# **PUBLIC DISCLOSURE COPY**

PLEASE FILE IN A SAFE PLACE

**ARMANINO**<sup>LLP</sup>

### \*\* PUBLIC DISCLOSURE COPY \*\* Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

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Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information. 2022 Open to Public Inspection

AI	For th	e 2022 calendar year, or tax year beginning OCT 1, 2022 and e	ending SI	EP 30, 2023					
B	Check if applicab	C Name of organization		D Employer identi	fication number				
	Addre								
	Name		43-066247	1					
	Initial returr		E Telephone numb	ber					
	Final return			314-592-230	00				
	termi ated			<b>G</b> Gross receipts \$	22,055,327.				
	Amer	S1. LOUIS, MO 03140		H(a) Is this a group					
	Appli tion pendi	F Name and address of principal officer: DAWN 1. NOTVA		for subordinate	es? Yes X No				
		SAME AS C ABOVE		H(b) Are all subordinates					
		empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) c	or 527		a list. See instructions				
_	Vebsi			H(c) Group exempt					
	orm o art I	f organization: X Corporation Trust Association Other Summary	<b>L</b> Year o	of formation: 1927	M State of legal domicile: MO				
<b>Г</b>	1			OF COURACE					
e	1	Briefly describe the organization's mission or most significant activities: BUILDIN CONFIDENCE AND CHARACTER, WHO MAKE THE WORLD A BETTER PLACE.	AG GINID	or cookide,					
Governance	2	Check this box if the organization discontinued its operations or dispos	ed of more	than 25% of its not a	seate				
verr	3	Number of voting members of the governing body (Part VI, line 1a)	3 24						
ĝ	4	Number of independent voting members of the governing body (Part VI, line 1b)							
ა ა	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		-					
itie	6	Total number of volunteers (estimate if necessary)		-					
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		a <sup>0</sup> .					
_<	1				<b>b</b> <sup>0</sup> .				
				Prior Year	Current Year				
Ð	8	Contributions and grants (Part VIII, line 1h)		7,237,998	98. 2,371,249.				
Revenue	9	Program service revenue (Part VIII, line 2g)	venue (Part VIII, line 2g)						
se v	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)							
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)							
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		17,676,549	· · ·				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		409,607	· · · · · ·				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0					
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		7,255,332 25,901					
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)		25,901	• •••				
Expenses	. D			6,388,553	7,362,960.				
_	1 17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		14,079,393	, ,				
	19	Revenue less expenses. Subtract line 18 from line 12	3,597,156						
OL				ginning of Current Year					
ets (	20	Total assets (Part X, line 16)	41,876,901						
Ass	21	Total liabilities (Part X, line 26)	1,281,377						
Net Assets	22	Net assets or fund balances. Subtract line 21 from line 20	-	40,595,524	, ,				
	art II	Signature Block		· · ·					

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer	Date									
Here	DAWN L. KOTVA, BOARD CHAIR										
	Type or print name and title										
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN							
Paid	JENNIFER M. VACHA	JENNIFER M. VACHA	08/07/24	self-employed P01251998							
Preparer	Firm's name ARMANINO LLP		F	irm's EIN 94–6214841							
Use Only	Firm's address 6 CITYPLACE DRIVE, SUITE										
	ST. LOUIS, MO 63141 Phone no.314-5										
May the I	RS discuss this return with the preparer shown abo	ve? See instructions		X Yes	No						
				000							

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2022) GIRL SCOUTS OF EASTERN MISSOURI INC.	43-0662471 Page <b>2</b>
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	GIRL SCOUTING BUILDS GIRLS OF COURAGE, CONFIDENCE, AND CHARACTER, WHO	
	MAKE THE WORLD A BETTER PLACE.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
2	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	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	ers, the total expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$13,279,714. including grants of \$449,500. ) (Rever	nue\$10,735,541.)
	SEE SCHEDULE O FOR PROGRAM SERVICE ACCOMPLISHMENTS	
4b	(Code:) (Expenses \$ including grants of \$ ) (Rever	
40	(Code:) (Expenses \$) (Reven	nue \$ )
	SEE SCHEDULE O	
4c	(Code:) (Expenses \$ including grants of \$) (Rever	nue \$ )
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$	)
4e	Total program service expenses 13,279,714.	/
		Form <b>990</b> (2022)
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Form 990 (2022) GIRL SCOUTS OF EAS GIRL SCOUTS OF EASTERN MISSOURI INC. 43-0662471 Page 3

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes." complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	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		х
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
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 Rev. Proc. 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			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, 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?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		v	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
	Part VI	<u>11a</u>	Λ	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		x
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u>л</u>
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11c		x
Ь	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
u		11d	х	
۵	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e	х	
	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)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	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		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
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
	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		х
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. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	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	0000	Х
232003	12-13-22	Form	990	(2022)

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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		х	
04-	Schedule J	23	Δ	
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? <i>If "Yes," answer lines 24b through 24d and complete</i>	24a		x
h	Schedule K. If "No," go to line 25a 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	210		
-	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
~=	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? 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? <i>If "Yes," complete</i>	32		x
33	Schedule N, Part II	32		
55	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		х
	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			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	х	
Pa	Note: All Form 990 filers are required to complete Schedule O           t V         Statements Regarding Other IRS Filings and Tax Compliance	30	21	
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 28			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	<u>1c</u>	X 000	 /065:
232004	+ 12-13-22	Form	990	(2022)

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Form	990 (2022) GIRL SCOUTS OF EASTERN MISSOURI INC.		43-066247	1	P	age <b>5</b>				
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					0				
					Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return	2a	195							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?									
				3a		Х				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b						
	At any time during the calendar year, did the organization have an interest in, or a signature or other a									
	financial account in a foreign country (such as a bank account, securities account, or other financial a		-	4a		х				
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 Ad	count	s (FBAR)							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		х				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac			5b		x				
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			50						
Ua				60		х				
<b>L</b>	any contributions that were not tax deductible as charitable contributions?			<u>6a</u>						
D	If "Yes," did the organization include with every solicitation an express statement that such contribution are the deductible 2		gins	Ch.						
-	were not tax deductible?			6b						
7	Organizations that may receive deductible contributions under section 170(c).		ide data dia anna 0	-	v					
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser			7a	X					
				7b	X					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			_		v				
	to file Form 8282?			7c		X				
	If "Yes," indicate the number of Forms 8282 filed during the year	7d								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		:?	7e		X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 88	99 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion fil	e a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	e							
	sponsoring organization have excess business holdings at any time during the year?									
9	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.)	11b								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10411	·	12a						
	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.									
а	Is the organization licensed to issue qualified health plans in more than one state?			13a						
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans	13b								
с	Enter the amount of reserves on hand	13c								
				14a		х				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner									
	excess parachute payment(s) during the year?			15		х				
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incon	ne?	16		х				
10	If "Yes," complete Form 4720, Schedule O.		ie?	10						
17		livition								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17						
	If "Yes," complete Form 6069.			17						
020005				Form	990	(2022)				
232005	12-13-22					(2022)				

990 (2022) GIRL SCOUTS OF EASTERN MISSOURI INC.		43-06624		P	age 6
t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 th	nrough 7b b	elow, and for a	"No" r	respon	se
					X
ion A. Governing Body and Management					
	1 1			Yes	No
	<u>1a</u>	24			
		24			
	· · · · · · · · · · · · · · · · · · ·		-		
		iner			v
			2		X
					x
					X
					X
			<u> </u>		X
•			0		
			7-		x
					<u> </u>
			76	x	
			10		
		•	82	x	
			9		x
		./		Yes	No
Did the organization have local chapters, branches, or affiliates?			10a		X
	•		10b		
			11a	Х	
		0			
			12a	х	
			12b	Х	
	,		12c	х	
			13	Х	
			14	Х	
Did the process for determining compensation of the following persons include a review and approval	l by indeper	ndent			
persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
The organization's CEO, Executive Director, or top management official			15a	Х	
Other officers or key employees of the organization			15b	Х	
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	nent with a				
taxable entity during the year?			16a		X
If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	e its particip	oation			
in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization's				
			16b		
tion C. Disclosure					
List the states with which a copy of this Form 990 is required to be filedNONE					
Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 990-T (se	ction 501(c)(3)	s only)	availat	ole
for public inspection. Indicate how you made these available. Check all that apply.					
		,			
Describe on Schedule O whether (and if so, how) the organization made its governing documents, con	nflict of inte	rest policy, and	d finano	cial	
statements available to the public during the tax year.					
State the name, address, and telephone number of the person who possesses the organization's boo	ks and reco	ords			
State the name, address, and telephone number of the person who possesses the organization's boo BARBARA WILSON - 314-592-2333	ks and reco	ords			
State the name, address, and telephone number of the person who possesses the organization's boo	ks and reco	ords		<b>990</b>	
	VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 it to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI to A. Governing Body and Management Enter the number of voting members of the governing body at the end of the tax year [] 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 on Schedule O. Enter the number of voting members included on line 1a, above, who are independent [] Did any officer, director, trustee, or key employees have a family relationship or a business relationship officer, director, trustee, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 9 Did the organization members, stockholders? [] Did the organization have members or stockholders? [] Did the organization have members, stockholders? [] Did the organization nave prior [] body? [] Store any overnance decisions of the organization nave any objece listed in Part VII. Section A, who cannot be read organization frame with autority to act on behalf of the governing body? [] Store any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be read organization frame with which the organization nave written policies and procedures governing the activities of such ch	Image: Construction of the second s	Image: Comparison of the	Image: Covernance, Management, and Disclosure. For each 'ves' response to lines 2 through 7b below, and for a 'No' for the line disp, or 10b below, describe the of-constantence, processes, or changes on Schedule 0. See instructions. Check it Schedule 0 contains a response or note to any line in this Part VI         Image: Coverning Body and Management       Imagement, and the any line in this Part VI         Image: Coverning Body and Management       Imagement         Image: Coverning Body and Management       Imagement, and the any line in this Part VI         Image: Coverning Body and Management       Imagement, and the any line in the powring body, or the governing body, or the governing body, or the governing body and the any other         Image: Coverning Body and Management       Imagement, any line in this Part VI         Image: Coverning Body and Management       Imagement, any line in this Part VI         Image: Coverning Body and Management       Imagement, any line in the powring body, or the governing body, or the governing body in the governing body?       Imagement, any end for a governing body?         Image: Imagement, and the governing body?       Imagement devices or the granzation have members, stockholders, or the preson who had the power to elect or appoint one or more members, stockholders, or discreter, director, trustee, or key employee listed in Part VI, Section A, who cannot be reached at the organization have members, stockholders, or discreter and activeses and actruses orgeneng body?       Imagement, and acti	Image: Seven and comparison of the seven in the seven is the seven in the seven is the seven is the seven is the

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Form 990 (2022)	GIRL SCOUTS OF EASTERN MISSOURI INC.	43-0662471	Page 1								
Part VII Compens	sation of Officers, Directors, Trustees, Key Employees, Highest	Compensated									
Employees, and Independent Contractors											
Check if Sc	nedule O contains a response or note to any line in this Part VII										
Section A. Officers, D	irectors, Trustees, Key Employees, and Highest Compensated Employees										
1a Complete this table	for all persons required to be listed. Report compensation for the calendar year end	ing with or within the organization's	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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	Position (do not check more than one						Reportable	Reportable	Estimated
	hours per	box	box, unless p officer and a		rson i	s both	n an	compensation	compensation	amount of
	week				officer and a directo			r/trus T	tee)	from
	(list any	ector						the	organizations	compensation
	hours for	or dir	e			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	truste		e	bensi		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tr	ional		ploye	t com		1099-NEC)		and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) BONNIE BARCZYKOWSKI	40.00	_								
CEO (THRU 2/23)		1		х				476,904.	0.	27,789.
(2) JULIE CUBBAGE	40.00									
CFO				х				170,088.	0.	8,573.
(3) KELLY DALEEN	40.00									
CHIEF MEMBERSHIP & MKTING						x		160,667.	0.	14,657.
(4) KATHLEEN MACK	40.00									
CHIEF HR OFFICER						X		156,666.	0.	12,125.
(5) JANINE LAWLER	40.00									
CHIEF DEVELOPMENT OFFICER						X		134,731.	0.	12,551.
(6) AMBER OVERTON	40.00									
CHIEF DEI OFFICER						X		125,985.	0.	9,385.
(7) KATHLEEN DABROWSKI	40.00									
DIRECTOR CAPITAL PROJ & RI						X		114,202.	0.	9,422.
(8) DR. NATISSIA SMALL	40.00									
CEO (EFF. 4/23)				х				0.	0.	0.
(9) DAWN L. KOTVA	1.00									
BOARD CHAIR		х		х				0.	0.	0.
(10) KIMBERLY HODGE-BELL	1.00								_	_
1ST VICE CHAIR		х		х				0.	0.	0.
(11) JENNY BARTLOW	1.00								_	_
2ND VICE CHAIR		х		х				0.	0.	0.
(12) DONNA DOERHOFF	1.00								_	_
TREASURER		х		х				0.	0.	0.
(13) CYNDY DONATO	1.00									
SECRETARY		х		х				0.	0.	0.
(14) LISA BELL-REIM	1.00									
DIRECTOR		Х						0.	0.	0.
(15) CLARA BONSTEAD	1.00									
DIRECTOR (THRU 3/23)	1.00	х					<u> </u>	0.	0.	0.
(16) LAUREL "BUFF" BURKEL	1.00									2
DIRECTOR	1 00	X					<u> </u>	0.	0.	0.
(17) VICKI DAWKINS	1.00								<u>,</u>	0
DIRECTOR		Х			I			0.	0.	<sup>0</sup> . Form <b>990</b> (2022)

232007 12-13-22

Form 990 (2022)

#### 16130807 701245 CUS000020085

2022.06000 GIRL SCOUTS OF EASTERN MI CUS00001

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Form 990 (2022) GIRL SCOUTS OF EASTERN MISSOURI INC. 43-06624										6247	1	Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) (B) Name and title Average hours per week					rson i	) than o s both pr/trus	an	<b>(D)</b> Reportable compensation from	<b>(E)</b> Reportable compensatio from related		an	(F) timate nount o other	
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization: (W-2/1099-MIS 1099-NEC)		fr org and	pensa om the anizati d relate inizatio	e ion ed
(18) MICHAEL DOZIER	1.00												
DIRECTOR		Х						0.		٥.			٥.
(19) ERIC EOLOFF	1.00												
DIRECTOR		Х						0.		0.			0.
(20) JEROMEY FARMER	1.00												0
DIRECTOR	1 00	Х						0.		0.			0.
(21) KALEN FUMAGALLI DIRECTOR	1.00	x						0.		٥.			0
(22) MEGHANA HEBBAR	1.00	A						0.		<u> </u>			0.
DIRECTOR	1.00	x						0.		٥.			0.
(23) CHRISTINE IOVALDI	1.00	<u>л</u>						0.		<u>.</u>			<u> </u>
DIRECTOR		x						0.		٥.			Ο.
(24) MIRA IYER	1.00									-			
DIRECTOR (THRU 3/23)		х						0.		٥.			Ο.
(25) MIKE KIEFER	1.00												
DIRECTOR		х						0.		٥.			0.
(26) JULIE LEVERENZ	1.00												
DIRECTOR		Х						0.		٥.			٥.
1b Subtotal								1,339,243.		0.		94,	502.
c Total from continuation sheets to Part VI								0.					0.
d Total (add lines 1b and 1c)								1,339,243.		0.		94,	502.
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable	•			7
compensation from the organization												Yes	No
3 Did the organization list any <b>former</b> officer,	-			•	•		•	• • •				100	
line 1a? If "Yes," complete Schedule J for su											3		X
4 For any individual listed on line 1a, is the su			-						-			х	
and related organizations greater than \$150	,		'								4	^	
5 Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes," com</i>	-				-			-			5		х
Section B. Independent Contractors	Diele Schedule	<u> </u>	or su	<u>CH </u>	Jers	011 .					5	I	
1 Complete this table for your five highest cor	npensated ind	lepe	nder	nt co	ontra	acto	s th	nat received more than \$	100,000 of comp	ensat	ion fro	m	
the organization. Report compensation for t	he calendar ye	ear e	ndin	g w	ith c	or wi	thin	the organization's tax y	ear.				
(A)								(B)		_	(C		
Name and business							_	Description of s	ervices	С	omper	nsatio	<u>า</u>
ADVERTISERS PRINTING COMPANY, INC, 12													
VANDEVENTER AVE., ST. LOUIS, MO 63110	)							PRINTING SERVICES				148,	980.
SOUTHRIDGE CONSTRUCTION CO, INC	7.0							CONCERNICETON CERVIT	CEC			112	517
8549 GIRL SCOUT ROAD, PEVELY, MO 6307 PREP NETWORKS, 502 EARTH CITY PLAZA,							-	CONSTRUCTION SERVI	CES			143,	<u> </u>
200, EARTH CITY, MO 63045	DIE							OUTSOURCED IT SERV	ICES			131,	937
IDEAL LANDSCAPE GROUP							-					101,	
6252 OLSEN ROAD, ST. LOUIS, MO 63129								CONSTRUCTION SERVI	CES			129,	495.
CHARTWELLS DINING SERVICE													
PO BOX 91337, CHICAGO, IL 60693								FOOD SERVICES				123,	762.
2 Total number of independent contractors (ir	ncluding but no	ot lin	nited	l to t	thos	se lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz					(	6							
SEE PART VII, SECTION A CONTINU	JATION SHEE	TS									Form	990 (2	2022)

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Form 990 GIRL SCOUTS OF EASTERN MISSOURI INC.								43-0662471						
Part VII Section A. Officers, Directors, Tru	stees, Key Er	nployees, and Highest C					est (	Compensated Employe						
(A)	(B)	(C)					(D)	(E)	(F)					
Name and title	Average				ition	1		Reportable	Reportable	Estimated				
	hours	(cl	hecł	all '	that	app	ly)	compensation	compensation	amount of				
	per							from	from related	other				
	week	_				oyee		the	organizations	compensation				
	(list any	recto				empl		organization	(W-2/1099-MISC)	from the				
	hours for	or di	ee			ated		(W-2/1099-MISC)		organization				
	related	ustee	trust		96	bens				and related				
	organizations below	ual tr	tional		vold	tcorr	~			organizations				
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pensated em ployee	Former							
(27) KEITH MARTY	1.00	=	=	0	×		ш							
DIRECTOR		x						0.	0.	0.				
(28) MARK MURRAY	1.00													
DIRECTOR		x						0.	0.	0.				
(29) SONNI NOLAN	1.00													
DIRECTOR		x						0.	0.	0.				
(30) DANA PLONKA	1.00									·				
DIRECTOR		x						0.	0.	0.				
(31) THUY VI QUACH-BRAIG	1.00									·				
DIRECTOR		x						0.	0.	0.				
(32) JEFF STEINER	1.00													
DIRECTOR		x						0.	0.	0.				
(33) ANASTASIA STEVENSON	1.00													
DIRECTOR		x						0.	0.	0.				
(34) SUSAN L. THOMAS	1.00													
DIRECTOR (THRU 3/23)		x						0.	0.	0.				
(35) JESSICA WILLINGHAM	1.00								- •					
DIRECTOR (THRU 9/23)		x						0.	0.	0.				
(36) MIKAYLA WOODS	1.00													
DIRECTOR		x						0.	0.	0.				
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		1			1									
		-	-			-				<u> </u>				
		1												
	1	I	I	1	I	1	I							
Total to Part VII, Section A, line 1c														
								1						

232201 04-01-22

			Check if Schedule O					(A)	(B)		(D)
								Total revenue	Related or exempt	Unrelated	Revenue exclu from tax und
									function revenue	business revenue	sections 512 -
ŝ	1	а	Federated campaigns		1a		401,706.				
and Other Similar Amounts		b									
Ĕ		с	Fundraising events		1c		171,474.				
ar /		d	Related organizations		1d		767,060.				
E		е	Government grants (cont	ributi	ons) <b>1e</b>		70,000.				
š		f	All other contributions, gifts,	, grant	s, and						
Ę			similar amounts not included	d abov			961,009.				
p		g	Noncash contributions included in	n lines 1	a-1f <b>1g</b>	5	42,950.				
ar		h	Total. Add lines 1a-1f					2,371,249.			
							Business Code	E20 EC0	520 560		
	2		CAMP FEES				900099	530,762.	530,762.		
ne		~	PROGRAM EVENTS				900099	181,417.	181,417.		
/eni		C									
Вe		d									
Revenue		e f	All other program service	rovo							
			Total. Add lines 2a-2f					712,179.			
	3		Investment income (inclu					, .			
	-							1,008,560.			1,008,5
	4	Ļ	Income from investment					· ·			
	5	5	Royalties		-		Г				
					(i) Real		(ii) Personal				
	6	a	Gross rents	6a							
		b	Less: rental expenses	6b							
		с	Rental income or (loss)	6c							
		d	Net rental income or (loss	s) <u></u>							
	7	a	Gross amount from sales of		(i) Securit		(ii) Other				
			assets other than inventory	7a	4,594,0	57.					
		b	Less: cost or other basis								
5			and sales expenses								
			Gain or (loss)					262.002			262.0
- I.			Net gain or (loss)			·····		363,003.			363,0
	8	а	Gross income from fundrais		•						
			including \$								
			contributions reported or		,		90,049.				
		<b>h</b>	Part IV, line 18 Less: direct expenses			8a 8b					
			Net income or (loss) from				127,1001	-37,081.			-37,0
	۵		Gross income from gamir		•			,			
	5		Part IV, line 19			9a					
		b	Less: direct expenses			9b					
			Net income or (loss) from			_	•				
	10		Gross sales of inventory,								
			and allowances			10a	13,116,129.				
		b	Less: cost of goods sold			10k	3,255,871.				
			Net income or (loss) from			y		9,860,258.	9,860,258.		
T							Business Code				
Revenue	11	а	MISCELLANEOUS				900099	163,104.	163,104.		
-nue		b									
eve		с									
œ		d	All other revenue								
		е	Total. Add lines 11a-11d					163,104.			
	12	2	Total revenue. See instructi	ons	<u></u>			14,441,272.	10,735,541.	0.	1,334,4

GIRL SCOUTS OF EASTERN MISSOURI INC.

Form 990 (2022)

2022.06000 GIRL SCOUTS OF EASTERN MI CUS00001

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Part IX Statement of Functional Expenses

GIRL SCOUTS OF EASTERN MISSOURI INC.

43-0662471 Page 10

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 or note to any line in this Part IX (B) (C) (D) (A) Do not include amounts reported on lines 6b. Total expenses Management and general expenses Program service Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations 1 and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 449,500 449,500, individuals. See Part IV, line 22 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 5 Compensation of current officers, directors, trustees, and key employees 541,832, 179,189. 179,189 183,454. Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 5,852,501. 4,849,627. 580,975. 421,899. Other salaries and wages 7 8 Pension plan accruals and contributions (include 32,617 section 401(k) and 403(b) employer contributions) 252,677 208,921. 11,139. 630,339 496,724 91,939 41,676. 9 Other employee benefits 458,450 365,259 53,095 40,096. 10 Payroll taxes 11 Fees for services (nonemployees): Management а 65,136, 47,396. 12,864 4,876. b Legal 44,350, 32,271, 8,759 3,320. С Accounting Lobbying d Professional fundraising services. See Part IV, line 17 е 51,898 51,898. Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g 266,606 201,227 54,614 10,765. column (A), amount, list line 11g expenses on Sch 0.) 238,685 199,253, 3,781 35,651. Advertising and promotion 12 506,701 434,947. 37,889 33,865. 13 Office expenses \_\_\_\_\_ 14 Information technology Royalties 15 891,411 755,686. 105,774 29,951. 16 Occupancy 138,754, 28,810 168,906, 1,342. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 91,957. 59,946. 10,605. Conferences, conventions, and meetings ..... 21,406. 19 20 Interest Payments to affiliates 21 585,315 513,443 39,146 32,726. 22 Depreciation, depletion, and amortization ..... 309,120. 271,483 34,169 3,468. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) TROOP ALLOCATIONS 2,726,369. 2,726,369. а SUPPLIES 1,111,138 1,086,337 11,100 13,701. b MISCELLANEOUS 271,264. 246,994. 13,106. 11,164. С 17,105. 16,388. BAD DEBT 717. d 16,999 16,999. All other expenses е 906,697. 15,548,259 13,279,714 1,361,848 Total functional expenses. Add lines 1 through 24e 25 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

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232010 12-13-22

#### 16130807 701245 CUS000020085

if following SOP 98-2 (ASC 958-720)

Form 990 (2022)

40,595,524.

41,876,901.

31

32

33

39,410,605.

44,031,062.

Form 990 (2022)

**33** Total liabilities and net assets/fund balances

16130807 701245 CUS000020085

**10a** Land, buildings, and equipment: cost or other 25,715,523, basis. Complete Part VI of Schedule D \_\_\_\_\_ 10a 16,665,639. 8,248,322. 9,049,884. b Less: accumulated depreciation 10b 10c 9,580,549. 10,357,705. 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 Intangible assets 14 14 3,363,455. 4,940,682. Other assets. See Part IV, line 11 15 15 41,876,901. 44,031,062. 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 16 1,105,132. 1,164,832. Accounts payable and accrued expenses 17 17 18 18 Grants payable 126,194. 173,886. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to any current or former officer, director, 22 trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 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 50,051. 25 3,281,739. of Schedule D 1,281,377. 4,620,457. 26 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 22,484,323. 22,942,263. 27 Net assets without donor restrictions 27 16,468,342. Net assets with donor restrictions 18,111,201. 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30

GIRL SCOUTS OF EASTERN MISSOURI INC.

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

Cash - non-interest-bearing

Savings and temporary cash investments

Pledges and grants receivable, net

Accounts receivable, net

Loans and other receivables from any current or former officer, director,

Loans and other receivables from other disqualified persons (as defined

under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)

Notes and loans receivable, net

Inventories for sale or use

Prepaid expenses and deferred charges

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons

43-0662471 Pag

(A)

Beginning of year

3,039,459.

13,978,102.

3,160,510.

117,583.

215,944.

172,977.

1

2

3

4

5

6

7

8

9

(B)

End of year

16,827,647.

2,030,171.

376,538.

198,344.

250,091.

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Form 990 (2022)
Part X Balance Sheet

1

2

3

4

5

6

7

8

9

Assets

Liabilities

Net Assets or Fund Balances

31

32

Form	990 (2022) GIRL SCOUTS OF EASTERN MISSOURI INC.	43-0662471		Pa	<sub>ge</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	14,	441,	272.
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,	548,	259.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,	106,	987.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	40,	595,	524.
5	Net unrealized gains (losses) on investments	5		23,	035.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9		100,	967.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	39,	410,	605.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		X X
		-		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 on Schedule	0.			
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	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?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis X 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	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	·····	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				1
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	·····	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	

Form **990** (2022)

232012 12-13-22

SCHEDULE A	١
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Department of the Treasury Internal Revenue Service

(Form 990)

## **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.

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

OMB No. 1545-0047
2022
Open to Public

Inspection

#### Name of the organization

Name	of t	he organization						Employer	identification number
			COUTS OF EASTER						43-0662471
Par	tl	Reason for Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.	
The o	rgani	zation is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only o	one box.)			
1		A church, convention of chu	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).		
2		A school described in section	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Forn	n 990).)				
3		A hospital or a cooperative	hospital service orga	nization described in se	ection 170	(b)(1)(A)(ii	i).		
4 [		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name,
_		city, and state:							
5		An organization operated for	or the benefit of a col	lege or university owned	l or operat	ed by a go	vernmental u	nit describe	ed in
_		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	′0(b)(1)(A)	(v).		
7	X	An organization that norma	lly receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from th	ie general p	oublic described in
-		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8 [		A community trust describe			-				
9 [		An agricultural research org				-		-	•
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	e or
. <b>.</b> [	_	university:							
10 [		An organization that norma							
		activities related to its exem		•	. ,				0
		income and unrelated busin		(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	$\pi$ er June 30, 1975.
<b>4</b> 4		See section 509(a)(2). (Con	• •	volute test for public es	Total Coo	nantian E(	O(a)(A)		
11 [ 12 [		An organization organized a An organization organized a	-	•	•			rny out the	purposes of one or
		more publicly supported or	-	-	-			•	
		lines 12a through 12d that	-						
а		<b>Type I.</b> A supporting orga						-	aivina
-		the supported organization	-	-	•	-			
		organization. You must c							
b		<b>Type II.</b> A supporting org			ion with its	s supporte	d organizatio	n(s), by hav	ving
		control or management o	-				•		•
		organization(s). You mus	t complete Part IV,	Sections A and C.					
с		Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functional	ly integrate	ed with,
		its supported organization	n(s) (see instructions)	. You must complete I	Part IV, Se	ctions A,	D, and E.		
d		] Type III non-functionally	v integrated. A supp	orting organization oper	ated in cor	nnection w	ith its suppor	ted organiz	zation(s)
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	quirement and	an attentiv	/eness
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	<b>V</b> .		
е		Check this box if the orga	anization received a v	vritten determination fro	m the IRS	that it is a	Type I, Type I	I, Type III	
		functionally integrated, or		nally integrated supportion	ng organiz	ation.			
		r the number of supported o	•						
g		ide the following information ) Name of supported	about the supporte (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga	inization listed	(v) Amount of	monetary	(vi) Amount of other
		organization	(,	(described on lines 1-10	in your governi Yes	ng document? No	support (see in	,	support (see instructions)
		-		above (see instructions))	163				
Total									

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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	6,521,368.	8,685,140.	7,981,147.	7,237,998.	2,371,249.	32,796,902.
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	6,521,368.	8,685,140.	7,981,147.	7,237,998.	2,371,249.	32,796,902.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						6,429,619.
6	Public support. Subtract line 5 from line 4.						26,367,283.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	<b>(d)</b> 2021	(e) 2022	<b>(f)</b> Total
7	Amounts from line 4	6,521,368.	8,685,140.	7,981,147.	7,237,998.	2,371,249.	32,796,902.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	207,693.	205,251.	292,113.	577,342.	1,008,560.	2,290,959.
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.)	51,142.	41,486.	27,978.	145,543.	163,104.	429,253.
11	Total support. Add lines 7 through 10						35,517,114.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	65,922,198.
13	First 5 years. If the Form 990 is for th	e organization's fir	st, second, third, fo	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop						
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2022 (I	ine 6, column (f), di	ivided by line 11, c	olumn (f))		14	74.24 %
	Public support percentage from 2021					15	75.10 %
<b>1</b> 6a	33 1/3% support test - 2022. If the c	organization did no	t check the box on	line 13, and line 1	4 is 33 1/3% or m	ore, check this bo	and
	$\ensuremath{ \text{stop} here.}$ The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2021. If the c	organization did no	t check a box on lii	ne 13 or 16a, and I	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	10% -facts-and-circumstances test	- 2022. If the org	anization did not cl	heck a box on line	13, 16a, or 16b, a	and line 14 is 10% o	or more,
	and if the organization meets the fact						
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a put	olicly supported or	ganization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not cl	heck a box on line	13, 16a, 16b, or 1	17a, and line 15 is <sup>.</sup>	10% or
	more, and if the organization meets th	ne facts-and-circum	stances test, chec	k this box and <b>st</b>	<b>op here.</b> Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly :	supported organiz	zation	
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	, 16b, 17a, or 17b,	, check this box a	nd see instructions	
						Cohodulo A	(Form 990) 2022

Schedule A (Form 990) 2022

232022 12-09-22

#### 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						
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to						
the organization without charge $\dots$						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13</b> Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) orgar	ization,
check this box and stop here	ic Support Pa	rcontago				
15 Public support percentage for 2022 (			oolump (f))		15	04
16 Public support percentage for 2022 (	, (),	<b>,</b>	()/		15	<u> </u>
Section D. Computation of Inves						70
17 Investment income percentage for 20			ne 13. column (f))		17	%
<b>18</b> Investment income percentage from					18	%
19a 33 1/3% support tests - 2022. If the						
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2021. If the						3%, and
line 18 is not more than 33 1/3%, che	-					
20 Private foundation. If the organization						
232023 12-09-22					Sched	dule A (Form 990) 2022
		17				

2022.06000 GIRL SCOUTS OF EASTERN MI CUS00001

1

2

3a

3b

3c

4a

4b

4c

5a

<u>5b</u> 5<u>c</u>

6

7

8

9a

9b

9c

10a

Yes No

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **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 on 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 on 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 line 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.)

232024 12-09-22

| 10b | | Schedule A (Form 990) 2022

18 2 06000 CTRL S

GIRL SCOUTS OF EASTERN MISSOURI INC.

43-0662471 Page 5

> Yes No

1

2

		Yes	No
1 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
11c below, the governing body of a supported organization?	11a		
<b>b</b> A family member of a person described on line 11a above?	11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
detail in Part VI.	11c		

#### ection B. Type I Supporting Organizations

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in</i> <b>Part VI</b> <i>how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization and more than one supported organization's activities. If the organization had more than one supported organization's activities. If the organization had more than one supported organization's activities.</i>	
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	-
2	Did the organization operate for the benefit of any supported organization other than the supported	
		1

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,

#### upervised, or controlled the supporting organization Section 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			
	the supported experiation(a)	1		

#### ation(s) organ Section D. All Type III Supporting Organizations

			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			
	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 on line 2, above, 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		

#### Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to s	satisfy the Integral Part	Test during the year	(see instructions).
•	Check the box heat to the method that the organization used to s		i est during the year	(000 1100 000010)

- The organization satisfied the Activities Test. Complete line 2 below. а
- h The organization is the parent of each of its supported organizations. Complete line 3 below.

c 🗌		The organization supported a governmental entity.	Describe in Part VI how	you supported a governmental ent	ity (see instruction <u>s).</u>
-----	--	---------------------------------------------------	-------------------------	----------------------------------	---------------------------------

19

- 2 Activities Test. Answer lines 2a and 2b below.
- a 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.
- b Did the activities described on line 2a, above, 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.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. 232025 12-09-22

Yes No 2a 2b 3a 3b

Schedule A (Form 990) 2022

Part IV Supporting Organizations (continued)

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2022.06000 GIRL SCOUTS OF EASTERN MI CUS00001

Sche	edule A (Form 990) 2022 GIRL SCOUTS OF EASTERN MISSOURI IN	IC.		43-0662471	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations		
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970 ( <i>explain i</i>	7 Part VI). See instru	ctions.
	All other Type III non-functionally integrated supporting organizations must		•		
Sect	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Y (optional)	ear
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			
Sect	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Y (optional)	ear
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
a	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 0.015 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 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Yea	ar
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 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			

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) 2022

232026 12-09-22

232027 12-09-22

16130807 701245 CUS000020085

1	Amounts paid to supported organizations to accomplish exempt purposes			1	
2	Amounts paid to perform activity that directly furthers exemp				
-	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	e of supported organizations	<u>`</u>	3	
4	Amounts paid to acquire exempt-use assets	es of supported organizations	>	4	
5	Qualified set-aside amounts (prior IRS approval required - pro	avida dataila in Port VII		5	
6	Other distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive		- '	
U	(provide details in <b>Part VI</b> ). See instructions.	ie organization is responsive		8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2022	าร	Distributable Amount for 2022
_1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
<u>a</u>	From 2017				
b	From 2018				
C	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
<u>i</u>	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
b	Excess from 2019				
C	Excess from 2020				
d	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

Section D - Distributions

**Current Year** 

43-0662471 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 II, LINE 10, EXPLANATION FOR OTHER INCOME:

2018 AMOUNT: \$	51,142.	 	
2019 AMOUNT: \$	41,486.		
2020 AMOUNT: \$	27,978.	 	
2021 AMOUNT: \$	145,543.	 	
2022 AMOUNT: \$	163,104.	 	
			Schedule A (Form 990) 202

#### \*\* PUBLIC DISCLOSURE COPY \*\*

## Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2022

Employer identification number

GI	RL SCOUTS OF EASTERN MISSOURI INC.	43-0662471
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( <sup>3</sup> ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> 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**

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), 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 for an *exclusively* set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in t

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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).

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

Schedule B (Form 990) (2022)

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$767,060.	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
2		\$381,706.	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
3		\$75,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b)	(c) Total contributions	(d)
4	Name, address, and ZIP + 4	\$70,000.	Type of contribution         Person       X         Payroll       Image: Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions           \$         68,554.	Type of contribution         Person       X         Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2022)

#### Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

Name of organization

Part I

Page 2

Employer identification number

43-0662471

GIRL SCOUTS OF EASTERN MISSOURI INC.

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

16130807 701245 CUS000020085

2022.06000 GIRL SCOUTS OF EASTERN MI CUS00001

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IRL SCO	UTS OF EASTERN MISSOURI INC.		43-0662471
Part II	Noncash Property (see instructions). Use duplicate copies of P	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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
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		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
—		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

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Schedule B (Form 990) (2022)

#### 16130807 701245 CUS000020085

2022.06000 GIRL SCOUTS OF EASTERN MI CUS00001

Employer identification number

Page 3

Schedule B (Form 990) (2022)

Name of organization

from Part I     (b) Purpose of gift     (c) Use of gift     (d) Description of how gift is held	ame of or	rganization			Employer identification number		
Part III       Exclusivey religious, charitable, etc., contribution to organizations described in section 50 (e)(7), (6), e) (10) that fetal more than \$1,000 for the y to compare the time that the charitable etc., contribution generity, for expanding the etc., the compared columns (b) (e)(7), (6), e) (10) that fetal more than \$1,000 for the y to compare than \$1,000 for the y to compare that \$1,000 for that beta \$1,000 for the y to compare that \$1,000	IRL SCO	UTS OF EASTERN MISSOURI INC.			43-0662471		
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Part I	from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         a) No.       (e) Transfer of gift       (e) Transfer of gift       (d) Description of how gift is held         (e) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee       (e) Transfer of gift         (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (from from from (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee       (e) Transfer of gift         (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift       (f) Description of how gift is held	Part I						
Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (e) Transfer of gift       (e) Transfer of gift         (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held							
Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         a) No.       (e) Transfer of gift       (e) Transfer of gift       (d) Description of how gift is held         (e) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee       (e) Transfer of gift         (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (from from from (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee       (e) Transfer of gift         (e) Transfer of gift       (e) Transfer of gift       (e) Transfer of gift       (f) Description of how gift is held							
Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (a) No. from from part1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       (d) Description of how gift is held         (e) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No. from From Part1       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No. from From       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No. from From       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee       (e) Transfer of gift         (e) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee       (e) Transfer of gift							
Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (a) No.       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (e) Transfer of gift       (e) Transfer of gift         (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held	ŀ		(a) Transfor of git				
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from Part I       (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held	F						
from Part I     (b) Purpose of gift     (c) Use of gift     (d) Description of how gift is held							
from Part I     (b) Purpose of gift     (c) Use of gift     (d) Description of how gift is held							
from Part I     (b) Purpose of gift     (c) Use of gift     (d) Description of how gift is held							
Part 1 (e) Transfer of gift (f) Purpose of gift (a) No. from (b) Purpose of gift (c) Use of gift (c) Use of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift (e) Transfer of gift (e) Transfer of gift (e) Transfer of gift (e) Transfer of gift (f) Description of how gift is held (e) Transfer of gift (f) Tr	(a) No.			( n =			
Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee       (a) No. from Part 1     (b) Purpose of gift     (c) Use of gift       (b) Purpose of gift     (c) Use of gift     (d) Description of how gift is held       (e) Transfer of gift     (e) Transfer of gift       Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee		(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee       (a) No. from Part 1     (b) Purpose of gift     (c) Use of gift       (b) Purpose of gift     (c) Use of gift     (d) Description of how gift is held       (e) Transfer of gift     (e) Transfer of gift       Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee							
Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee       (a) No. from Part 1     (b) Purpose of gift     (c) Use of gift       (b) Purpose of gift     (c) Use of gift     (d) Description of how gift is held       (e) Transfer of gift     (e) Transfer of gift       Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee							
Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (a) No. from Part 1       (b) Purpose of gift       (c) Use of gift         (a) No. from Part 1       (c) Use of gift       (d) Description of how gift is held         (a) No. from Part 1       (c) Use of gift       (d) Description of how gift is held         (a) No. from Part 1       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       Transferee's name, address, and ZIP + 4         Relationship of transferor to transferee       (e) Transfer of gift							
Transferee's name, address, and ZIP + 4       Relationship of transferor to transferee         (a) No. from Part 1       (b) Purpose of gift       (c) Use of gift         (b) Purpose of gift       (c) Use of gift       (d) Description of how gift is held         (e) Transfer of gift       (e) Transfer of gift       Transferee's name, address, and ZIP + 4         Relationship of transferor to transferee	Ļ						
(a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift (fe) Transfer of		(e) Transfer of gift					
(a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift (fe) Transfer of							
Part I	Ļ	Transferee's name, address, and	d ZIP + 4	Relationship of tra	ansferor to transferee		
Part I  Part I  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee							
Part I  Part I  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee							
Part I  Part I  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee							
Part I  Part I  (e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee	(a) No						
(e) Transfer of gift   Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee	from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee	Part I						
Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee							
Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee							
Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee							
Transferee's name, address, and ZIP + 4     Relationship of transferor to transferee	ŀ						
		Transforce's name address and	1 <b>7I</b> P + 4	Relationship of tra	ansferor to transferee		
	ŀ	n ansieree's name, address, and	<u>א בור ד ד</u>	nelationship of tra			
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	3454 11 15	22	Ι		Schedule B (Form 990) (20		

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				OMB No. 1545	5 00 4 7
		al Financial Statements			<u>, , , , , , , , , , , , , , , , , , , </u>
(Forr		anization answered "Yes" on Form 990, ), 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		<b>ZUZ</b>	Ζ
	ment of the Treasury	Attach to Form 990. 90 for instructions and the latest information.		Open to P Inspection	
	e of the organization	to for instructions and the latest information.	Employer id		
	GIRL SCOUTS OF EASTERN MISS	-		-0662471	
Pa			counts. Co	mplete if the	
	organization answered "Yes" on Form 990, Part IV, lir		<b>b)</b> Funds and c	ther account	
4	Total number at and of year		<b>bj</b> Funds and C	account	<u> </u>
1 2	Total number at end of year         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		ls		
	are the organization's property, subject to the organization's	exclusive legal control?	[	Yes	No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be used or	nly		
	for charitable purposes and not for the benefit of the donor of	<i>, , , , , , , , , ,</i>	· _		
Pa	impermissible private benefit?			Yes	No
	rt II Conservation Easements. Complete if the or Purpose(s) of conservation easements held by the organizati		line 7.		
1	Purpose(s) of conservation easements field by the organization of land for public use (for example, recreation of land for public use (for example, recreation)		vrically importan	at land area	
	Protection of natural habitat	Preservation of a certif			
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form of a cor	nservation ease	ment on the	last
	day of the tax year.			he End of the	
а	Total number of conservation easements		2a		
b			2b		
с	Number of conservation easements on a certified historic str	ructure included in (a)	2c		
d	Number of conservation easements included in (c) acquired a				
_	historic structure listed in the National Register		2d		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the organiz	zation during th	ie tax	
4	year Number of states where property subject to conservation ea	soment is located			
- 5	Does the organization have a written policy regarding the pel				
Ũ	violations, and enforcement of the conservation easements in	<b>0</b> , 1 , <b>0</b>	Г	Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting,				
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation eas	sements during	the year	
8	Does each conservation easement reported on line 2(d) above		·/	— , , , , , , , , , , , , , , , , , , ,	
•				Yes	No
9	In Part XIII, describe how the organization reports conservati balance sheet, and include, if applicable, the text of the footr	-			
	organization's accounting for conservation easements.			;	
Pa	rt III Organizations Maintaining Collections of	f Art, Historical Treasures, or Other Si	imilar Asse	ls.	
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.			
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and bala	ince sheet work	(S	
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in furtheran	ice of public		
	service, provide in Part XIII the text of the footnote to its final				
b	If the organization elected, as permitted under FASB ASC 95				
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furtherance	of public servi	ce,	
	provide the following amounts relating to these items:		¢		
	<ul> <li>(i) Revenue included on Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> </ul>				
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial gain, r			
-	the following amounts required to be reported under FASB A				
а	Revenue included on Form 990, Part VIII, line 1		\$		
			•		
LHA	For Paperwork Reduction Act Notice, see the Instruction			le D (Form 9	90) 2022

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Par	t III Organizations Maintaining C	ollections of Art	, Hist	orical Tre	asures, o	r Othe	r Simila	ar Assets	conti	nued)	
3	Using the organization's acquisition, accession	on, and other records	s, check	any of the f	ollowing that	make s	ignifican	use of its			
	collection items (check all that apply):										
а	Public exhibition	d		Loan or excl	nange progra	am					
b	Scholarly research	е		Other							
с											
4	Provide a description of the organization's co	llections and explain	how th	ev further th	e organizatio	n's exe	arua tam	ose in Part	XIII.		
5	During the year, did the organization solicit or										
-	to be sold to raise funds rather than to be ma				-				Yes		No
Par	t IV Escrow and Custodial Arrang										
	reported an amount on Form 990, Par			, ei gainzatio				, ,			
1a	Is the organization an agent, trustee, custodia		arv for o	contributions	or other as	sets not	included				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII a							····· ∟		L	]
~			oning t						Amour	t	
c	Beginning balance						1c				
	Additions during the year										
	Distributions during the year										
	Ending balance										
	Did the organization include an amount on Fo								Yes		No
	If "Yes," explain the arrangement in Part XIII.						• • • • •				1
Par											
		(a) Current year		Prior year	(c) Two yea			years back	(e) Fou	r vears	back
<b>1</b> a	Beginning of year balance	9,580,549.		,741,899.	10,076			893,201.		-	930.
	b Contributions								271.		
	Grants or scholarships	, -		, , .	,	,	, ,	, .		,	
	Other expenditures for facilities										
U											
÷	Administrative expenses										
		10,357,705.	9	,580,549.	11,741	899	10	076,797.	8	,893,	201
g	End of year balance [ Provide the estimated percentage of the curr					-,	,	••••		,,	
2	Board designated or quasi-endowment	100	%	y, column (a)	) Helu as.						
	Permanent endowment .0000	%									
	Term endowment .0000 of										
с											
2-	The percentages on lines 2a, 2b, and 2c should have there endowment funds not in the posses		tion the	t are hold an	d administa	ad far th					
38		ssion of the organiza	tion tha	it are neio an	u auminister	ea for tr	le			Yes	No
	organization by:								0-(1)	103	X
	(i) Unrelated organizations								3a(i)		X
	(ii) Related organizations								3a(ii)		~
b	If "Yes" on line 3a(ii), are the related organization								3b		L
4 Dar	t VI Land, Buildings, and Equipm		vment f	unds.							
I ai	Complete if the organization answered		Dart IV	/ lino 110 S	00 Eorm 000	Dort V	lino 10				
	· · · ·								( )		
	Description of property	(a) Cost or ot basis (investm		(b) Cost		• •	Accumula epreciatio		( <b>d)</b> Boc	k valu	е
	Land	· · · · ·	ienų	basis (	. ,	ue	preciatio		1	201	057
	Land				,391,057. ,405,071.		0.000	124		, ,	057.
	Buildings				,403,071. ,027,096.		9,900		5		637.
	Leasehold improvements						3,003				442.
	Equipment				,463,477.		1,828		4		069.
	Other				,428,822.		1,933	-		,495,	
Tota	. Add lines 1a through 1e. (Column (d) must ea	qual Form 990, Part >	K, colun	nn (B), line 10	)c.)				9	,049,	884.

Schedule D (Form 990) 2022

#### Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(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) BENEFICIAL INTEREST IN THIRD PARTY TRUST	1,802,988.
(2) RIGHT OF USE ASSET	3,137,694.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	4,940,682.
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)	OPERATING LEASE LIABILITY	3,202,747.
(3)	SWEEP ACCOUNT	3,202,747. 78,992.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	3,281,739.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

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Sche	edule D (Form 990) 2022 GIRL SCOUTS OF EASTERN MISSOURI INC.			43-066247	1 Page <b>4</b>
Pa	rt XI Reconciliation of Revenue per Audited Financial State	ments With F	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	17,380,682.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments		23,035.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	2,968,273.		
е	<b>3</b>			2e	2,991,308.
3	Subtract line <b>2e</b> from line <b>1</b>			3	14,389,374.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а			51,898.		
b	· · · · · · · · · · · · · · · · · · ·				
С	Add lines <b>4a</b> and <b>4b</b>			4c	51,898.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	14,441,272.
Pa	rt XII Reconciliation of Expenses per Audited Financial State		Expenses per F	keturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line				1 - 0 7 0 0 - 0
1	Total expenses and losses per audited financial statements			1	15,879,050.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a					
b	, , , ,				
с			202 600		
d	· · · · · · · · · · · · · · · · · · ·		382,689.		292 690
-	Add lines 2a through 2d			2e	382,689.
3	Subtract line 2e from line 1			3	15,496,361.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		E1 000		
	Investment expenses not included on Form 990, Part VIII, line 7b		51,898.		
	Other (Describe in Part XIII.)				51,898.
	Add lines 4a and 4b			4c	15,548,259.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information.			5	15,548,259.
	•••				
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any			, Part X, line 2,	Part XI,
PAR	FV, LINE 4:				
THE	QUASI-ENDOWMENT CONSISTS OF A BOARD DESIGNATED FUND FOR OPP	ERATING			
RES	ERVES AS WELL AS LAND RESERVES. SPECIFICALLY, THE FUND WAS F	STABLISHED			
WIT	H THE INTENTION TO ACQUIRE ADDITIONAL LAND NEAR GSEM'S CAMPS	S AS WELL AS			
то	PROVIDE PERPETUAL, PLANNED, STABLE FUNDING TO AUGMENT ANNUAI	OPERATIONS			
IN	DRDER TO MAXIMIZE SERVICES TO MEMBERS AND PROVIDE RESOURCES	TO THE			
OPE	RATING BUDGET.				
	•				

IN ADDITION, GSEM'S RELATED ENTITY, GIRL SCOUTS OF EASTERN MISSOURI INC.

TRUST FUND MAINTAINS A PERMANENTLY RESTRICTED ENDOWMENT. THE TRUST FUND IS

A SEPARATE LEGAL ENTITY, WHICH IS MANAGED BY A CORPORATE TRUSTEE AND WAS

VALUED AT \$33,138,836 AT SEPTEMBER 30, 2023.

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Schedule D (Form 990) 2022

PART X, LINE 2: THE ORGANIZATION QUALIFIES AS A NONPROFIT ORGANIZATION AND IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE ORGANIZATION DOES NOT HAVE UNRELATED BUSINESS INCOME. EXCISE TAXES OR ACTIVITIES THAT WOULD THREATEN THE ORGANIZATION'S TAX EXEMPT STATUS FOR THE YEARS ENDED SEPTEMBER 30, 2023 AND 2022. IN THAT REGARD, THE ORGANIZATION HAS EVALUATED ITS TAX POSITIONS, EXPIRING STATUTES OF LIMITATIONS, AUDITS, PROPOSED SETTLEMENTS, CHANGES IN TAX LAW AND NEW AUTHORITATIVE RULINGS AND BELIEVES THAT NO PROVISION FOR INCOME TAXES IS NECESSARY, AT THIS TIME, TO COVER ANY UNCERTAIN TAX POSITIONS. PART XI, LINE 2D - OTHER ADJUSTMENTS: SPECIAL EVENT DIRECT EXPENSES NETTED AGAINST REVENUE ON 990 127,130. CHANGE IN VALUE OF BENEFICIAL INTEREST IN TRUST 137,995. ACTIVITY OF COMBINED ENTITY 2,703,148. TOTAL TO SCHEDULE D, PART XI, LINE 2D 2,968,273. PART XII, LINE 2D - OTHER ADJUSTMENTS: BAD DEBT EXPENSE RELATED TO UNCOLLECTIBLE PLEDGES/CONTRIBUTIONS 255,559. SPECIAL EVENT DIRECT EXPENSES NETTED AGAINST REVENUE ON 990 127,130. TOTAL TO SCHEDULE D, PART XII, LINE 2D 382,689.

Schedule D (Form 990) 2022

232055 09-01-22

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ing or Gaming A	ctivit	ies	OMB No. 1545-0047	
(Form 990)		e organization answered "Yes" on organization entered more than \$1				r <b>19, o</b> i	r if the	2022	
Department of the Treasury		Attach to Form 990 c						Open to Public	
Internal Revenue Service		o www.irs.gov/Form990 for instruc	ctions	and tl	ne latest information			Inspection	
Name of the organization								entification number	
Part I Fundrais	GIRL SCOUTS OF EASTERN MISSOURI INC. 43-0662471 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not								
	required to complete this part.								
<ul> <li>1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.</li> <li>a Mail solicitations</li> <li>b Internet and email solicitations</li> <li>c Phone solicitations</li> <li>g Special fundraising events</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?</li> <li>b Yes</li> <li>No</li> <li>b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be</li> </ul>									
(i) Name and addres or entity (fund	s of individual	(ii) Activity	(iii) fundr have c or cor contrib	ustody itrol of	(iv) Gross receipts from activity	tò (or fu	mount paid retained by) ndraiser d in col. <b>(i)</b>	(vi) Amount paid to (or retained by) organization	
				No		1			
Total									
		n is registered or licensed to solicit o		utions	or has been notified	it is ex	empt from r	egistration	

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

Schedule G (Form 990) 2022

232081 10-27-22

GIRL SCOUTS OF EASTERN MISSOURI INC.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

			(a) Event #1	(b) Event #2 WOMEN'S LEADERSHIP	(c) Other events	(d) Total events (add col. (a) through
			DESSERT FIRST (event type)	NETWORK (event type)	2 (total number)	col. <b>(c)</b> )
	1	Gross receipts	223,616.		5,905.	261,523
	2	Less: Contributions	144,547.	23,162.	3,765.	171,474
	3	Gross income (line 1 minus line 2)	. 79,069.	8,840.	2,140.	90,049
	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages	48,988.	13,490.		62,478
5	8	Entertainment	36,697.	3,056.		39,753
	9	Other direct expenses	18,163.	5,747.	989.	24,899
	-		n line 3, column (d)			127,130
a	10 11	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from <b>Gaming.</b> Complete if the organizatio \$15,000 on Form 990-EZ, line 6a.	gh 9 in column (d) n line 3, column (d) n answered "Yes" on Form (a) Bingo			127,130 -37,081 (d) Total gaming (add
a	10 11	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from <b>Gaming.</b> Complete if the organization	gh 9 in column (d) n line 3, column (d) n answered "Yes" on Form (a) Bingo	990, Part IV, line 19, or re (b) Pull tabs/instant	eported more than	127,130 -37,081 (d) Total gaming (add
	10 <u>11</u> rt I	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from <b>Gaming.</b> Complete if the organizatio \$15,000 on Form 990-EZ, line 6a.	(a) Bingo	990, Part IV, line 19, or re (b) Pull tabs/instant	eported more than	127,130 -37,081 (d) Total gaming (add
	10 <u>11</u> rt I	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a.	(a) Bingo	990, Part IV, line 19, or re (b) Pull tabs/instant	eported more than	127,130 -37,081 (d) Total gaming (add
	10 <u>11</u> rt I	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a.	(a) Bingo	990, Part IV, line 19, or re (b) Pull tabs/instant	eported more than	24,899 127,130 -37,081 (d) Total gaming (add col. (a) through col. (c
	10 11 rt I 2 3 4	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes	(a) Bingo	990, Part IV, line 19, or re (b) Pull tabs/instant	eported more than	127,130 -37,081 (d) Total gaming (add
	10 11 rt I 2 3 4	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs	(a) Bingo	990, Part IV, line 19, or re (b) Pull tabs/instant	eported more than	127,130 -37,081 (d) Total gaming (add
	10 11 rt I 2 3 4 5 6	Direct expense summary. Add lines 4 throu Net income summary. Subtract line 10 from Gaming. Complete if the organizatio \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	(a) Bingo (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	990, Part IV, line 19, or re (b) Pull tabs/instant bingo/progressive bingo	eported more than (c) Other gaming	127,130 -37,081 (d) Total gaming (add

**b** If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No **b** If "Yes," explain:

232082 10-27-22

Schedule G (Form 990) 2022

Scł	edule G (Form 990) 2022	GIRL SCOUTS OF EASTERN	N MISSOURI INC.	43-00	662471	Page <b>3</b>
11	Does the organization conduct ga	aming activities with nonmembe	rs?		Yes	No
12	Is the organization a grantor, ben	eficiary or trustee of a trust, or a	a member of a partnership or other entity formed			
	to administer charitable gaming?				Yes	No
13	Indicate the percentage of gamin	g activity conducted in:				
á	The organization's facility				13a	%
I	• An outside facility				13b	%
14	Enter the name and address of the	e person who prepares the orga	anization's gaming/special events books and record	ds:		
	Name					
	Address					
45		the standard state of the state			Yes	No
158	Does the organization have a cor	tract with a third party from who	om the organization receives gaming revenue?			
,	If "Yes," enter the amount of gam	ing revenue received by the orc	ganization \$ and the am	nount		
	of gaming revenue retained by th			lount		
	If "Yes," enter name and address					
		or the time party.				
	Name					
	Address					
16	Gaming manager information:					
	Name					
	Gaming manager compensation	\$				
	Description of services provided					
		<u>г</u> . г	¬			
	Director/officer	Employee	Independent contractor			
47						
17	,	r stata law ta maka abaritabla di	intributions from the coming proceeds to			
•	retain the state gaming license?		istributions from the gaming proceeds to		Yes	No
			distributed to other exempt organizations or spent			
	organization's own exempt activi	•	distributed to other exempt organizations of spent			
Pa			tions required by Part I, line 2b, columns (iii) and (v)	: and Par	t III. lines S	. 9b. 10b.
			dditional information. See instructions.	,	,	, , , ,
				<u> </u>		
2320	83 10-27-22		25	Schedu	ue G (Fori	n 990) 2022
			35			

Schedule G	G (Form 990)	GIRL SCOUTS OF EASTER	N MISSOURI INC.	43-0662471	Page 4
Part IV	(Form 990) Supplemental Info	rmation (continued)			
				Schedule G	(Form 990)
232084 04-01-	22			20110 U	

16130807 701245 CUS000020085

36 2022.06000 GIRL SCOUTS OF EASTERN MI CUS00001

SCHEDULE I Grants and Other Assistance to Organizations, (Form 990) Governments, and Individuals in the United States								OMB No. 1545-0047	
(10111350)			vernments, an ete if the organization					2022	
Department of the Treasury		Comp		Attach to Forn				Open to Public	
Internal Revenue Service Go to www.irs.gov/Form990 for the latest information.									
Name of the organizat								Employer identification number	
Part I General I	GIRL SCOUTS OI		SOURI INC.					43-0662471	
	zation maintain records t		amount of the grants	or assistance, the	graptoos' oligibility	for the grants or assis	tanco and the selecti	00	
•	award the grants or assis		•		• • • •	•			
	IV the organization's pro								
	d Other Assistance to I					anization answered "Y	es" on Form 990, Parl	IV, line 21, for any	
	hat received more than \$		-		1	(f) Method of	1	1	
	ddress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
		1						I	

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

3 Enter total number of other organizations listed in the line 1 table ....

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Schedule I (Form 990) 2022

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	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
MEMBERSHIP ASSISTANCE	16267	406,678.	0.		
UNIFORM ASSISTANCE	889	42,822.	0.		

**Part IV** Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

GIRL SCOUTS OF EASTERN MISSOURI (GSEM) PROVIDES ASSISTANCE TO INDIVIDUALS

THROUGH MEMBERSHIP AND PROGRAM SCHOLARSHIPS. THESE AWARDS ARE FOR PROGRAMS

ADMINISTERED BY GSEM, THEREFORE, THE ORGANIZATION IS ABLE TO MONITOR AWARD

ISSUANCE AND USE THOROUGH FINANCIAL RECORDKEEPING EFFORTS.

Page 2

sc	HEDULE J	Compensation Information	I	OMB No. 1	1545-004	47
(Fo	Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest			20	22	)
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.				_
	tment of the Treasury	Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.		Open to Inspe		iC
	al Revenue Service le of the organizatior		Employer id			mber
	ie er ute ergamzanet	GIRL SCOUTS OF EASTERN MISSOURI INC.	43-06			
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a	Check the appropri-	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c		nal use			
	Travel for com					
	Tax indemnific	ation and gross-up payments	s			
	Discretionary s	pending account Personal services (such as maid, chauffer	ur, chef)			
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or p	rovision of all of the expenses described above? If "No," complete Part III to explain		. 1b		
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
		rs, including the CEO/Executive Director, regarding the items checked on line 1a?		. 2		
3	Indicate which, if ar	y, of the following the organization used to establish the compensation of the organization's	;			
	CEO/Executive Dire	ctor. Check all that apply. Do not check any boxes for methods used by a related organizati	on to			
	establish compensa	ation of the CEO/Executive Director, but explain in Part III.				
	X Compensation	committee Written employment contract				
	Independent c	ompensation consultant II Compensation survey or study				
	Form 990 of of	ther organizations	ommittee			
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	Receive a severanc	e payment or change-of-control payment?		. 4a		X
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?		. 4b		Х
с	Participate in or rec	eive payment from an equity-based compensation arrangement?		4c		X
	If "Yes" to any of lin	es 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(c	)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
	contingent on the re					
а	The organization?			. <u>5a</u>		X
b	Any related organiz	ation?		. 5b		X
		r 5b, describe in Part III.				
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	on			
	contingent on the n	6				
а	The organization?			<u>6a</u>		X
b	Any related organiz	ation?		. <b>6b</b>		X
		r 6b, describe in Part III.				
7		n Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
		es 5 and 6? If "Yes," describe in Part III		. 7		X
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th	ne			
				8		X
9		d the organization also follow the rebuttable presumption procedure described in				
	Regulations section			. 9		
LHA	For Paperwork Re	eduction Act Notice, see the Instructions for Form 990.	Schedu	le J (Forn	n <b>990</b> )	) 2022

232111 10-18-22

Schedule J (Form 990) 2022

43-0662471

#### 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.

		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) BONNIE BARCZYKOWSKI	(i)	368,445.	108,000.	459.	18,281.	9,508.	504,693.	٥.
CEO (THRU 2/23)	(ii)	0.	0.	٥.	0.	0.	0.	٥.
(2) JULIE CUBBAGE	(i)	165,849.	4,000.	239.	8,573.	0.	178,661.	٥.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KELLY DALEEN	(i)	156,428.	4,000.	239.	8,284.	6,373.	175,324.	0.
CHIEF MEMBERSHIP & MKTING	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KATHLEEN MACK	(i)	152,186.	4,000.	480.	7,975.	4,150.	168,791.	0.
CHIEF HR OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2022

#### Schedule J (Form 990) 2022 GIRL SCOUTS OF EASTERN MISSOURI INC.

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 3 - METHODS USED TO ESTABLISH CEO/EXEC COMPENSATION:

THE EXECUTIVE COMPENSATION COMMITTEE REVIEWED MARKET DATA, INTERNAL

EQUITY, AS WELL AS THE INCUMBENT'S PERFORMANCE, AND THE ORGANIZATION'S

PROGRESS IN MEETING ITS ANNUAL OPERATING PLAN COMMITMENTS. MARKET DATA

INCLUDES THE GUIDESTAR NON-PROFIT COMPENSATION REPORT WHICH COMPILES

PAY TRENDS FOR SENIOR LEADERSHIP POSITIONS. THE COMPARATIVE PEER GROUP

WAS HUMAN SERVICES ORGANIZATIONS OF COMPARABLE ORGANIZATIONAL BUDGET

AND SIZE TO GIRL SCOUTS OF EASTERN MISSOURI. AFTER CONSIDERING MARKET

DATA, INTERNAL EQUITY, AS WELL AS PERFORMANCE, THE COMMITTEE DISCUSSED

ITS RECOMMENDATION AND RECEIVED CONCURRENCE FOR SUCH BY THE GIRL SCOUTS

OF EASTERN MISSOURI'S BOARD OF DIRECTORS.

#### SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

2

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

Inspection Employer identification number

43-0662471

ſ

ΖU **Open to Public** 

Name of the organization

GIRL SCOUTS OF EASTERN MISSOURI INC.

Pa	rt I Types of Property							
		<b>(a)</b> Check if applicable	<b>(b)</b> Number of contributions or items contributed	<b>(c)</b> Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	eterminin		3
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	4	42,950.	PUBLICLY TRADED	EXCHANO	ΞE	
10	Securities - Closely held stock			, ,				
11	Securities - Partnership, LLC, or							
••								
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
10								
14	Historic structures           Qualified conservation contribution - Other							
15	E E E E E E E E E E E E E E E E E E E							
16	Real estate - Residential Real estate - Commercial							
17								
18	Real estate - Other							
10 19	Collectibles							
20								
	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24 05	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ( )		 					
29	Number of Forms 8283 received by the organization						0	
	for which the organization completed Form 828	o, Part V, L	onee Acknowledg	ement 29			′es	
20-	During the year did the experimation reactive by	oontributio		artad in Dart L lines 1 through	ab 00 that it		es	No
30a	During the year, did the organization receive by		• • • • •					
	must hold for at least 3 years from the date of the					20-		х
	exempt purposes for the entire holding period?					30a	_	
	If "Yes," describe the arrangement in Part II.	aliay that re	a visco the service of	of any nonatondard contribu	tional	01	v	
31	Does the organization have a gift acceptance p	•	-	•		31	x	
32a	Does the organization hire or use third parties o		•					v
						32a		<u> </u>
	If "Yes," describe in Part II.		human at		- Log al			
33	If the organization didn't report an amount in co	Diumn (C) foi	r a type of property	r tor which column (a) is che	CKED,			
	describe in Part II.			<u></u>	0.1			0000
LHA	For Paperwork Reduction Act Notice, see t	me instruct	uons for Form 990	J.	Schedule N	/i (Form S	39O)	2022

232141 09-09-22

Schedule M (Form 990) 2022 GIRL SCOUTS OF EASTERN MISSOURI INC.	43-0662471	Page <b>2</b>
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, is reporting in Part I, column (b), the number of contributions, the number of items received, or this part for any additional information.	and 33, and whether the organi a combination of both. Also co	zation nplete
CHEDULE M, PART I, COLUMN (B):		
HE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS.		
	Only date 14/7	
32142 09-09-22 1 C	Schedule M (For	m 990) 2022
43 80807 701245 CUS000020085 2022.06000 GIRL SCOU	JTS OF EASTERN M	

SCHEDULE	0
(Form 990)	

Internal Revenue Service Name of the organization

Department of the Treasury

# 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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



Employer identification number 43-0662471

FORM 990, PART III, LINE 4

ORGANIZATION DESCRIPTION AND SIGNIFICANT ACCOMPLISHMENTS

GIRL SCOUTS IS THE LARGEST GIRL LEADERSHIP DEVELOPMENT PROGRAM IN THE

GIRL SCOUTS OF EASTERN MISSOURI INC.

UNITED STATES DEVELOPING GIRLS TO BE DRIVERS, DESIGNERS, AND MAKERS OF

THE FUTURE. GIRL SCOUTS OF EASTERN MISSOURI (GSEM) IS 106 YEARS OLD AND

SERVES MORE THAN 36,000 GIRLS AND ADULT MEMBERS IN THE CITY OF ST.

LOUIS AND 28 EASTERN MISSOURI COUNTIES, MAKING IT THE SIXTH LARGEST

GIRL SCOUT COUNCIL OUT OF 111 ACROSS THE US.

IN 2023, GIRL SCOUTS OF EASTERN MISSOURI BEGAN EMBARKING ON A JOURNEY

TOWARDS SIGNIFICANTLY INCREASING THE INTENTIONAL AND RELEVANT SUPPORT

THAT THE ORGANIZATION IS PROVIDING TO OUR GIRL SCOUT MEMBERS THROUGHOUT

THE SPAN OF THEIR LIVES. GIRL SCOUTS OF EASTERN MISSOURI HAS BECOME

LASER-FOCUSED ON PROVIDING A WELL-ROUNDED CURRICULUM THAT NOT ONLY

FOCUSES ON TRADITIONAL GIRL SCOUTING ACTIVITIES, BUT ALSO ADDRESSES THE

EVOLVING AND RELEVANT NEEDS OF TODAY'S GIRL. THROUGH WORKING

COLLABORATIVELY WITH OUR MEMBERS, EDUCATION AND COMMUNITY PARTNERS, WE

ARE BUILDING A STRONGER FOUNDATION TO HOLISTICALLY SUPPORT ALL GIRL

SCOUTS AND THEIR FAMILIES IN THE AREAS OF EDUCATION, MENTORSHIP,

PROFESSIONAL SKILL BUILDING AND SOCIO-EMOTIONAL SUPPORT.

REACHING MORE GIRLS

GIRL SCOUTS OF EASTERN MISSOURI IS COMMITTED TO ENSURING THAT EVERY

GIRL WHO WANTS TO BE A GIRL SCOUT HAS THAT OPPORTUNITY -- REGARDLESS OF

RACE, ABILITY, OR SOCIO-ECONOMIC STATUS. IN 2023, ACCESSIBILITY WAS A

CONTINUED FOCUS AS GSEM STRIVED TO MAKE PARTICIPATION IN THE GIRL SCOUT

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 10-28-22

Schedule O (Form 990) 2022

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2022.06000 GIRL SCOUTS OF EASTERN MI CUS00001

VOLUNTEER LEADERS.					
COMMUNITY TROOP PROGRAM: WHILE GIRL SCOUTING IS V	IBRANT IN THE EASTERN				
MISSOURI REGION, IT WAS NOT ALWAYS UNILATERALLY A	CCESSIBLE. TO BETTER				
MEET THE NEEDS OF ALL GIRLS, WE LAUNCHED THE COMM	UNITY TROOP PROGRAM				
(CTP) IN 2014 BY LEVERAGING GIRL SCOUT STAFF MEMB	ERS AS TROOP LEADERS				
IN AREAS WHERE 75% TO 100% OF STUDENTS RECEIVE FR	EE OR REDUCED-PRICE				
LUNCHES. IN 2023, MORE THAN 2,800 GIRLS PARTICIPA	TED IN CTP, HELPING				
THEM DEVELOP THE QUALITIES AND PROFICIENCIES NEED	ED TO PREPARE THEM FO	R			
SUCCESS IN LIFE.					
SCHOLARSHIP FUND: GIRL SCOUTS BELIEVE IN REMOVING	BARRIERS TO				
OPPORTUNITY AND MAKING THE WORLD A BETTER, FAIRER	, MORE EQUITABLE				
PLACE. THAT'S WHY GIRL SCOUTS OF EASTERN MISSOURI	IS PROUD TO OFFER				
FINANCIAL AID TO OUR MEMBERS, SO THAT ALL GIRLS M	AY PARTICIPATE FULLY				
IN GIRL SCOUT PROGRAM ACTIVITIES AND CAMP. IN 202	3, 52 PERCENT OF GIRL				
SCOUTS REQUIRED FINANCIAL AID. THROUGHOUT THE LAS	T TWO YEARS, FINANCIA	L			
AID REQUESTS WERE AT AN ALL-TIME HIGH FOR GIRL SC	OUT MEMBERSHIPS AND				
PROGRAM/CAMP PARTICIPATION.					
IMPACTFUL PROGRAMS					
GIRL SCOUTS OF EASTERN MISSOURI CONTINUES TO BE A	N ESSENTIAL FORCE IN				
GIRLS' LIVES, HELPING THEM NAVIGATE NEW CHALLENGE	S BROUGHT ON BY SOCIA	L			
DISTANCING AND LEARNING LOSS DURING THE PANDEMIC	ERA, AND EMERGING FRO	М			
THOSE EXPERIENCES WITH RENEWED HOPE AND CONFIDENC	E. THROUGH THEIR				
PARTICIPATION IN GIRL SCOUTS, GIRLS ENGAGE IN REL	EVANT PROGRAMS, BUILT				
ON THE FOUR CORE PROGRAM PILLARS OF THE GIRL SCOU	T LEADERSHIP				
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## Schedule O (Form 990) 2022

Name of the organization

GIRL SCOUTS OF EASTERN MISSOURI INC.

Page **2** Employer identification number 43 - 0662471

#### LEADERSHIP EXPERIENCE MORE AVAILABLE TO GIRL MEMBERS, AS WELL AS THEIR

001

Schedule O (Form 990) 2022 Name of the organization		Page 2
6	EASTERN MISSOURI INC.	43-0662471
EXPERIENCE: STEM (SCIENCE, TECHNOLO	GY, ENGINEERING, AND MATHEMATICS),	
ENTREPRENEURSHIP, LIFE SKILLS AND T	HE OUTDOORS. THESE IMPACT PROGRAMS	
HELP THEM BUILD ESSENTIAL SKILLS AN	D SPARK NEW INTERESTS THEY WILL USE	
TO LEAD IN THEIR HOMES, OUR WORKPLA	CES, AND OUR COMMUNITIES. IN 2023,	
MORE THAN 58,000 SKILL-BUILDING BAD	GES WERE EARNED BY GIRL SCOUTS IN	
EASTERN MISSOURI ACROSS THE FOUR PR	OGRAM PILLARS.	
SCIENCE, TECHNOLOGY, ENGINEERING AN	D MATH (STEM): AT GIRL SCOUTS OF	
EASTERN MISSOURI, STEM (SCIENCE, TE	CHNOLOGY, ENGINEERING, AND MATH)	
ENCOMPASSES EVERYTHING FROM PROTECT	ING BELOVED NATURAL RESOURCES TO	
BUILDING ROBOTS AND EXPLORING THE N	IGHT SKY. WOMEN HAVE HISTORICALLY	
BEEN UNDERREPRESENTED IN STEM FIELD	S AND GIRL SCOUTS OF EASTERN	
MISSOURI PROVIDES OPPORTUNITIES FOR	GIRLS TO JUMP INTO STEM AND EXPLORE	
THEIR INTERESTS AND PASSIONS WITH F	UN AND CHALLENGING ACTIVITIES LIKE	
BUILDING RACE CARS, DESIGNING APPS	AND VIDEO GAMES, AND LEARNING HOW TO	
STAY SAFE WHILE EXPLORING ONLINE.		
IN 2023, GIRL SCOUTS OF EASTERN MIS	SOURI LAUNCHED A BRAND-NEW STEM	
PROGRAM TITLED NASA INSPIRES FUTURE	S FOR TOMORROW'S YOUTH, OR NIFTY.	
THIS EIGHT-PROGRAM SERIES INCLUDED	WORKSHOPS AND FIELD TRIPS WHERE GIRL	
SCOUTS EXPLORED NASA MISSIONS AND C.	AREERS BY PARTICIPATING IN	
INTERACTIVE ACTIVITIES AND HAD THE	UNIQUE OPPORTUNITY TO MEET WITH NASA	
ROLE MODELS.		
ENTREPRENEURSHIP: THE SOCIAL AND EM	OTIONAL OUALITTES THAT LEAD TO	
SUCCESSFUL ENTREPRENEURSHIP, LIKE C		
INNOVATION, ARE CRUCIAL FOR ALL TYP		
· · ·	LDS GIRLS' "ENTREPRENEURIAL MINDSET"	
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TO PREPARE THEM FOR WORKFORCE READINESS NO MATTER WHERE THEY GO OR WHAT
THEY DECIDE TO DO.
FOR MORE THAN 100 YEARS, GIRL SCOUTS HAS LED ONE OF THE LARGEST,
PROGRESSIVE ENTREPRENEURIAL PROGRAMS FOR YOUNG GIRLS, HELPING THEM
DREAM BIG AND REACH FINANCIAL CONFIDENCE AND INDEPENDENCE ALONG THE
WAY. AS THE LARGEST GIRL-RUN BUSINESS IN THE WORLD, THE GIRL SCOUT
COOKIE PROGRAM TEACHES GIRL SCOUTS SKILLS TO GROW INTO LEADERS IN THEIR
OWN LIFE, IN BUSINESS AND IN THE WORLD BY HELPING THEM DEVELOP FIVE KEY
SKILLS: GOAL SETTING, DECISION MAKING, MONEY MANAGEMENT, BUSINESS
ETHICS AND PEOPLE SKILLS. IN 2023, EASTERN MISSOURI GIRL SCOUTS SOLD
MORE THAN 2.2 MILLION PACKAGES OF COOKIES AND EARNED MORE THAN \$2.1
MILLION IN PROCEEDS, WHICH ARE USED TO FUND TROOP ACTIVITIES, BUY
SUPPLIES, AND SUPPORT COMMUNITY SERVICE PROJECTS IN THEIR
NEIGHBORHOODS. THROUGH A PARTNERSHIP WITH THE USO OF MISSOURI, EASTERN
MISSOURI GIRL SCOUTS ENCOURAGED THEIR CUSTOMERS TO PURCHASE GIRL SCOUT
COOKIES FOR MILITARY SERVICE PERSONNEL. THEIR EFFORTS RESULTED IN MORE
THAN 83,000 PACKAGES DONATED FOR DISTRIBUTION TO MILITARY MEMBERS.
ALSO IN 2023, THE FALL TREATS & READS PROGRAM SURPASSED ALL
EXPECTATIONS WITH MORE THAN \$940,000 RAISED IN SUPPORT OF GIRL SCOUTS
OF EASTERN MISSOURI PROGRAMS, WITH THE NUMBER OF GIRLS AND TROOPS
PARTICIPATING ALSO SEEING A SIGNIFICANT INCREASE.
LIPE SETLIS, GIDI, SCOTT BADGES, LIVE CIVIC DUCACEMENT, UDALTUS I TUINC
LIFE SKILLS: GIRL SCOUT BADGES, LIKE CIVIC ENGAGEMENT, HEALTHY LIVING,
COMMUNICATION SKILLS AND GLOBAL CITIZENSHIP, FORM THE FOUNDATION OF
ACTIVITIES THAT HELP GIRLS GROW INTO LEADERS IN THEIR HOMES AND
COMMUNITIES. WHETHER IT'S BY EXERCISING AND STAYING HEALTHY, DEVELOPING
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GIRL SCOUTS OF EASTERN MISSOURI INC.

Name of the organization

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Employer identification number

43-0662471

Schedule O (Form 990) 2022	Page <b>2</b>
Name of the organization	Employer identification number 43-0662471
GIRL SCOUTS OF EASTERN MISSOURI INC.	43-0002471
STRONG RELATIONSHIPS WITH FAMILY AND PEERS OR ADVOCATING ON BEHALF OF	
OTHERS, GIRLS GAIN THE SKILLS AND INSPIRATION TO ACCEPT CHALLENGES,	
OVERCOME OBSTACLES AND TAKE THE LEAD.	
IN 2023, GIRL SCOUTS OF EASTERN MISSOURI OFFERED EXPANDED LIFE SKILLS	
PROGRAMMING, FOCUSING ON PROVIDING HOLISTIC SUPPORT THROUGH	
PROFESSIONAL DEVELOPMENT AND SOCIO-EMOTIONAL WELL-BEING OF GIRL SCOUT	
SENIORS AND AMBASSADORS IN 9TH-12TH GRADES. THE NEW PROGRAMS INCLUDED	
COLLEGE KNOWLEDGE, PROFESSIONAL PREP DAY AND ACT PREP. BY PARTNERING	
WITH EDUCATIONAL INSTITUTIONS AND EXPERT ORGANIZATIONS IN OUR	
COMMUNITY, OUR EXPANDED PROGRAM OFFERINGS WILL ALLOW OUR MIDDLE AND	
HIGH SCHOOL GIRL SCOUTS TO DREAM BIG AND THEN PUT THOSE PLANS INTO	
ACTION TO ACHIEVE THEIR GOALS.	
FORM 990, PART III, LINE 4	
OUTDOORS: AT GIRL SCOUT CAMP, GIRLS FOLLOW THEIR OWN CONVICTIONS AND	
EXPLORE ALL THE EXTRAORDINARY THINGS THEY ARE CAPABLE OF. IN 2023, GIRL	
SCOUT CAMP WAS MORE POPULAR THAN EVER WITH A 29 PERCENT INCREASE IN	
GIRLS PARTICIPATING IN CAMP OVER LAST YEAR, AND A 7 PERCENT INCREASE IN	
,,	
GIRLS PARTICIPATING IN OVERNIGHT CAMP.	
WITH THREE CAMP PROPERTIES (CAMP CEDARLEDGE, CAMP FIDDLECREEK AND CAMP	
TUCKAHO) SPANNING MORE THAN 1,400 ACRES, GIRLS CHALLENGE THEMSELVES TO	
TRY NEW THINGS, SHARPEN PROBLEM-SOLVING SKILLS AND CREATE A LIFETIME OF	
MEMORIES. GIRL SCOUTS OF EASTERN MISSOURI DELIVERED MORE THAN 15,100	

GIRL SCOUT CAMP EXPERIENCES IN 2023.

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Schedule O (Form 990) 2022

Name of the organization	Employer identification numbe
GIRL SCOUTS OF EASTERN MISSOURI INC.	45-0002471
DURING SUMMER 2023, GIRL SCOUTS OF EASTERN MISSOURI WAS PROUD TO OFFER	
THE INAUGURAL CLAIRE BEAR CAMP, A WEEK-LONG DAY CAMP FOR GIRL SCOUTS	
AGES 5-18 ON THE AUTISM SPECTRUM. CLAIRE BEAR CAMP GAVE CAMPERS THE	
DPPORTUNITY TO EXPERIENCE A WEEK OF NEW FRIENDS, OUTDOOR ADVENTURE AND	
A SENSE OF BELONGING IN AN INCLUSIVE AND NURTURING ENVIRONMENT. CLAIRE	
BEAR CAMP ALSO FOCUSED ON DEVELOPING NEW COMMUNITY PARTNERSHIPS TO	
CREATE AND SUSTAIN FUTURE GIRL SCOUT CAMP OPPORTUNITIES FOR GIRLS WITH	
OTHER DIAGNOSES AND MEDICAL CONDITIONS. IN PREPARATION FOR THIS CAMPING	
EXPERIENCE, GSEM STAFF WORKED CLOSELY WITH A DIVERSE GROUP OF	
SUPPORTERS TO DEVELOP THIS MODIFIED CAMP, ENSURING CAMPER'S INDIVIDUAL	
NEEDS WOULD BE MET.	
COMMUNITY SERVICE	
CONDUCTING COMMUNITY SERVICE PROJECTS DIRECTLY RELATES TO THE	
EADERSHIP OUTCOME OF COMMUNITY PROBLEM SOLVING, WHICH MEASURES GIRLS'	
DESIRE TO HELP OTHERS, MAKE A POSITIVE DIFFERENCE IN THE WORLD (CIVIC	
DRIENTATION), AS WELL AS HAVING THE SKILLS NECESSARY TO DO SO (CIVIC	
ENGAGEMENT). IN 2023, THROUGH APRIL SHOWERS, GIRL SCOUTS AND ADULT	
OLUNTEERS COLLECTED MORE THAN 1.3 MILLION PERSONAL CARE ITEMS, MANY OF	
WHICH ARE NOT AVAILABLE THROUGH WIC AND SNAP PROGRAMS.	
HIGHEST AWARDS: IN 2023, 605 EASTERN MISSOURI GIRLS EARNED GIRL SCOUTS'	
HIGHEST COMMUNITY SERVICE AWARDSTHE GIRL SCOUT BRONZE, SILVER AND	
GOLD AWARDS. THESE BOLD AND CONFIDENT YOUNG WOMEN HAVE DEMONSTRATED	
EXTRAORDINARY LEADERSHIP THROUGH A SUSTAINABLE COMMUNITY SERVICE	
PROJECT THAT ADDRESSES REAL-WORLD CHALLENGES AT LOCAL, NATIONAL, AND	
GLOBAL LEVELS.	

Schedule O (Form 990) 2022		Page <b>2</b>
Name of the organization GIRL SCOUTS OF EAS	TERN MISSOURT INC	Employer identification number 43-0662471
		10 0002171
DIVERSITY, EQUITY AND INCLUSION		
AT GIRL SCOUTS OF EASTERN MISSOURI, WE	ARE COMMITTED TO OUR FUTURE AND	
WHAT THAT LOOKS LIKE FOR ALL GIRLS, EVE	RYWHERE WE RECOGNIZE THAT EACH	
EMPLOYEE, GIRL SCOUT, AND VOLUNTEER HAS	UNIQUE EXPERIENCES,	
PERSPECTIVES, IDENTITIES, AND VIEWPOINT	S THAT ADD VALUE TO OUR ABILITY	
TO CREATE AND DELIVER THE BEST POSSIBLE	SERVICE TO EACH OTHER, OUR	
MEMBERS, AND OUR COMMUNITY.		
GIVEN THAT OUR INDIVIDUAL SOCIAL, ECONO	MIC, AND CULTURAL IDENTITIES	
SHAPE AND INFLUENCE OUR EXPERIENCES AND	FERSFECTIVES, GIRL SCOULS OF	
EASTERN MISSOURI WILL DO ITS BEST WORK	BY ENSURING DIVERSITY IN OUR	
WORKFORCE AND MEMBERSHIP. WE ARE COMMIT	TED TO FOSTERING INCLUSIVITY IN	
OUR ORGANIZATION AND CREATING AN ENVIRO	NMENT IN WHICH ALL EMPLOYEES	
	TO NEL CEDE C AND MOLENTEDDO MACH	
FEEL VALUED, INCLUDED, AND EMPOWERED AN	D ALL GIRLS AND VOLUNTEERS KNOW	
THEY BELONG.		
FORM 990, PART VI, SECTION A, LINE 7B:		
THE ORGANIZATION HAS AN EXECUTIVE COMMI	TTEE THAT HAS THE AUTHORITY TO ACT	
ON BEHALF OF THE ENTIRE BOARD OF DIRECT	ORS. THIS POWER MAY BE EXERCISED	
WHEN TIME SENSITIVE MATTERS ARISE.		
FORM 990, PART VI, SECTION B, LINE 11B:		
THE FORM 990 IS REVIEWED THEN APPROVED	BY THE AUDIT COMMITTEE AND THEN	
REVIEWED AND APPROVED BY THE FULL BOARD	OF DIRECTORS PRIOR TO FILING WITTH	
THE IRS.		
FORM 990, PART VI, SECTION B, LINE 12C:		

EACH MEMBER OF THE BOARD OF DIRECTORS COMPLETES AN ANNUAL QUESTIONNAIRE

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Schedule O (Form 990) 2022

Name of the organization	Employer identification number
GIRL SCOUTS OF EASTERN MISSOURI INC.	43-0662471
STATING WHETHER THEY HAVE CONFLICTS OF INTEREST.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE EXECUTIVE COMPENSATION COMMITTEE REVIEWED MARKET DATA, INTERNAL EQU	IITY,
AS WELL AS THE INCUMBENT'S PERFORMANCE, AND THE ORGANIZATION'S PROGRESS	
MEETING ITS ANNUAL OPERATING PLAN COMMITMENTS. MARKET DATA INCLUDES THE	
GUIDESTAR NON-PROFIT COMPENSATION REPORT WHICH COMPILES PAY TRENDS FOR	
SENIOR LEADERSHIP POSITIONS. THE COMPARATIVE PEER GROUP WAS HUMAN SERVIO	CES
ORGANIZATIONS OF COMPARABLE ORGANIZATIONAL BUDGET AND SIZE TO GIRL SCOU	TS
OF EASTERN MISSOURI. AFTER CONSIDERING MARKET DATA, INTERNAL EQUITY, AS	
WELL AS PERFORMANCE, THE COMMITTEE DISCUSSED ITS RECOMMENDATION AND	
RECEIVED CONCURRENCE FOR SUCH BY THE GIRL SCOUTS OF EASTERN MISSOURI BO	ARD
OF DIRECTORS.	
FORM 990, PART VI, SECTION C, LINE 19:	
INTERESTED PARTIES MAY CONTACT THE GIRL SCOUTS MAIN OFFICE TO OBTAIN	
DOCUMENTS RELATING TO THE GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL	
STATEMENTS.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
BAD DEBT EXPENSE RELATED TO UNCOLLECTIBLE	
PLEDGES/CONTRIBUTIONS -255,	559.
CHANGE IN BENEFICIAL INTEREST IN TRUST 137,	995.
ADJUSTMENT TO PRIOR YEAR UNCONDITIONAL PROMISES TO GIVE 16,	597.
TOTAL TO FORM 990, PART XI, LINE 9 -100,9	967.
FORM 990, PART XII, LINE 2:	
THE ORGANIZATION HAS INDICATED IN PART XII, LINE 2B THAT THE FINANCIAL	
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Schedule O (Form 990) 2022		Page
Name of the organization GIRL SCOUTS OF EASTERN MISS	SOURI INC.	Employer identification numbe 43-0662471
STATEMENTS ARE AUDITED BY AN INDEPENDENT ACCOUNT	TANT AND ISSUED ON A	
CONSOLIDATED BASIS RATHER THAN ON A SEPARATE BAS	SIS. PLEASE NOTE, THE	
ORGANIZATION'S FINANCIAL STATEMENTS ARE ACTUALLY	ISSUED AND AUDITED ON	
A COMBINED BASIS RATHER THAN A CONSOLIDATED BASI	IS. SINCE FORM 990 DOES	
NOT GIVE "COMBINED" AS AN OPTION THE ORGANIZATIO	ON CONCLUDED IT WAS MOST	
APPROPRIATE TO NOTATE AS "CONSOLIDATED" RATHER 1	THAN "SEPARATE".	
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Schedule O (Form 990) 2022

# **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.

## Department of the Treasury Internal Revenue Service

Name of the organization

GIRL SCOUTS OF EASTERN MISSOURI INC.

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

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

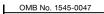
#### Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt Part II organizations during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section	(f) Direct controlling entity	cont	<b>g)</b> 512(b)(13) rolled :ity?
				501(c)(3))		Yes	No
GIRL SCOUTS OF EASTERN MISSOURI TRUST FUND -					GIRL SCOUTS OF		
43-6024585, 2300 BALL DRIVE, ST. LOUIS, MO	OPERATED SOLELY FOR THE				EASTERN MISSOURI		
63146	BENEFIT OF THE GIRL SCOUTS	MISSOURI	501(C)(3)	LINE 12A, I	INC.	х	
	-						
	-						
	-						

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

Schedule R (Form 990) 2022



# 22

Employer identification number

43-0662471

**Open to Public** Inspection

SCHEDULE R	
(Form 990)	

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.

		-					-		1	1		
(a)	(b)	(c)	(d)	(e)	(f)	(g)		h)	(i)	(j)		
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	Disprop alloca	ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gener mana partn	al or Percenta ging er?	tage ship
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	No	
	-											
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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>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	Sec 512(I contr ent	(i) ction b)(13) rolled tity?
		country)		0. 1.0.01				Yes	No

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

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	s N
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?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		2
b Gift, grant, or capital contribution to related organization(s)			
c Gift, grant, or capital contribution from related organization(s)		X	
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)			
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)			
n Purchase of assets from related organization(s)	1h		
Exchange of assets with related organization(s)			
Lease of facilities, equipment, or other assets to related organization(s)	1j		+
k Lease of facilities, equipment, or other assets from related organization(s)			
Performance of services or membership or fundraising solicitations for related organization(s)			
n Performance of services or membership or fundraising solicitations by related organization(s)			
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
Sharing of paid employees with related organization(s)			+
Reimbursement paid to related organization(s) for expenses			
Reimbursement paid by related organization(s) for expenses			$\downarrow$
Other transfer of cash or property to related organization(s)			
s Other transfer of cash or property from related organization(s)			

<b>(a)</b> Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1) GIRL SCOUTS OF EASTERN MISSOURI TRUST FUND	с	767,060.	CASH
(2)			
<u>(3)</u>			
<u>(4)</u>			
<u>(5)</u>			
<u>(6)</u>			

Schedule R (Form 990) 2022 GIRL SCOUTS OF EASTERN MISSOURI INC.

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>(b)</b> Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are partne 501( org	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(r Dispr tior allocat Yes	opor- late tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partne Yes N	or Percentage ownership

Schedule R (Form 990) 2022

# Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions. 232165 09-14-22 Schedule R (Form 990) 2022 57 16130807 701245 CUS000020085 2022.06000 GIRL SCOUTS OF EASTERN MI CUS00001