		163	,776.
CALIFORNIA AQUA PROS							_	CONSTRUCTION				,
P.O. BOX 1119, DISCOVERY	BAY, CA	9	45	05				SERVICES			145	,452.
ARTISAN PRINTING, 40486 L					N		ſ					<u> </u>
DR, COURSEGOLD, CA 93614							ŀ	PRINTING SERV	/ICES		112	,021.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 5

\$100,000 of compensation from the organization ► 5 SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2018)

832008 12-31-18

Form 990 GIRL SCOU									94-155	1410
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A) Name and title	(B) Average hours	(cł		(C Posi all t	ition		ly)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key em ployee	Highest com pen sated em ployee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(27) LEINANI MALIG	37.50					x		142 045	0.	11 069
DIR OF FIN(THRU 1/19),CFO(FROM 2/19) (28) HEATHER BURLEW HAYDEN	37.50					<u> </u>		143,045.	0.	11,968.
CHIEF MARKETING & MEMBERSHIP OFFICER						x		120,538.	0.	14,049.
(29) MICHELLE M MCCORMICK CHIEF MISSION DELIVERY	37.50					x		108,193.	0.	15,822.
(30) MARIKA BERGSUND	37.50					<u> </u>		100,195.	0.	15,022.
SR DIR, MEM. & VOLUNTEER SUPPORT						x		112,060.	0.	3,748.
Total to Part VII, Section A, line 1c	<u> </u>		I	I				483,836.		45,587.

832201 04-01-18

4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) c Gain or (loss)	Pa	rt V	Ш	_							
and File 1a 9,072. (a) b metachip dues 1b 1c 144,213. (b) 10 146,273. (c) 10 147,273. (c) 10				Check if Schedule O conta	<u>ains a re</u>	sponse	or note to any line	(A)	Related or exempt function	Unrelated business	Revenue excluded from tax under
Busines Code	s s	1	а	Federated campaigns		1a	9,070.				
Busines Code	ani										
Busines Code	Q E						144,210.				
Busines Code	ifts ar A			- · · · · · · ·			14,733.				
Busines Code	nila G			•		1e	170,907.				
Busines Code	Sin										
Busines Code	her					1f	4,208,433.				
Busines Code	Ę		a				1,570,898.				
Busines Code	Cor		-				>	4,547,353.			
OF PROGRAM INCOME 900099 423,255 823,255 930099 93099 931,515 930099 931,515 930,505<											
g Total. Add lines 2a:21 3,662,264. 3 investment income (including dividends, interest, and other similar amounts). 607,304. 4 income from investment of tax exempt bond proceeds 607,304. 5 Royaties 90,265. 6 a Gross rents 90,265. 2,988. 6 Reparties 87,277. 87,277. 7 a Gross amount from sales of assets other than inventory balase expenses (0) Recurities (0) Other 659,842. 87,277. 8 a Gross income from fundraising events (c Gain or (loss) (1) Securities (0) Other 659,842. 394,505. 9 a Gross income from fundraising events (c contributions reported on line 10: See Part IV, line 18 0. 812,013. 9 a Gross income from gaming activities. 0 C Net income or (loss) from fundraising events (c Net income or (loss) from gaming activities. 0 A test income or (e	2	а	OUTDOOR PROGRAM SERVICE	INCOM	ΙE		1,795,780.	1,795,780.		
g Total. Add lines 2a:21 3,662,264. 3 investment income (including dividends, interest, and other similar amounts). 607,304. 4 income from investment of tax exempt bond proceeds 607,304. 5 Royaties 90,265. 6 a Gross rents 90,265. 2,988. 6 Reparties 87,277. 87,277. 7 a Gross amount from sales of assets other than inventory balase expenses (0) Recurities (0) Other 659,842. 87,277. 8 a Gross income from fundraising events (c Gain or (loss) (1) Securities (0) Other 659,842. 394,505. 9 a Gross income from fundraising events (c contributions reported on line 10: See Part IV, line 18 0. 812,013. 9 a Gross income from gaming activities. 0 C Net income or (loss) from fundraising events (c Net income or (loss) from gaming activities. 0 A test income or (, vic		b	PROGRAM INCOME			900099	823,255.	823,255.		
g Total. Add lines 2a:21 3,662,264. 3 investment income (including dividends, interest, and other similar amounts). 607,304. 4 income from investment of tax exempt bond proceeds 607,304. 5 Royaties 90,265. 6 a Gross rents 90,265. 2,988. 6 Reparties 87,277. 87,277. 7 a Gross amount from sales of assets other than inventory balase expenses (0) Recurities (0) Other 659,842. 87,277. 8 a Gross income from fundraising events (c Gain or (loss) (1) Securities (0) Other 659,842. 394,505. 9 a Gross income from fundraising events (c contributions reported on line 10: See Part IV, line 18 0. 812,013. 9 a Gross income from gaming activities. 0 C Net income or (loss) from fundraising events (c Net income or (loss) from gaming activities. 0 A test income or (Ser		с	COUNCIL SERVICE FEE			900099	582,610.	582,610.		
g Total. Add lines 2a:21 3,662,264. 3 investment income (including dividends, interest, and other similar amounts). 607,304. 4 income from investment of tax exempt bond proceeds 607,304. 5 Royaties 90,265. 6 a Gross rents 90,265. 2,988. 6 Reparties 87,277. 87,277. 7 a Gross amount from sales of assets other than inventory balase expenses (0) Recurities (0) Other 659,842. 87,277. 8 a Gross income from fundraising events (c Gain or (loss) (1) Securities (0) Other 659,842. 394,505. 9 a Gross income from fundraising events (c contributions reported on line 10: See Part IV, line 18 0. 812,013. 9 a Gross income from gaming activities. 0 C Net income or (loss) from fundraising events (c Net income or (loss) from gaming activities. 0 A test income or (an eve		d	RENTAL INCOME - CAMPS			900099	421,645.	421,645.		
g Total. Add lines 2a:21 3,662,264. 3 investment income (including dividends, interest, and other similar amounts). 607,304. 4 income from investment of tax exempt bond proceeds 607,304. 5 Royaties 90,265. 6 a Gross rents 90,265. 2,988. 6 Reparties 87,277. 87,277. 7 a Gross amount from sales of assets other than inventory balase expenses (0) Recurities (0) Other 659,842. 87,277. 8 a Gross income from fundraising events (c Gain or (loss) (1) Securities (0) Other 659,842. 394,505. 9 a Gross income from fundraising events (c contributions reported on line 10: See Part IV, line 18 0. 812,013. 9 a Gross income from gaming activities. 0 C Net income or (loss) from fundraising events (c Net income or (loss) from gaming activities. 0 A test income or (Bo		е	OTHER PROGRAM SERVICES			900099	38,974.	38,974.		
g Total. Add lines 2a:21 > 3, 662, 264. 3 Investment income (including dividends, interest, and other similar amounts) > 607, 304. 607, 304. 4 Income from investment of tax-exempt bond proceeds > 607, 304. 607, 304. 5 Royaties 0) Real 0) Personal 607, 204. 607, 304. 6 Gross rents 90, 255, 5 2, 988. 87, 277. 87, 277. 7 Gross amout from sales of assets other than inventory b Ess: cost or other basis and sales expenses (0) Securities 00 Other 6 Gain or (loss) 144, 210 of contributions reported on line 1c). See Part IV, line 13 394, 505. 394, 505. 394, 505. 9 Gross income from gaming activities 0 0 0 0 9 Gross income from gaming activities 0 0 0 81, 019. 9 Gross sales of inventory 0 15, 268, 343. 15, 268, 343. 0 9 Gross income from gaming activities 0 15, 268, 343. 15, 268,	Pr				nue			· · ·			
3 Investment income (including dividends, interest, and other similar amounts). 607, 304. 607, 304. 4 Income from investment of tax-exempt bond proceeds 607, 304. 607, 304. 5 Royalties 0) Real (i) Personal 6 a Gross rents 0) 2.255. 2, 988. c Rental income or (loss) 87, 277. 87, 277. 4 Income or (loss) 87, 277. 87, 277. 7 a Gross amount from sales of assets other than inventory 659, 842. 494, 079. 6 Ess: cost or other basis and sales expenses 585, 818. 173, 578. c Gain or (loss) 74, 004. 320, 501. 5 B a Gross income from fundraising events (not including \$								3,662,264.			
4 Income from investment of tax-exempt bond proceeds 5 Royatties 6 a Gross rents 90,265, 0 b Less: rental expenses 2,988, c Rental income or (loss) 87,277, d Net rental income or (loss) 87,277, 7 Gross amount from sales of 0,98, a cross anount from sales of ther basis and sales expenses 58,638,173,578,74,004,320,501,394,505,39		3		Investment income (including o	dividenc	ls, intere	st, and				
4 Income from investment of fax-exempt bond proceeds Royatties Royatties<				other similar amounts)			►	607,304.			607,304.
6 a Gross rents (i) Real (ii) Personal 00, 265. 90, 265. 2, 398. 0. 87, 277. C Rental income or (loss) 87, 277. 87, 277. A Wet rental income or (loss) 0. 87, 277. 87, 277. A Wet rental income or (loss) 0. 87, 277. 87, 277. A Wet rental income or (loss) 0. 87, 277. 87, 277. A Wet rental income or (loss) 0. 90, 92.05. 87, 277. A Wet rental income or (loss) 0. 90, 92.05. 87, 277. B Gross income from fundrasing events (not including \$		4									
6 a Gross rents (i) Real (ii) Personal 00, 265. 90, 265. 2, 398. 0. 87, 277. C Rental income or (loss) 87, 277. 87, 277. A Wet rental income or (loss) 0. 87, 277. 87, 277. A Wet rental income or (loss) 0. 87, 277. 87, 277. A Wet rental income or (loss) 0. 87, 277. 87, 277. A Wet rental income or (loss) 0. 90, 92.05. 87, 277. A Wet rental income or (loss) 0. 90, 92.05. 87, 277. B Gross income from fundrasing events (not including \$		5		Royalties			🕨				
b Less: rental expenses 2,988. 87,277. c Rental income or (loss) 87,277. 87,277. d Net rental income or (loss) 87,277. 87,277. d Net rental income or (loss) 87,277. 87,277. d Net rental income or (loss) 10 Securities (ii) Other assets other than inventory 0 Securities (iii) Other b Less: cost or other basis and sales expenses 585,838. 173,578. c Gain or (loss) 585,838. 173,578. d Net gain or (loss) 144,210. of contributions reported on line 10. See 394,505. 8 Gross income from fundraising events (not including \$											
c Rental income or (loss) 87,277. 87,277. 87,277. d Net rental income or (loss) Image: constraint of the set		6	а	(i) Real							
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GIRL SCOUTS OF NORTHERN CALIFORNIA

Form 990 (2018)

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GIRL SCOUTS OF NORTHERN CALIFORNIA Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	319,366.	319,366.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	952,614.	402,432.	240,121.	310,061
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and				
7	Other salaries and wages	8,994,496.	7,108,604.	1,353,180.	532,712
8	Pension plan accruals and contributions (include	-,,-,-,	.,,	_,,	
	section 401(k) and 403(b) employer contributions)	1,100,209.	855,947.	176,496.	67,766
9	Other employee benefits	1,212,297.	919,011.	200,263.	93,023
10	Payroll taxes	683,886.	511,236.	115,058.	57,592
11	Fees for services (non-employees):				
а	Management				
b	Legal	44,636.	422.	44,214.	
	Accounting	75,600.		75,600.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	200		200	
f	Investment management fees	369.		369.	
g		1 500 000	1,099,574.	378,355.	110 150
	column (A) amount, list line 11g expenses on Sch 0.)	<u>1,588,088</u> 36,102.	36,102.	576,555.	110,159
2	Advertising and promotion	2,362,533.	2,215,058.	74,955.	72,520
3 4	Office expenses Information technology	2,502,555.	2,215,050.	71,555	12,520
4 5	Royalties				
16	Occupancy	1,542,789.	1,260,014.	197,678.	85,097
7	Travel	683,105.	666,906.	10,620.	5,579
8	Payments of travel or entertainment expenses		,		
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	104,576.	75,788.	20,228.	8,560
0	Interest	2,670.	1,234.	1,436.	
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	840,228.	810,406.	20,847.	8,975
3	Insurance	316,798.	307,160.	6,787.	2,851
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	EQUIPMENT EXPENSE	447,899.	356,644.	59,538.	31,717
b	TREEWORK	58,276.	58,276.		01 - 1
С	RECRUITMENT	45,259.	9,801.	13,958.	21,500
d	STAFF RECOGNITIONS	16,119.	3,858.	12,261.	2 600
	All other expenses	15,143.	8,396.	3,147.	3,600
5	Total functional expenses. Add lines 1 through 24e	21,443,058.	17,026,235.	3,005,111.	1,411,712
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 Fight following SOP 98-2 (ASC 958-720)				
					Form 990 (201

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GIRL SCOUTS OF NORTHERN CALIFORNIA

94-1551410 Page 11

'ar	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	2,421,159.	1	1,680,422
	2	Savings and temporary cash investments	11,134,830.	2	12,412,596
	3	Pledges and grants receivable, net	264,587.	3	1,350,197
	4	Accounts receivable, net	295,589.	4	205,959
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	563,126.	8	548,31
	9	Prepaid expenses and deferred charges	536,134.	9	542,81
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 26,849,683.			
	b	Less: accumulated depreciation 10b 14,588,706.	10,813,585.	10c	<u>12,260,97</u> 8,637,93
	11	Investments - publicly traded securities	8,558,110.	11	8,637,93
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	34,587,120.	16	37,639,21
	17	Accounts payable and accrued expenses	1,759,659.	17	1,826,60
	18	Grants payable		18	
	19	Deferred revenue	661,691.	19	653,42
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	138,030.	21	114,86
	22	Loans and other payables to current and former officers, directors, trustees,			
		key employees, highest compensated employees, and disqualified persons.			
		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of	001 041		242 02
		Schedule D	281,341.	25	243,03
_	26	Total liabilities. Add lines 17 through 25	2,840,721.	26	2,837,92
		Organizations that follow SFAS 117 (ASC 958), check here ► X and			
		complete lines 27 through 29, and lines 33 and 34.	20 050 700		20 474 70
	27	Unrestricted net assets	28,850,709.	27	29,474,78
	28	Temporarily restricted net assets	1,732,421.	28	4,162,76
	29	Permanently restricted net assets	1,163,269.	29	1,103,74
		Organizations that do not follow SFAS 117 (ASC 958), check here			
		and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	~~				
	32 33	Retained earnings, endowment, accumulated income, or other funds	31,746,399.	32 33	34,801,290

Form 990 (2018)
Part X Balance Sheet

	1990 (2018) GIRL SCOUTS OF NORTHERN CALIFORNIA	94-1	551410	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	24,693		
2	Total expenses (must equal Part IX, column (A), line 25)	2	21,44		
3	Revenue less expenses. Subtract line 2 from line 1	3	3,24		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	31,74		
5	Net unrealized gains (losses) on investments	5	-19		
6	Donated services and use of facilities	6		1,3:	20.
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	<u>34,80</u>	1,2	<u>90.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				1
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			000	L

Form **990** (2018)

SCHEDULE A	SC	HE	DL	JLE	Α
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Department of the Treasury

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047
2018
Open to Public Inspection

Interna	I Rever	nue Service		Go to www.irs.go	/Form990 for instruction	ons and th	ie latest ir	nformation.		Inspec	tion		
Nam	e of t	the organizati								identification			
			GIRL	SCOUTS OF	NORTHERN CAL	LIFORM	JIA		9	4-15514	10		
Pa	rtl	Reason	for Public (Charity Status (All organizations must co	omplete th	is part.) Se	ee instruction	S.				
The o	organ	ization is not a	a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)						
1		A church, co	nvention of ch	urches, or associatio	n of churches described	l in sectio	n 170(b) (1	1)(A)(i).					
2		A school des	cribed in sect i	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990 or 99	90-EZ).)						
3		A hospital or	a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).					
4		A medical res	search organiz	ation operated in cor	njunction with a hospital	described	in sectio	on 170(b)(1)(A)(iii). Enter	the hospital's	name,		
		city, and stat	e:										
5		An organizati	on operated fo	or the benefit of a col	llege or university owned	l or operat	ed by a go	overnmental u	init describe	ed in			
		section 170	(b)(1)(A)(iv). (C	Complete Part II.)									
6		A federal, sta	te, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).					
7		An organizati	on that norma	lly receives a substa	ntial part of its support fr	rom a gove	ernmental	unit or from t	he general p	oublic describ	ed in		
		section 170(b)(1)(A)(vi). (C	omplete Part II.)									
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9		An agricultur	al research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a	land-grant	college			
		or university	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of	the college	or			
		university:											
10	X	An organizati	on that norma	lly receives: (1) more	than 33 1/3% of its supp	port from a	contributio	ns, members	hip fees, an	d gross receip	ots from		
		activities rela	ted to its exem	npt functions - subjec	ct to certain exceptions,	and (2) no	more thar	n 33 1/3% of i	ts support f	rom gross inv	estment		
		income and u	unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the or	ganization a	fter June 30,	1975.		
		See section	509(a)(2). (Cor	mplete Part III.)									
11		An organizati	on organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	09(a)(4).					
12		An organizati	on organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to ca	arry out the	purposes of o	ne or		
		more publicly	supported or	ganizations describe	d in section 509(a)(1) d	r section	509(a)(2).	See section	509(a)(3). C	heck the box	in		
		lines 12a thro	ough 12d that o	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and	d 12g.				
а		Type I. A s	upporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), t	ypically by	giving			
		the suppor	ted organizatio	on(s) the power to req	gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	pporting			
		organizatio	n. You must c	complete Part IV, Se	ections A and B.								
b		Type II. A s	supporting org	anization supervised	or controlled in connect	tion with its	s supporte	ed organizatio	on(s), by hav	ing			
		control or r	nanagement o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	orted			
		organizatio	n(s). You mus	t complete Part IV,	Sections A and C.								
С		_ Type III fur	nctionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functiona	lly integrate	d with,			
		_ its support	ed organizatio	n(s) (see instructions)). You must complete I	Part IV, Se	ctions A,	D, and E.					
d		Type III no	n-functionally	integrated. A supp	orting organization oper	ated in co	nnection v	vith its suppo	rted organiz	ation(s)			
			•		ation generally must sat	-		-	d an attentiv	reness			
		requiremer	nt (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.					
е			•		written determination fro			Туре I, Туре	II, Type III				
		functionally	/ integrated, or	Type III non-function	nally integrated supportion	ng organiz	ation.						
f			of supported c	•									
g				about the supporte		(iv) is the ora:	anization listed	() A manual a	functions	() A maximum (of others		
	(i) Name of supp organizatior 		(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount o support (see i	,	(vi) Amount support (see in			
		organization	•		above (see instructions))	Yes	No						
<u> </u>													
Tota								1					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018 17

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Schedule A (Form 990 or 990 EZ) 2018 GIRL SCOUTS OF NORTHERN CALIFORNIA

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support										
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")										
2	Tax revenues levied for the organ-										
	ization's benefit and either paid to										
	or expended on its behalf										
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)										
	Public support. Subtract line 5 from line 4.										
Sec	ction B. Total Support			1	1						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
7	Amounts from line 4										
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,										
	and income from similar sources \dots										
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 VI.)										
11	Total support. Add lines 7 through 10										
12	Gross receipts from related activities,	,	,			12					
13	First five years. If the Form 990 is for	-	s first, second, thir	d, fourth, or fifth ta	ax year as a sectior	n 501(c)(3)	. —				
Sad	organization, check this box and stor ction C. Computation of Publi) here	contago				·····				
	Public support percentage for 2018 (I		•			14	%				
	Public support percentage from 2017					15	%				
108	33 1/3% support test - 2018. If the other here. The organization qualifies										
h	stop here. The organization qualifies33 1/3% support test - 2017. If the organization		-			or more check th					
N	and stop here. The organization qual										
17-	10% -facts-and-circumstances test					and line 14 is 10%					
178	and if the organization meets the "fac										
	meets the "facts-and-circumstances"			-	-	it vinow the organ					
h	10% -facts-and-circumstances test	-	-	• • • •							
		-									
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization										
18	Private foundation. If the organization		•								
				,, . , , OF 17 k		edule A (Form 990					

Schedule A (Form 990 or 990-EZ) 2018 GIRL SCOUTS OF NORTHERN CALIFORNIA Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support (c) 2016 (d) 2017 Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (e) 2018 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 2667594 1881859. 2548069. 1800607. 4547353.13445482. include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 26455887.28487766.28391120.30069646.29299633.142704052 organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 29123481.30369625.30939189.31870253.33846986.156149534 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 36,191. 118,573. 68,712. 1630905. 179,326. 2033707. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year 0 c Add lines 7a and 7b 179,326. 36,191. 118,573. 68,712. 1630905. 2033707 .54115827 Public support. (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) 🕨 (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 29123481. 30939189.31870253.33846986.156149534 30369625. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, 487,556. 524,511. 527,838. 697,569. 444,224. 2681698. and income from similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 444,224. 487,556. 524,511. 527,838. 697,569. 2681698. c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital 7,640. 9,298. 1,240 18,178. assets (Explain in Part VI.) 29575345.30866479.31464940.32398091.34544555.158849410 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► Section C. Computation of Public Support Percentage 97.02 % Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 15 15 98.01 16 Public support percentage from 2017 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 1.69 17 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) % 1.49 18 18 Investment income percentage from 2017 Schedule A, Part III, line 17 % 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not ► X more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2017. 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 (Form 990 or 990-EZ) 2018 832023 10-11-18 19

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Schedule A (Form 990 or 990-EZ) 2018 GIRL SCOUTS OF NORTHERN CALIFORNIA

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes." *complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

Schedule A (Form 990 or 990-EZ) 2018

10b

Yes No

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Schedule A (Form 990 or 990 EZ) 2018 GIRL SCOUTS OF NORTHERN CALIFORNIA 94-1551410 Page 5 Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		L
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		Í
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u></u>	the supported organization(s). tion D. All Type III Supporting Organizations	1		Ĺ
Sec	tion D. An Type in Supporting Organizations		Vee	Na
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	_		
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
-	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	0-		
Ŀ.	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	<u>0</u> L		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		i.

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Schedule A (Form 990 or 990-EZ) 2018

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	edule A (Form 990 or 990-EZ) 2018 GIRL SCOUTS OF NORTHERN			94-1551410 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust on	n Nov. 20, 1970 (explain i	in Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must cor	nplete S	ections A through E.	
Sect	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
_7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		

emergency temporary reduction (see instructions)

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2018

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Schedule A (Form 990 or 990 EZ) 2018 GIRL SCOUTS OF NORTHERN CALIFORNIA

Fai	Type III Non-Functionally Integrated 509	allo supporting Orga	inizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	\$	
_4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
_7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	e organization is responsive	1	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	1	1	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
C	From 2015			
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2018 distributable amount			
<u> i</u>	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
<u>a</u>	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

832027 10-11-18

Schedule A (Form 990 or 990-EZ) 2018 GIRL SCOUTS OF NORTHERN CALIFORNIA 94–1551410 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:
GROSS INCOME FROM FUNDRAISING EVENTS
2014 AMOUNT: \$ 0.
2015 AMOUNT: \$ 2,713.
2016 AMOUNT: \$ 0.
2017 AMOUNT: \$ 0.
2018 AMOUNT: \$ 0.
GROSS INCOME FROM GAMING ACTIVITIES
2014 AMOUNT: \$ 7,640.
2015 AMOUNT: \$ 6,585.
2016 AMOUNT: \$ 1,240.
2017 AMOUNT: \$ 0.
2018 AMOUNT: \$ 0.
832028 10-11-18 Schedule A (Form 990 or 990-EZ) 2018

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

** PUBLIC DISCLOSURE COPY

Schedule of Contributors

Attach to Form 990. Form 990-EZ. or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2018

Employer identification number

	GIRL SCOUTS OF NORTHERN CALIFORNIA	94-1551410
Organization type (che		<u> </u>
Filers of:	Section:	
Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

94-1551410

GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>2</u>		\$30,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>3</u>		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4 		\$12,150.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	,,	\$\$,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u> 823452 11-08-18		\$16,250.	Person X Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

	-		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$68,482.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$8,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ <u>25,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$9,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$1,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>12</u> 823452 11-08		\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2018)
020402 11-08		Schedule B (FORM	330, 330-EZ, UI 330-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

94-1551410

GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(c) Total contributions	(d) Type of contribution
\$ <u>16,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
\$ <u>10,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
\$14,120.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
\$7,106.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
\$22,850.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
	(c) Total contributions (c) Total contributions (c) Total contributions (c) Total contributions (c) Total contributions (c) Total contributions (c) Total contributions

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(c) Total contributions	(d) Type of contribution
- \$\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
- _ \$5,150.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
- \$\$14,733.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
- \$\$200,000.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
\$8,570.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
- \$ <u>20,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
	(c) Total contributions (c) Total contributions

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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94-1551410

GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
 		\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>26</u>		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$52,370.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$6,048.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>29</u>		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30	,	\$ <u>1,000,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) (b) No. Name, address, and ZIP	(c) 7 + 4 Total contributions	(d) Type of contribution
<u></u>	\$6,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) (b) No. Name, address, and ZIP	(c) 7 + 4 Total contributions	(d) Type of contribution
	\$\$	Person X Payroll
(a) (b) No. Name, address, and ZIP	(c) 7 + 4 Total contributions	(d) Type of contribution
	\$5,100.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) (b) No. Name, address, and ZIP	(c) 7 + 4 Total contributions	(d) Type of contribution
	\$\$\$.	Person X Payroll
(a) (b) No. Name, address, and ZIP	(c) 7 + 4 Total contributions	(d) Type of contribution
	\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) (b) No. Name, address, and ZIP	(c) 7 + 4 Total contributions	(d) Type of contribution
<u>36</u> 823452 11-08-18	\$\$\$_,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

823452 11-08-18		Schedule B (Form	990, 990-EZ, or 990-PF) (2018)
			(Complete Part II for noncash contributions.)
<u>42</u>		\$10,500.	Person X Payroll Noncash
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution
 (a)	(b)	\$14,266.	(Complete Part II for noncash contributions.)
			Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 39 </u>		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u></u>		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 37 </u>		\$70,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>43</u>		\$5,051.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
44		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
45		\$10,166.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>46</u>		\$5,600.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(c)	(b)		1
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) <u>No.</u> <u>47</u>	(0) Name, address, and ZIP + 4	(c) Total contributions \$49,997.	(d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution Person X Payroll
<u>No.</u>	Name, address, and ZIP + 4	Total contributions \$ 49,997. (c) Total contributions \$ 5,000.	Type of contribution Person X Payroll

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GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 49 </u>		\$20,014.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 50 </u>		\$30,250.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 53 </u>		\$5,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>54</u> 823452 11-08-18		\$20,000.	Person X Payroll (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55		\$20,360.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
56		\$ <u>1,508,404.</u>	PersonXPayrollImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>		\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) No. <u>58</u>	(b) Name, address, and ZIP + 4	(c) Total contributions \$5 , 000 .	(d) Type of contribution Person X Payroll Noncash (Complete Part II for noncash contributions.)
No.		Total contributions	Type of contribution Person X Payroll
<u>No.</u>	Name, address, and ZIP + 4	Total contributions \$ 5,000. (c)	Type of contribution Person X Payroll Noncash (Complete Part II for noncash contributions.) (d)
No. 58 (a) No. 59 (a)	Name, address, and ZIP + 4	Total contributions \$ 5,000. (c) Total contributions \$ 20,900. (c) (c)	Type of contribution Person X Payroll Image: Complete Part II for noncash contributions.) (d) Type of contribution Person X Payroll Image: Complete Part II for noncash Noncash Image: Complete Part II for noncash contributions.) (d) Complete Part II for noncash contributions.) (d) Complete Part II for noncash contributions.)
No. 58 (a) No. 59	Name, address, and ZIP + 4	Total contributions \$ 5,000. (c) Total contributions \$ 20,900. (c) Total contributions \$ 20,900. \$ 7,600.	Type of contribution Person X Payroll Image: Complete Part II for noncash contributions.) (d) Type of contribution Person X Payroll Image: Complete Part II for noncash Noncash Image: Complete Part II for noncash contributions.)

16110804 758661 29475

94-1551410

GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

823452 11-08-18		Schedule B (Form	990, 990-EZ, or 990-PF) (2018)
			(Complete Part II for noncash contributions.)
		\$6,000.	Payroll Noncash
66			Person X
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$5,000.	Payroll Noncash (Complete Part II for noncash contributions.)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution
(a)	(b)	(c)	(d)
64		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u></u>		\$5,300.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
62		\$170,852.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$7,328.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 67 </u>		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>68</u>		\$14,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 69 </u>		\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 70 </u>		\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>72</u> 823452 11-08-18		\$10,000.	Person X Payroll (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
73		\$7,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
74_		\$40,640.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
75		\$20,300.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
76		\$7,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>77</u>		\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
78		\$24,997.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
823452 11-08	0-10	Schedule B (Form	990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Employer identification number

94-1551410

GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u></u>		- \$ <u>15,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
823452 11-08-18		Schedule B (Form	990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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Employer identification number

94-1551410

GIRL SCOUTS OF NORTHERN CALIFORNIA

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	MITS AND RELATED CHICO ACTIVITY CENTER COSTS		
22			
		\$17,250.	04/17/19
(a)		(c)	
No. from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions.)	Date received
	SHARES OF MORGAN STANLEY STOCK		
43			
		\$ 1,751.	06/10/19
		\$ <u> </u>	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of noncash property given	(See instructions.)	
	EPING BAGS		
45			
		\$ 116.	06/25/19
		\$116.	
(a)		(c)	
No. from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions.)	Date received
1,6	82 SHARES OF CINCINNATI BELL INC. STOCK AND 130 SHARES		
55 OF	COCA-COLA COMPANY STOCK		
		\$ 20,360.	12/18/18
		\$ <u>20,500</u>	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
10,	864 SHARES OF VISA, INC. STOCK		
56			
		\$ 1,486,304.	12/11/18
		\$ 1,486,304.	
(a)		(0)	
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
	SHARES OF APPLE, INC. STOCK		
78	·		
			10/00/10
		\$ 24,997.	12/28/18

40

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)	

Page	4
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ame of organi	ization	Employer identification number				
IRL SCO	OUTS OF NORTHERN CALIF	ORNIA	94-1551410			
fre	om any one contributor. Complete columns (a)	through (e) and the following line ent	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the year. rv. For organizations			
со	mpleting Part III, enter the total of exclusively religious, of	haritable, etc., contributions of \$1,000 or	less for the year. (Enter this info. once.) \$			
a) No.	se duplicate copies of Part III if additional s					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
		[
			T			
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I						
		(e) Transfer of gift				
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
_		[
a) No. from						
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
		[
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
	Transforcedo nome editarse en	d 7 ID + 4				
	Transferee's name, address, an	u ZIF + 4	Relationship of transferor to transferee			

16110804 758661 29475

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.



Internal Revenue Service	
Name of the organizati	on

GIRL SCOUTS OF NORTHERN CALIFORNIA

Employer identification number 94-1551410

Pa	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	iting that the assets held in donor advised	funds
	are the organization's property, subject to the organization's ex	clusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor adv	visors in writing that grant funds can be use	ed only
	for charitable purposes and not for the benefit of the donor or o	donor advisor, or for any other purpose con	ferring
_	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the orga	nization answered "Yes" on Form 990, Par	t IV, line 7.
1	Purpose(s) of conservation easements held by the organization	i (check all that apply).	
	Preservation of land for public use (e.g., recreation or edu	ucation)	cally important land area
	Protection of natural habitat	Preservation of a certifie	d historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation contribution in the form of a	
	day of the tax year.		Held at the End of the Tax Year
a			
b			
с	Number of conservation easements on a certified historic struct		<u>2c</u>
d	Number of conservation easements included in (c) acquired aft		
•	listed in the National Register		2d
3	Number of conservation easements modified, transferred, relea	ased, extinguished, or terminated by the org	ganization during the tax
	year	manut in Incented N	
4	Number of states where property subject to conservation ease Does the organization have a written policy regarding the perio		
5	violations, and enforcement of the conservation easements it h		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha		
U			ation casements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling	on of violations, and enforcing conservation	easements during the year
-	► \$		
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(h)(4	.)(B)(i)
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizatio	n's financial statements that describes the	organization's accounting for
	conservation easements.		
Pa	t III Organizations Maintaining Collections of A	Art, Historical Treasures, or Othe	r Similar Assets.
	Complete if the organization answered "Yes" on Form 9	90, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue statement	t and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition	pition, education, or research in furtherance	of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe	es these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue statement and	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu	cation, or research in furtherance of public	service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical treas	· •	in, provide
	the following amounts required to be reported under SFAS 116		
а	Revenue included on Form 990, Part VIII, line 1		
<u>b</u>	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instructions f	or Form 990.	Schedule D (Form 990) 2018

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	Schedule D (Form 990) 2018 GIRL SCOUTS OF NORTHERN CALIFORNIA						5141(
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Oth	er Simila	r Assets	s _{(contir}	ued)
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that are a	significant u	use of its c	ollection	items
	(check all that apply):							
а	Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	е						
с	Preservation for future generations							
4	Provide a description of the organization's co	ellections and explain	how they further th	e organization's ex	empt purpo	ose in Part	XIII.	
5	During the year, did the organization solicit o	r receive donations o	f art, historical treas	ures, or other simil	ar assets			
	to be sold to raise funds rather than to be ma	aintained as part of th	e organization's col	lection?		[Yes	No No
Par	t IV Escrow and Custodial Arran						line 9, or	
	reported an amount on Form 990, Pa		C					
1a	Is the organization an agent, trustee, custodi	an or other intermedi	arv for contributions	s or other assets no	ot included			
	on Form 990, Part X?						Yes	X No
b	If "Yes," explain the arrangement in Part XIII					······ <u> </u>		
~							Amount	
c	Beginning balance				1c		/ unour	
	Additions during the year							
	Distributions during the year							
f	Ending balance							
	Did the organization include an amount on Fe					X	Yes	No
	If "Yes," explain the arrangement in Part XIII.				• • • • • • • • • • • • • • • • • • • •			X
Par		f the organization and	swered "Yes" on Fo	rm 990, Part IV, lin	e 10.			
		(a) Current year	(b) Prior year	(c) Two years back		years back	(e) Four	years back
1 a	Beginning of year balance	1,158,222.	1,124,882.	832,829		797,528.	(0) 1 001	882,132.
	Contributions	, , -	, , , .	, 183,121	_			1 -
с С	Net investment earnings, gains, and losses	20,726.	61,058.	132,604		69,638.		-50,009.
d	Grants or scholarships							
	Other expenditures for facilities							
е		33,665.	27,718.	23,672		34,337.		34,595.
	and programs		27,710.	20,072	•	<u> </u>		<u> </u>
	Administrative expenses	1,145,283.	1,158,222.	1,124,882	5	832,829.		797,528.
g	End of year balance				•	,52,025.		151,520.
2	Provide the estimated percentage of the curr	ent year end balance) neiù as.				
a	Board designated or quasi-endowment		_%					
b	Permanent endowment 77.43	<u>%</u> 2.57 %						
С	· · · ·							
•	The percentages on lines 2a, 2b, and 2c sho	-						
за	Are there endowment funds not in the posse	ssion of the organizat	tion that are held an	a administered for	the organiz	ation	٦	V N.
	by:						0.0	Yes No X
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
	If "Yes" on line 3a(ii), are the related organiza						3b	
4 Dar	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		vment funds.					
I ai			David IV / line 11a O	an Farma 000 Davit	V line 10			
	Complete if the organization answere					<u> </u>	()) []	
	Description of property	(a) Cost or ot	• • •		Accumulat		(d) Book value	
		basis (investm	,	0,660.	depreciation		1 01/	
	Land				704 0			<u>),660.</u>
	Buildings				<u>,784,9</u>			5,185.
	Leasehold improvements			2,870.	125,3			7,563.
	Equipment			1,891.	851,9			9,908.
	Other			3,129.	826,4			<u>5,661.</u>
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part >	<u>(, column (B), line 10</u>	Dc.)),977.
						Schedule	D (Form	n 990) 2018

Schedule D	(Form 990) 2018	GIRL	SCOUTS	OF	NORTHERN	CALIFORNIA	
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Part VII	Investments - Other Securities.						
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11b, See Form 990, Part X, line 1	2					

(a) Description of security or Category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DEFERRED RENT LIABILITY	188,735.
(3)	CAPITAL LEASE OBLIGATION	54,298.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. ((Column (b) must equal Form 990 Part X, col. (B) line 25.)	243,033.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018

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Sche	dule D (Form 990) 2018 GIRL SCOUTS OF NORTHERN CA	LIFORN	IA	94-	1551410 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With I	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				
1	Total revenue, gains, and other support per audited financial statements			1	24,341,206.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-195,231.		
b	Donated services and use of facilities	2b	10,770.		
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d	-169,181.		
е	Add lines 2a through 2d			2e	-353,642.
3	Subtract line 2e from line 1			3	24,694,848.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	. 4b	-2,988.		
с	Add lines 4a and 4b			4c	-2,988.
				5	24,691,860.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				
	rt XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per F		
	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents With	Expenses per F		n.
	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents With	Expenses per F		
Pa	Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents With	Expenses per F	Retur	n.
Pa	Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	ents With	Expenses per F	Retur	n.
Pa 1 2	Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ents With	Expenses per F	Retur	n.
Pa 1 2 a	TXII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ents With 	Expenses per F 9,450.	Retur	n.
Pa 1 2 a b	Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	ents With	Expenses per F	Retur	n. 21,286,315.
Pa 1 2 b c d	Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	ents With	Expenses per F 9,450. 2,988.	Retur	n. 21,286,315. 12,438.
Pa 1 2 b c d	TXII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	ents With	Expenses per F 9,450. 2,988.	Retur	n. 21,286,315.
Pa 1 2 a b c d e	Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	ents With	Expenses per F 9,450. 2,988.	Retur	n. 21,286,315. 12,438.
Pa 1 2 b c d 3	t XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	ents With	Expenses per F 9,450. 2,988.	Retur	n. 21,286,315. 12,438.
Pa 1 2 3 4	TXII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	ents With 2a2b2c2d2d4a	Expenses per F 9,450. 2,988.	Retur	n. 21,286,315. 12,438. 21,273,877.
Pa 1 2 3 4	XII Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	Expenses per F 9,450. 2,988. 169,181.	Retur	n. 21,286,315. 12,438. 21,273,877. 169,181.
Pa 1 2 a b c d e 3 4 a b c 5	XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per F 9,450. 2,988. 169,181.	1 2e 3	n. 21,286,315. 12,438. 21,273,877.

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

PART IV, LINE 2B:

CUSTODIAL FUNDS CONSIST PRIMARILY OF MEMBERSHIP FEES COLLECTED THAT WILL

BE REMITTED TO GSUSA AND OTHER FEES COLLECTED FOR THE USE OF MEMBERS.

PART V, LINE 4:

THE ENDOWMENT OWNED BY THE COUNCIL IS INTENDED BY ITS DONORS TO GENERATE

INCOME FOR SPECIFIC RESTRICTED PURPOSES AND UNRESTRICTED REVENUE FOR THE

COUNCIL'S OPERATIONS.

PART X, LINE 2:

THE COUNCIL IS A TAX-EXEMPT ORGANIZATION UNDER INTERNAL REVENUE SERVICE

CODE (IRC) 501(C)(3) AND THE CALIFORNIA TAX CODE.

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Schedule D (Form 990) 2018

				CALIFORNIA	94-1551410	Page 5
Part XIII Supplemental Inform	mation (continued)				

MANAGEMENT EVALUATED THE COUNCIL'S TAX POSITIONS AND CONCLUDED THAT THE COUNCIL HAD MAINTAINED ITS TAX-EXEMPT STATUS AND HAD NOT TAKEN UNCERTAIN TAX POSITIONS THAT REQUIRED ADJUSTMENT TO THE FINANCIAL STATEMENTS. THEREFORE, NO PROVISION OR LIABILITY FOR INCOME TAXES HAS BEEN INCLUDED IN THE FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS: FINANCIAL AID INCLUDED WITH REVENUE ON FINANCIALS -169,181. PART XI, LINE 4B - OTHER ADJUSTMENTS: RENTAL EXPENSES NETTED WITH REVENUE ON TAX RETURN -2,988. PART XII, LINE 2D - OTHER ADJUSTMENTS: RENTAL EXPENSES NETTED WITH REVENUE ON TAX RETURN 2,988. PART XII, LINE 4B - OTHER ADJUSTMENTS: FINANCIAL AID INCLUDED WITH REVENUE ON FINANCIALS 169,181.

Schedule D (Form 990) 2018

832055 10-29-18

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	raisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047
(Form 990 or 990-EZ)		e organization answered "Yes" on organization entered more than \$15				or 19,	or if the	2018
Department of the Treasury Internal Revenue Service		Attach to Form 990				~ n		Open to Public Inspection
Name of the organization		to www.irs.gov/Form990 for instru	uction	sanu	the latest informati	on.	Employer id	entification number
		OUTS OF NORTHERN CA					94-1553	
		Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E	Z filers are not
· · ·	complete this part	 ed funds through any of the followin	a activ	ities. (Check all that apply.			
a Mail solicitat	-		-		overnment grants			
	email solicitations				nment grants			
c Phone solici d In-person so		g 🛄 Special	fundra	ising	events			
•		r oral agreement with any individual	(includ	ing of	ficers, directors, trus	tees,	or	
		art VII) or entity in connection with pr					Ye	s 🗌 No
	•	viduals or entities (fundraisers) pursua	ant to	agreer	ments under which th	he fur	ndraiser is to b	e
compensated at le	ast \$5,000 by the				1			1
(i) Name and addres or entity (func		(ii) Activity	(iii) fundr have c or con contribu	ustody trol of	(iv) Gross receipts from activity	tò (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
								-
Total								
		n is registered or licensed to solicit o	ontrib	utions	or has been notified	it is e	exempt from r	egistration
or licensing.								
LHA For Paperwork Re	eduction Act Noti	ce, see the Instructions for Form 9	90 or	990-E	Z. 9	Schee	dule G (Form	990 or 990-EZ) 2018

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Sche	edule	G (Fo	rm 99	0 or	990-E	Z) 2018	GIRL	SCOUTS	OF	NORTHERN	CALIFORNIA	94-	1551410
					_	-							

Part II

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			(a) Event #1 CELEBRATING GIRLS	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
Revenue						101.010
Ве́	1	Gross receipts	134,210.			134,210
	2	Less: Contributions	134,210.			134,210
	3	Gross income (line 1 minus line 2)	<u> </u>			
	4	Cash prizes				
	5	Noncash prizes				
Senses	6	Rent/facility costs	9,150.			9,150
Direct Expenses	7	Food and beverages	54,980.			54,980
ā	8	Entertainment	500.			500
	9	Other direct expenses				16,389
	10	Direct expense summary. Add lines 4 throug			►	81,019
	11 11	Net income summary. Subtract line 10 from Gaming. Complete if the organization				-81,019
Hevenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (d
Ť	1	Gross revenue				
ses	2	Cash prizes				
xpen	3	Noncash prizes				
Direct Expenses						
ום	4	Rent/facility costs				
		Rent/facility costs Other direct expenses				
	5		Yes%	└── Yes% └── No	☐ Yes% No	
	5	Other direct expenses	└── Yes % └── No		No	
	5 6 7	Other direct expenses	Yes% No 9h 5 in column (d)	□ No	<u>No</u> No ►	
	5 6 7 8	Other direct expenses	Yes % No gh 5 in column (d) 7 from line 1, column (d)	No No	No ►	
9	5 6 7 8 Ent	Other direct expenses	gh 5 in column (d)	□ No	No ►	
e e e	5 6 7 8 Ent	Other direct expenses	gh 5 in column (d) 7 from line 1, column (d)	No No	No ►	
9 a b	5 6 7 8 Ent 1 Is t 0 If "	Other direct expenses	yes% volume for the set of	states?	No ► ear?	Yes N
a b Da	5 6 7 8 Ent 1 Is t 0 If "	Other direct expenses	yes% volume for the set of	states?	No ► ear?	Yes N

Page 2

Sch	edule G (Form 990 or 990-EZ) 2018 GIRL SCOUTS OF NORTHERN CALIFORNIA 94-	1551410	Page 3
11	Does the organization conduct gaming activities with nonmembers?		No
40	to administer charitable gaming?	Yes	└── No
	Indicate the percentage of gaming activity conducted in:	13a	%
	The organization's facility An outside facility		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		/0
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No No
b	o If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$		
c	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation 🕨 \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
	Mandatory distributions: I is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	🗌 No
	organization's own exempt activities during the tax year 🕨 💲		
Fa	ITTIV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and (v); and (v); and (v); and (v); and (v)	art III, lines 9, 9	96, 106,
8320	83 10-03-18 Schedule G (For	m 990 or 990.	-EZ) 2018
	49		,

SCHEDULE I (Form 990)		Grants and Oth overnments, ar plete if the organizatio	nd Individual	ls in the Ŭni ' on Form 990, Pa	ted States		OMB No. 1545-0047 2018 Open to Public
Department of the Treasury Internal Revenue Service		► Go to www.i	rs.gov/Form990 fc		nation.		Inspection
Name of the organization GIRI	SCOUTS OF NO	RTHERN CALIF	ORNIA				Employer identification number $94 - 1551410$
Part I General Information o	n Grants and Assistance						
 Does the organization mainta criteria used to award the gra Describe in Part IV the organization 	nts or assistance?	-			-		ion X Yes No
2 Describe in Part IV the organi.	stance to Domestic Orga				anization answered "Y	es" on Form 990 Par	t IV line 21 for any
	more than \$5,000. Part II ca						
1 (a) Name and address of orgative or government		(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
2 Enter total number of section		•	e line 1 table				
3 Enter total number of other or LHA For Paperwork Reduction							Schedule I (Form 990) (2018)

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Schedule I (Form 990) (2018) GIRL SCOUTS OF NORTHERN CALIFORNIA

94-1551410

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CAMPS AND PROGRAMS	487	122,461.	0.		
EMBERSHIP	4848	196,905.	0.		
Part IV Supplemental Information. Provide the informa	tion required in Part I, lin	e 2; Part III, column	(b); and any other ac	ditional information.	
PART I, LINE 2:					
IRL SCOUTS OF NORTHERN CALIFOR	RNIA STAFF MA	KES DECISI	ONS REGARD	ING	

ELIGIBILITY OF GIRLS FOR FINANCIAL AID BASED ON FINANCIAL AID CRITERIA AND

DONOR RESTRICTIONS. GIRL SCOUTS OF NORTHERN CALIFORNIA PROVIDES GRANTS TO

LOW-INCOME GIRLS TO ASSIST WITH THE PAYMENT OF MEMBERSHIP DUES AND OTHER

PROGRAM FEES. IN ADDITION, PARTIAL FINANCIAL AID FOR CAMP FEES IS GIVEN

BASED ON THE FINANCIAL NEEDS OF GIRLS ATTENDING RESIDENT OR DAY CAMPS OR

PROGRAM EVENTS.

SC	HEDULE J	Compensation Information	I	OMB No. 1	545-004	47
(Fo	rm 990)	-		20	10)
	GIRL SCOUTS OF NORTHERN CALIFORNIA rt1 Questions Regarding Compensation Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990 Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal reside Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, of If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prio to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? Indicate which, if any, of the following the filing organization used to establish the compensation of the organization to establish compensation committee Written employment contract Independent compensation consultant X Compensation survey or study Form 990 of other organization: Approval by the board or compensation committee Participate in, or receive payment from, an equity-based compensation arrangement? Prives' to any of lines 4a-c, li			20	10)
Dena	tment of the Treasury	1990) For certain Officers, Directors, Trustes, Key Employees, and Highest Compensated Employees In of the Treasury evenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 23.			Publ	ic
			Inspe			
Nam	e of the organizatio			identificatio		mber
			94-1	1551410	0	
Ра	rt I Question	s Regarding Compensation				<u> </u>
					Yes	No
1a			990,			
	_					
h	If any of the hoves	on line 1a are checked, did the organization follow a written policy regarding payment or				
b	•			1b		
2						
-	-			2		
3	Indicate which, if a	ny, of the following the filing organization used to establish the compensation of the organiza	tion's			
	X Compensation	n committee Written employment contract				
	Form 990 of o		committee			
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re	lated organization:				
а						X
b						X
С				4c		X
	If "Yes" to any of lin	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	.					
-						
5			וח			
-	-			E a		x
						X
n				50		
6			n			
0	-					
а	-	-		6a		x
						X
-						
7			3			
				7	х	
8						
				8		X
9						
			<u></u>	9		
LHA		GIRL SCOUTS OF NORTHERN CALIFORNIA 94–15 Questions Regarding Compensation Questions Regarding Compensation heck the appropriate box(es) if the organization provide any of the following to or for a person listed on Form 990, atr VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or imbursement or provision of all of the expenses described above? If "No," complete Part III to explan id the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, ustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? dicate which, if any, of the following the filing organization used to establish the compensation of the organization to stablish compensation consultant More Compensation survey or study Independent compensation consultant More Compensation areage of control payment? articipate in, or receive payment from, a supplemental nonqualified retirement plan? articipate in, or receive payment from, a supplemental nonqualified retirement plan? articipate in, or receive payment from, a supplemental		dule J (Forn	n 990)) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) MARINA PARK SUTTON	(i)	322,373.	10,000.	0.	6,875.	837.	340,085.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(2) CARL M NICHOLS	(i)	171,970.	0.	0.	4,821.	11,557.	188,348.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(3) LILLIAN SAMUEL	(i)	175,973.	0.	0.	4,382.	10,657.	191,012.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(4) CONCETTA RUGGIERO	(i)	235,791.	0.	0.	5,478.	1,438.	242,707.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(5) LEINANI MALIG	(i)	138,045.	5,000.	0.	3,641.	8,327.	155,013.	0.
DIR OF FIN(THRU 1/19),CFO(FROM 2/19)	ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
()	ii)							
	(i)							
(ii)							
	(i)							
(ii)							
	(i)							
(ii)							
	(i)							
(ii)							
	(i)							
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	(i)							
(ii)							
	(i)							
(ii)							
	(i)							
(ii)							
	(i)							
(ii)							
	(i)							
(ii)							

Schedule J (Form 990) 2018

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 7:

THE CEO'S COMPENSATION IS REVIEWED BY THE EVALUATION COMMITTEE. UPON

COMPLETION OF ITS ANNUAL REVIEW, THE EVALUATION COMMITTEE RECOMMENDS THE

CEO'S SALARY AND BONUS (IF ANY). THE CEO'S 2018 BONUS WAS BASED ON THIS

REVIEW.

Schedule J (Form 990) 2018

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2018

Open to Public

Inspection

Department of the Treasury
Internal Revenue Service

Part I

1 2

3

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11

12 13 Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 Attach to Form 990.

Attach to Form 990.

Cars and other vehicles

Boats and planes

Intellectual property

Securities - Publicly traded

Securities - Closely held stock

trust interests ______ Securities - Miscellaneous ______

Securities - Partnership, LLC, or

Qualified conservation contribution -

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization GIRL SCOUTS OF NORTHERN CALIFORNIA

Х

Employer identification number
94-1551410

CINE DCCCID	01 10010	TITTICI OLIT.	JI 1001110			
t I Types of Property						
	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts		
Art - Works of art						
Art - Historical treasures						
Art - Fractional interests						
Books and publications						
Clothing and household goods						

8

1,543,319.FMV

	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other \blacktriangleright (<u>PERMITS AND R</u>)	X	1		<u>,250.</u>				
26	Other (<u>ADVERTISING</u>)	X	2		<u>,495.</u>				
27	Other ► (<u>FOOD</u>)	X	3		<u>,145.</u>				
28	Other (EQUIPMENT)	X	7	1	<u>,713.</u>	FMV			
29	Number of Forms 8283 received by the organized	zation during	the tax year for co	ontributions					
	for which the organization completed Form 82	83, Part IV, D	onee Acknowledg	ement	29			0	
								Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines	s 1 throug	h 28, that it			
	must hold for at least three years from the date	e of the initia	l contribution, and	which isn't require	d to be u	sed for			
	exempt purposes for the entire holding period?	?					<u>30a</u>		X
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance p	oolicy that re	quires the review o	f any nonstandard	contribut	tions?	31	Х	

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
b If "Yes," describe in Part II.
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2018

32a

Х

832141 10-18-18

Schedule M (Form 990) 2018 GIRL SCOUTS OF NORTHERN CALIFORNIA

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

PART I, OTHER TYPES OF PROPERTY:

SUPPLIES

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 13

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 860.

(D) METHOD OF DETERMINING REVENUE: FMV

SLEEPING BAGS

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 116.

(D) METHOD OF DETERMINING REVENUE: FMV

Schedule M (Form 990) 2018

94-1551410

Page 2

832142 10-18-18

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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.

► Go to www.irs.gov/Form990 for the latest information.



94-1551410

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

RETAIL AND OTHER - WE OPERATE 6 RETAIL LOCATIONS AND AN ONLINE STORE,

GIRL SCOUTS OF NORTHERN CALIFORNIA

WHICH EQUIPS GIRLS WITH PROGRAM SUPPORT ITEMS SUCH AS UNIFORMS, KITS

AND BADGES. WE PROVIDE SUPPORT WITH NO DIRECT REVENUE TO ACCESS

REGISTRATION SYSTEMS AND TRAINING MODULES TO SIMPLIFY AND ENHANCE THE

GIRL SCOUT LEADERSHIP EXPERIENCE.

EXPENSES \$ 4,148,261. INCLUDING GRANTS OF \$ 0. REVENUE \$ 574,474.

FORM 990, PART VI, SECTION A, LINE 6:

GIRL SCOUTS OF NORTHERN CALIFORNIA IS A MEMBERSHIP ORGANIZATION. THERE WERE 67,000 TOTAL MEMBERS OF GIRLS SCOUTS OF THE USA DURING THE FISCAL YEAR ENDED SEPTEMBER 30, 2019, OF WHICH 28,000 MEMBERS WERE ADULTS AND 39,000 MEMBERS WERE GIRL MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A:

VOTING MEMBERS OF THE COUNCIL CONSIST OF 1) DELEGATES ELECTED BY SERVICE 2) DELEGATES AT LARGE APPOINTED BY THE BOARD, 3) MEMBERS OF THE UNITS, 4) GIRL BOARD PARTICIPANTS, 5) MEMBERS OF THE COUNCIL'S BOARD OF DIRECTORS, BOARD DEVELOPMENT COMMITTEE WHO ARE NOT OTHERWISE VOTING MEMBERS OF THE AND 6) DELEGATES ELECTED TO THE NATIONAL COUNCIL. ALL VOTING COUNCIL. MEMBERS OF THE COUNCIL ARE MEMBERS OF THE GIRL SCOUTS MOVEMENT. 14 YEARS OF AGE OR OVER, AND REGISTERED WITH THE GIRL SCOUTS OF THE UNITED STATES OF AMERICA ("GSUSA") THROUGH THE GIRL SCOUTS OF NORTHERN CALIFORNIA. THE VOTING MEMBERS OF THE GIRL SCOUTS OF NORTHERN CALIFORNIA ELECT THE OFFICERS OF THE COUNCIL, THE DIRECTORS-AT-LARGE OF THE BOARD OF DIRECTORS, THE MEMBERS OF THE BOARD DEVELOPMENT COMMITTEE, AND THE DELEGATES AND LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2018)

16110804 758661 29475

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Name of the organization				Employer identification number
	GIRL	SCOUTS OF	NORTHERN CALIFORNIA	94-1551410
ALTERNATIVES '	TO THE	NATIONAL	COUNCIL OF GSUSA.	

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

THE VOTING MEMBERS, IN ADDITION TO THE POWER TO ELECT OFFICERS, HAVE THE POWER TO AMEND THE ARTICLES OF INCORPORATION AND BYLAWS, AND MAY HAVE OTHER POWERS CONFERRED BY THE NONPROFIT CODE OF THE STATE OF CALIFORNIA.

FORM 990, PART VI, SECTION B, LINE 11B:

GIRL SCOUTS OF NORTHERN CALIFORNIA'S FINANCE STAFF AND ITS TAX PREPARER, HOOD & STRONG, WORK TOGETHER TO GATHER THE REQUIRED INFORMATION NECESSARY TO COMPLETE THE FORM 990. THE INITIAL DRAFT IS REVIEWED BY THE TAX PREPARER AND THE ORGANIZATION'S FINANCE STAFF. AFTER THE RETURN IS DISCUSSED AND REVIEWED, RECOMMENDED CHANGES ARE REFLECTED ON THE RETURN. THE FORM 990 IS THEN REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS OR ITS DESIGNATED REPRESENTATIVE. A PUBLIC DISCLOSURE DRAFT IS PROVIDED TO ALL BOARD MEMBERS FOR REVIEW PRIOR TO FILING. THE RETURN IS THEN FILED WITH THE IRS.

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

GIRL SCOUTS OF NORTHERN CALIFORNIA HAS A CONFLICT OF INTEREST POLICY THAT REQUIRES THAT ALL MEMBERS OF THE BOARD AND BOARD COMMITTEES COMPLETE ANNUAL INDEPENDENCE AND CONFLICT OF INTEREST STATEMENTS TO AFFIRM THAT EACH PERSON HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, HAS READ AND UNDERSTANDS THE POLICY, AND HAS AGREED TO COMPLY WITH THE POLICY. ADDITIONALLY, THE STATEMENT REQUIRES THE INDIVIDUALS TO PROVIDE INFORMATION WITH RESPECT TO FAMILY MEMBERS AND TO DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST THAT ARISE DURING THE YEAR. GIRL SCOUTS OF NORTHERN CALIFORNIA ALSO REQUIRES PERIODIC REVIEW OF TRANSACTIONS AND RELATIONSHIPS TO ENSURE 832212 10-10-18 Schedule O (Form 990 or 990-EZ) (2018)

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

THE BOARD DELEGATED THE REVIEW OF THE CEO'S COMPENSATION TO THE CEO

EVALUATION COMMITTEE AS PART OF THE ANNUAL EVALUATION PROCESS.

COMPARABILITY DATA WAS PROVIDED BY THE HR DEPARTMENT FOR COMPARABLE

POSITIONS IN THE GEOGRAPHIC AREA. THE COMMITTEE MET IN CLOSED SESSION AND

HAS CONTEMPORANEOUS WRITTEN DOCUMENTATION OF THEIR REVIEW. THE COMPENSATION

OF THE CHIEF BUSINESS OFFICER AND CHIEF FINANCIAL OFFICER IS REVIEWED AND

APPROVED BY THE FINANCE COMMITTEE. THE COMPENSATION OF THE CHIEF MEMBERSHIP

AND MARKETING OFFICER, CHIEF DEVELOPMENT OFFICER, AND CHIEF MISSION

DELIVERY OFFICER WAS REVIEWED BY THE CHIEF EXECUTIVE OFFICER, AND INCLUDED

A REVIEW OF COMPARABILITY DATA AND SUBSTANTIATION OF THE DECISION.

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

GIRL SCOUTS OF NORTHERN CALIFORNIA MAKES ITS AUDITED FINANCIAL STATEMENTS

AVAILABLE TO THE PUBLIC THROUGH ITS OWN WEBSITE. THE DOCUMENT IS ALSO

AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF TIME SET FORTH IN SEC.

6104(D).

FORM 990, PART VII, SECTION A:

THE COUNCIL PARTICIPATES IN THE NATIONAL GIRL SCOUT COUNCIL RETIREMENT

PLAN, A MULTI-EMPLOYER NONCONTRIBUTORY DEFINED BENEFIT PENSION PLAN

SPONSORED BY GIRL SCOUTS OF THE USA. THE PLAN WAS FROZEN EFFECTIVE JULY

31, 2010. AMOUNTS RELATED TO SUCH BENEFITS ARE NOT INCLUDED FOR TWO

INDIVIDUALS, BECAUSE THE VALUE OF BENEFITS RECEIVED CANNOT BE MEASURED.

60

(Form	990)	

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number 94 - 1551410

Department of the Treasury Internal Revenue Service Name of the organization

SCHEDULE R

GIRL SCOUTS OF NORTHERN CALIFORNIA

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
GIRL SCOUTS OF THE USA - 13-1624016							
420 5TH AVENUE							
NEW YORK, NY 10018	YOUTH SERVICE	NEW YORK	501(C)(3)	LINE 10	NA		х
	_						
	_						
	-						

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

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018 GIRL SCOUTS OF NORTHERN CALIFORNIA

94-1551410 Page 2

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

	· · · · · · · · · · · · · · · · · · ·											
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	((k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate ations?	Code V-UBI amount in box 20 of Schedule	Gene mana part	ral or aging ner?	Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	No	
	-											
	-											
	-											
	1											
	{											
	4											

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
		country)		01 11 03 0		233013		Yes	No

GIRL SCOUTS OF NORTHERN CALIFORNIA Schedule R (Form 990) 2018

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b		Х
	Gift, grant, or capital contribution from related organization(s)	1c	X	
	Loans or loan guarantees to or for related organization(s)	1d		X
	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		X
g		1g		X
h	Purchase of assets from related organization(s)	1h	X	
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
	Performance of services or membership or fundraising solicitations for related organization(s)	11	X	
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
o	Sharing of paid employees with related organization(s)	10		X
р	Reimbursement paid to related organization(s) for expenses	1p		X
q	Reimbursement paid by related organization(s) for expenses	1q	X	
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
<u>(2)</u>			
<u>(3)</u>			
<u>(4)</u>			
<u>(</u> 5)			
<u>(</u> 6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners set 501(c)(3) orgs.? Yes No		(h) Dispro tiona allocatio Yes	Code V-UBI amount in box 20 of Schedule K-1	(j) General o managing partner? Yes NO	(k) r Percentage ownership
						163			
					1				

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Provide additional information for responses to questions on Schedule R. See instructions.

SCHEDULE R, PART II

GIRL SCOUTS OF NORTHERN CALIFORNIA IS A CHARTERED MEMBER OF GIRL SCOUTS

OF THE USA ("GSUSA"). AS PART OF BEING A CHARTERED MEMBER, THE COUNCIL

COLLECTS MEMBERSHIP FEES ON BEHALF OF GSUSA AND TRANSFERS 100% OF THESE

FEES TO GSUSA. THE COUNCIL ALSO PURCHASES A MAJORITY OF ITS MERCHANDISE

INVENTORY FROM GSUSA.

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