# **PUBLIC DISCLOSURE COPY**

PLEASE FILE IN A SAFE PLACE

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

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

Return of Organization Exempt From Income Tax 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

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



<u>A</u> F	or the	e 2021 calendar year, or tax year beginning OCT 1, 2021 and e	ending SE	P 30, 2022	
B C	heck if oplicabl	e: C Name of organization		D Employer identifi	cation number
	Addre:				
	Name chang			43-0662471	
	Initial return		Room/suite	E Telephone numbe	r
		2200 BALL DETVE		314.592.2300	
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		<b>G</b> Gross receipts \$	27,825,599.
	Ameno return	ded ST. LOUIS, MO 63146		H(a) Is this a group re	eturn
	Applic	F Name and address of principal officer: DAWN ROLVA		for subordinates	? Yes X No
	pendir	<sup>19</sup> SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
		empt status: 🕱 501(c)(3) 🚺 501(c) ( )◀ (insert no.) 🚺 4947(a)(1) o	or 🗌 527	If "No," attach a	list. See instructions
<u>J</u> V	Vebsit	te: WWW.GIRLSCOUTSEM.ORG		H(c) Group exemption	n number 🕨
		organization: X Corporation Trust Association Other	L Year o	of formation: 1927	M State of legal domicile: MO
Pa	rt I	Summary			
6	1	Briefly describe the organization's mission or most significant activities: BUILDIN	NG GIRLS	OF COURAGE,	
nce		CONFIDENCE AND CHARACTER, WHO MAKE THE WORLD A BETTER PLACE.			
Governance	2	Check this box 🕨 🛄 if the organization discontinued its operations or dispose	ed of more	than 25% of its net as	sets.
ove					25
		Number of independent voting members of the governing body (Part VI, line 1b)			25
Activities &		Total number of individuals employed in calendar year 2021 (Part V, line 2a)			199
iviti	6	Total number of volunteers (estimate if necessary)			5600
Act				<u>7a</u>	0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		0.
	_			Prior Year	Current Year
е		Contributions and grants (Part VIII, line 1h)		7,452,175.	7,237,998.
Revenue		Program service revenue (Part VIII, line 2g)		852,614.	736,143.
Rev		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		542,679.	640,407.
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		7,975,734.	9,062,001.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		16,823,202.	17,676,549.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		353,838.	409,607.
		Benefits paid to or for members (Part IX, column (A), line 4)		6,422,206.	7,255,332.
ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0,422,200.	25,901.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	51.4	••	25,501.
Exp				6,025,731.	6,388,553.
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		12,801,775.	14,079,393.
				4,021,427.	3,597,156.
or		Revenue less expenses. Subtract line 18 from line 12		jinning of Current Year	End of Year
ance	20	Total assets (Part X, line 16)		42,530,088.	41,876,901.
t Assets ( d Balanc	20 21			2,463,633.	1,281,377.
Vet ∕ und		Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		40,066,455.	40,595,524.
Pa	rt II	Signature Block		,000,100,	

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 KOTVA, BOARD CHAIR											
		Type or print name and title											
	Prin	t/Type preparer's name	Preparer's signature	Date	Check	PTIN							
Paid	JEN	NIFER M. VACHA	JENNIFER M. VACHA	02/09/23	self-employed	P01251998							
Preparer	Firn	n's name 🕒 ARMANINO LLP		F	Firm's EIN 🕨 🧐	4-6214841							
Use Only	Firn	n's address 🕨 6 CITYPLACE DRIVE, SUITE	900										
	ST. LOUIS, MO 63141 Phone no.314												
May the I	RS di	scuss this return with the preparer shown abov	/e? See instructions			X Yes	No						
						- 00	<b>A</b> (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.						

132001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2021) GIRL SCOUTS OF EASTERN MISSOURI INC.	43-0662471 Page <b>2</b>
Par	t 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	
-	prior Form 990 or 990-EZ?	Yes X No
~	If "Yes," describe these new services on Schedule O.	s? Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services If "Yes," describe these changes on Schedule O.	S? Yes 🔺 No
4	Describe the organization's program service accomplishments for each of its three largest program services,	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot	hers, the total expenses, and
4-	revenue, if any, for each program service reported.	• 9 883 903 v
4a	(Code:) (Expenses \$ including grants of \$ 409,607. ) (Re SEE SCHEDULE O FOR PROGRAM SERVICE ACCOMPLISHMENTS	evenue \$ 5,865,905.
4b	(Code:) (Expenses \$ including grants of \$) (Re	evenue \$ )
	SEE SCHEDULE O	
4c	(Code:) (Expenses \$ including grants of \$) (Re	evenue \$ )
4d	Other program services (Describe on Schedule O.)	
<b>A</b> -	(Expenses \$ including grants of \$ ) (Revenue \$	)
40	Total program service expenses 11,931,778.	Form <b>990</b> (2021)
132002	12-09-21	Form 000 (2021)
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Form 990 (2021) 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		х
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		х
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,			
'		7		x
8	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	- /		
0		8		x
•	Schedule D, Part III	0		
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?	•		v
40	If "Yes," complete Schedule D, Part IV	9		<u>x</u>
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,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D. Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	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
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
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			<u> </u>
	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			<u> </u>
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
17		17	x	
10	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	х	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	Δ	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"			v
	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		<u> </u>
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	X
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 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? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	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		X
	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? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	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 31			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	х	
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	4			,

Form	990 (2021) GIRL SCOUTS OF EASTERN MISSOURI INC. 43-066247	1	Р	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			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 199			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>		X
b	If "Yes," enter the name of the foreign country			
<b>F</b> -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			x
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50		<u> </u>
0a		6a		x
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ua		
D	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		x
d	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 contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	-		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter:         Gross income from members or shareholders         11a			
	Gross income from members or shareholders       11a         Gross income from other sources. (Do not net amounts due or paid to other sources against       1	-		
b	amounts due or received from them.) <b>11b</b>			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
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	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		└──
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	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 income?	16		X
-	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			1
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
100005	If "Yes," complete Form 6069. 12-09-21 5	Eorm	990	(2021)
132005	12-09-21 <b>D</b>			(LUCI)

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	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 25	;		
	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.			
b	Enter the number of voting members included on line 1a, above, who are independent <b>1b</b>	5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x
6	Did the organization have members or stockholders?	6		x
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b		12b	х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed  MONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	X       Own website       X       Upon request       Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	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 books and records			
20	······································			
20	THE ORGANIZATION - 314.592.2300			
20			<b>990</b>	

Form 990 (2021)	GIRL SCOUTS OF EASTERN MISSOURI INC.	43-0662471	Page 1
Part VII Compens	ation of Officers, Directors, Trustees, Key Employees, High	est Compensated	
Employee	es, and Independent Contractors		
Check if Sch	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 t	for all persons required to be listed. Report compensation for the calendar year	ending with or within the organization's	tax year.
<ul> <li>List all of the organ</li> </ul>	nization's current officers, directors, trustees (whether individuals or organization	ons), regardless of amount of compensa	ation.

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, 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.

Name and title         Average boxes         Description boxes         Description boxes <thd< th=""><th>(A)</th><th>(B)</th><th></th><th></th><th>(0</th><th>C)</th><th></th><th></th><th>(D)</th><th>(E)</th><th>(F)</th></thd<>	(A)	(B)			(0	C)			(D)	(E)	(F)
Hours per veck, interpret veck, interpretor is being million veck, interpretor veck, interpretor is being million veck, interpretor veck, interpretor is being million veck, interpretor veck, in			(10		Pos	itior					
Week (ist ary organizations below line)         Week (ist ary pours for related organizations below line)         Inon the second		hours per	box	, unles	ss pe	rson i	s both	n an	compensation	compensation	amount of
(1)         DONNIE BARCZYKOWSKI         40.00         x         450,244.         0.         32,512.           CBO         40.00         x         450,244.         0.         32,512.           CYO         x         162,064.         0.         7,520.           CINER ROPFICER         x         153,614.         0.         13,561.           CHIFE ROPFICER         x         166,739.         0.         13,216.           CHIFE ROPFICER         40.00         x         136,457.         0.         17,040.           C(5)         KELV DALEEN         40.00         x         136,457.         0.         17,040.           C(5)         KELV DALEEN         40.00         x         x         136,457.         0.         0.           C(6)         DAWN L. KOTVA         1.00         x         x         0.         0.         0.         0.           (7)         CYNTHIA HEATH         1.00         x         x         0.         0.         0.         0.           (8)         JESCIC WILLINGHAM         1.00         x         x         0.         0.         0.         0.           SCIC CHAIR         X         X         0.         0		week		cer an I	d a d	lirecto	r/trus T	tee)	from	from related	other
(1)         DONNIE BARCZYKOWSKI         40.00         x         450,244.         0.         32,512.           CBO         40.00         x         450,244.         0.         32,512.           CYO         x         162,064.         0.         7,520.           CINER ROPFICER         x         153,614.         0.         13,561.           CHIFE ROPFICER         x         166,739.         0.         13,216.           CHIFE ROPFICER         40.00         x         136,457.         0.         17,040.           C(5)         KELV DALEEN         40.00         x         136,457.         0.         17,040.           C(5)         KELV DALEEN         40.00         x         x         136,457.         0.         0.           C(6)         DAWN L. KOTVA         1.00         x         x         0.         0.         0.         0.           (7)         CYNTHIA HEATH         1.00         x         x         0.         0.         0.         0.           (8)         JESCIC WILLINGHAM         1.00         x         x         0.         0.         0.         0.           SCIC CHAIR         X         X         0.         0			ector							U U	
(1)         DONNIE BARCZYKOWSKI         40.00         x         450,244.         0.         32,512.           CBO         40.00         x         450,244.         0.         32,512.           CYO         x         162,064.         0.         7,520.           CINER ROPFICER         x         153,614.         0.         13,561.           CHIFE ROPFICER         x         166,739.         0.         13,216.           CHIFE ROPFICER         40.00         x         136,457.         0.         17,040.           C(5)         KELV DALEEN         40.00         x         136,457.         0.         17,040.           C(5)         KELV DALEEN         40.00         x         x         136,457.         0.         0.           C(6)         DAWN L. KOTVA         1.00         x         x         0.         0.         0.         0.           (7)         CYNTHIA HEATH         1.00         x         x         0.         0.         0.         0.           (8)         JESCIC WILLINGHAM         1.00         x         x         0.         0.         0.         0.           SCIC CHAIR         X         X         0.         0			or dir	e			ated			•	
(1)         DONNIE BARCZYKOWSKI         40.00         x         450,244.         0.         32,512.           CBO         40.00         x         450,244.         0.         32,512.           CYO         x         162,064.         0.         7,520.           CINER ROPFICER         x         153,614.         0.         13,561.           CHIFE ROPFICER         x         166,739.         0.         13,216.           CHIFE ROPFICER         40.00         x         136,457.         0.         17,040.           C(5)         KELV DALEEN         40.00         x         136,457.         0.         17,040.           C(5)         KELV DALEEN         40.00         x         x         136,457.         0.         0.           C(6)         DAWN L. KOTVA         1.00         x         x         0.         0.         0.         0.           (7)         CYNTHIA HEATH         1.00         x         x         0.         0.         0.         0.           (8)         JESCIC WILLINGHAM         1.00         x         x         0.         0.         0.         0.           SCIC CHAIR         X         X         0.         0			ustee	truste		e	bensi		· ·	1099-NEC)	<b>v</b>
(1)         DONNIE BARCZYKOWSKI         40.00         x         450,244.         0.         32,512.           CBO         40.00         x         450,244.         0.         32,512.           CYO         x         162,064.         0.         7,520.           CINER ROPFICER         x         153,614.         0.         13,561.           CHIFE ROPFICER         x         166,739.         0.         13,216.           CHIFE ROPFICER         40.00         x         136,457.         0.         17,040.           C(5)         KELV DALEEN         40.00         x         136,457.         0.         17,040.           C(5)         KELV DALEEN         40.00         x         x         136,457.         0.         0.           C(6)         DAWN L. KOTVA         1.00         x         x         0.         0.         0.         0.           (7)         CYNTHIA HEATH         1.00         x         x         0.         0.         0.         0.           (8)         JESCIC WILLINGHAM         1.00         x         x         0.         0.         0.         0.           SCIC CHAIR         X         X         0.         0		1 *	ual tri	ional		ploye	t com		1099-NEC)		
(1)         DONNIE BARCZYKOWSKI         40.00         x         450,244.         0.         32,512.           CBO         40.00         x         450,244.         0.         32,512.           CYO         x         162,064.         0.         7,520.           CINER ROPFICER         x         153,614.         0.         13,561.           CHIFE ROPFICER         x         166,739.         0.         13,216.           CHIFE ROPFICER         40.00         x         136,457.         0.         17,040.           C(5)         KELV DALEEN         40.00         x         136,457.         0.         17,040.           C(5)         KELV DALEEN         40.00         x         x         136,457.         0.         0.           C(6)         DAWN L. KOTVA         1.00         x         x         0.         0.         0.         0.           (7)         CYNTHIA HEATH         1.00         x         x         0.         0.         0.         0.           (8)         JESCIC WILLINGHAM         1.00         x         x         0.         0.         0.         0.           SCIC CHAIR         X         X         0.         0			ndivid	n stit ut	Officer	(ey em	Highes	ormei			organizations
(2) JULIE CUBBAGE       40.00       x       162,064.       0.       7,520.         (3) KATHLEEN MACK       40.00       x       153,614.       0.       13,561.         (4) KATHLEEN MACK       40.00       x       153,614.       0.       13,561.         (4) KATHLEEN MARK MGMT       40.00       x       146,739.       0.       13,216.         (5) KELLY DALEEN       40.00       x       136,457.       0.       17,040.         (6) DARN L, KOTVA       1.00       x       x       0.       0.       0.         BOARD CHAIR       x       x       0.       0.       0.       0.       0.         (7) CYNTHIA HEATH       1.00       x       x       0.       0.       0.       0.         BOARD CHAIR       1.00       x       x       0.       0.       0.       0.         (9) KIMBERLY HONGE-BELL       1.00       x       x       0.       0.       0.       0.         (10) DONN DOERHOFF       1.00       x       x       0.       0.       0.       0.       0.         (11) CYNY DONATO       1.00       x       x       0.       0.       0.       0.       0.	(1) BONNIE BARCZYKOWSKI	40.00	_	-	0	-					
CFO         x         162,064.         0.         7,520.           (3) KATHLEEN MACK         40,00         x         153,614.         0.         13,561.           CHIEF HR OFFICER         x         153,614.         0.         13,561.           DIRECTOR CAPITAL FROJ & RISK MGMT         40,00         x         146,739.         0.         13,216.           (5) KELLY DALEEN         40,00         x         136,457.         0.         17,040.           (6) DAWN L, KOTVA         1.00         x         x         0.         0.         0.           BOARD CHAIR         x         x         0.         0.         0.         0.         0.           BOARD CHAIR         1.00         x         x         0.         0.         0.         0.           BOARD CHAIR         1.00         x         x         0.         0.         0.           BOARD CHAIR         1.00         x         x         0.         0.         0.           BOARD CHAIR         1.00         x         x         0.         0.         0.           IST VICE CHAIR         1.00         x         x         0.         0.         0.           IPREAJURER </td <td>CEO</td> <td></td> <td></td> <td></td> <td>х</td> <td></td> <td></td> <td></td> <td>450,244.</td> <td>0.</td> <td>32,512.</td>	CEO				х				450,244.	0.	32,512.
(3) KATHLEEN MACK       40.00       x       153,614.       0.       13,561.         CHLEF HR OFFICER       40.00       x       146,739.       0.       13,216.         DIRECTOR CAPITAL PROJ & RISK MGMT       40.00       x       146,739.       0.       13,216.         CHLEF MRMERSHIP & MKTING OFFICER       40.00       x       136,457.       0.       17,040.         (6) DAWN L. KOTVA       1.00       x       x       0.       0.       0.         BOADC CHAIR       x       x       0.       0.       0.       0.         (7) CYNTHIA HEATH       1.00       x       x       0.       0.       0.         BOARD CHAIR (TERM 3/22)       x       x       0.       0.       0.       0.         (8) JESSICA WILLINGHAM       1.00       x       x       0.       0.       0.         SCRETLY HORGE-BELL       1.00       x       x       0.       0.       0.       0.         SCRETARY       1.00       x       x       0.       0.       0.       0.       0.         SCRETARY       X       X       0.       0.       0.       0.       0.       0.       0.       0.	(2) JULIE CUBBAGE	40.00									
CHIEF HR OFFICER         X         153,614.         0.         13,561.           (4) KATHLEEN DABROWSKI         40.00         X         146,739.         0.         13,216.           DIRECTOR CAPITAL PROJ & RISK MGMT         X         146,739.         0.         13,216.           (5) KELLY DALEEN         40.00         X         136,457.         0.         17,040.           (6) DAWN L. KOTVA         1.00         X         X         0.         0.         0.           BOARD CHAIR         X         X         0.         0.         0.         0.         0.           (7) CYNTHIA HEATH         1.00         X         X         0.         0.         0.         0.           (8) JESSICA WILLINGHAM         1.00         X         X         0.         0.         0.           (9) KIMBERLY HODGE-BELL         1.00         X         X         0.         0.         0.           (10) DONA DORHOFF         1.00         X         X         0.         0.         0.           TREASURER         X         X         0.         0.         0.         0.         0.         0.           JERECTOR (TERM 3/22)         X         X         0.	CFO				Х				162,064.	0.	7,520.
(4) KATHLEEN DABROWSKI       40.00       X       146,739.       0.       13,216.         (5) KELLY DALEEN       40.00       X       146,739.       0.       13,216.         (5) KELLY DALEEN       40.00       X       136,457.       0.       17,040.         (6) DAWN L. KOTVA       1.00       X       X       0.       0.       0.         BOAD CHAIR       X       X       0.       0.       0.       0.       0.         (7) CYNTHIA HEATH       1.00       X       X       0.       0.       0.       0.         (8) JESSICA WILLINGHAM       1.00       X       X       0.       0.       0.       0.         (9) KIMBERLY HODGE-BELL       1.00       X       X       0.       0.       0.       0.         (10) DONNA DOERHOFF       1.00       X       X       0.       0.       0.       0.         (11) CYNDY DONATO       1.00       X       X       0.       0.       0.       0.         (12) KARLA BAKERSMITH       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.<	(3) KATHLEEN MACK	40.00									
DIRECTOR CAPITAL PROJ & RISK MGMT         X         146,739.         0.         13,216.           (5)         KELLY DALEEN         40.00         X         136,457.         0.         17,040.           (6)         DARN L. KOTVA         1.00         X         X         0.         0.         0.           BOARD CHAIR         X         X         0.         0.         0.         0.         0.           BOARD CHAIR         X         X         0.         0.         0.         0.         0.           BOARD CHAIR (TERM 3/22)         X         X         0.         0.         0.         0.         0.         0.           SIGE WILLINGHAM         1.00         X         X         0. <td>CHIEF HR OFFICER</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X</td> <td></td> <td>153,614.</td> <td>0.</td> <td>13,561.</td>	CHIEF HR OFFICER						X		153,614.	0.	13,561.
(5)       KELLY DALEEN       40.00       x       136,457.       0.       17,040.         (6)       DAWN L. KOTVA       1.00       x       x       0. <t< td=""><td>(4) KATHLEEN DABROWSKI</td><td>40.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	(4) KATHLEEN DABROWSKI	40.00									
CHIEF MEMBERSHIP & MKTING OFFICER         x         136,457.         0.         17,040.           (6) DAWN L. KOTVA         1.00         x         x         x         0.         0.         0.           BOARD CHAIR         x         x         x         0.         0.         0.         0.           (7) CYNTHIA HEATH         1.00         x         x         0.         0.         0.         0.           BOARD CHAIR (TERM 3/22)         x         x         0.         0.         0.         0.         0.           (8) JESSICA WILLINGHAM         1.00         x         x         0.         0.         0.         0.         0.           ST VICE CHAIR         x         x         0. <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>x</td> <td></td> <td>146,739.</td> <td>0.</td> <td>13,216.</td>							x		146,739.	0.	13,216.
(6) DAWN L. KOTVA       1.00       X       X       0.       0.       0.         BOARD CHAIR       1.00       X       X       0.       0.       0.         (7) CYNTHIA HEATH       1.00       X       X       0.       0.       0.         BOARD CHAIR (TERM 3/22)       X       X       0.       0.       0.       0.         (8) JESSICA WILLINGHAM       1.00       X       X       0.       0.       0.         19) KIMBERLY HODGE-BELL       1.00       X       X       0.       0.       0.         2ND VICE CHAIR       X       X       0.       0.       0.       0.       0.         101 DONNA DOEHOFF       1.00       X       X       0.       0.       0.       0.         TREASURER       X       X       0.       0.       0.       0.       0.       0.         (11) CYNPY DONATO       1.00       X       X       0.       0.       0.       0.       0.       0.         (12) KARLA BAKERSMITH       1.00       X       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0. <td>(5) KELLY DALEEN</td> <td>40.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(5) KELLY DALEEN	40.00									
BOARD CHAIR         X         X         X         X         0.         0.         0.           (7) CYNTHIA HEATH         1.00         X         X         X         0.         0.         0.           BOARD CHAIR (TERM 3/22)         X         X         X         0.         0.         0.         0.           (8) JESSICA WILLINGHAM         1.00         X         X         0.         0.         0.         0.           1ST VICE CHAIR         X         X         0.         0.         0.         0.         0.           (9) XIMBERLY HODGE-BELL         1.00         X         X         0.         0.         0.           (10) DONNA DOERHOFF         1.00         X         X         0.         0.         0.           (11) CYNDY DONTO         1.00         X         X         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.         0.           IERECTOR (TERM 3/22)         X         X         0.         0.         0.         0.           IBRECTOR         X         X         0.         0.         0.         0.         0.							X		136,457.	0.	17,040.
(7) CYNTHIA HEATH       1.00       x       x       x       0.       0.       0.         BOARD CHAIR (TERM 3/22)       x       x       x       0.       0.       0.       0.         (8) JESSICA WILLINGHAM       1.00       x       x       x       0.       0.       0.         1ST VICE CHAIR       x       x       x       0.       0.       0.       0.         (9) KIMBERLY HODGE-BELL       1.00       x       x       0.       0.       0.       0.         2ND VICE CHAIR       x       x       x       0.       0.       0.       0.         (10) DONNA DOERHOFF       1.00       x       x       x       0.       0.       0.         (11) CYNDY DONATO       1.00       x       x       x       0.       0.       0.         SECRETARY       x       x       x       0.       0.       0.       0.       0.         (12) KARLA BAKERSMITH       1.00       x       x       0.       0.       0.       0.         DIRECTOR       x       x       0.       0.       0.       0.       0.       0.         DIRECTOR       x <t< td=""><td></td><td>1.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>		1.00									
BOARD CHAIR (TERM 3/22)         X         X         X         X         X         0.         0.         0.           (8) JESSICA WILLINGHAM         1.00         X         X         X         0.         0.         0.           1ST VICE CHAIR         X         X         X         0.         0.         0.         0.           (9) KIMBERLY HODGE-BELL         1.00         X         X         0.         0.         0.           (10) DONNA DOERHOFF         1.00         X         X         0.         0.         0.           (11) CYNDY DONATO         1.00         X         X         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.           (12) KARLA BAKERSMITH         1.00         X         X         0.         0.         0.           (13) JENNY BARTLOW         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           (14) LISA BELL-REIM         1.00         X         0.         0.         0.         0.         0.         0.			Х		Х				0.	0.	0.
(8) JESSICA WILLINGHAM       1.00       x       x       x       0.       0.       0.         1ST VICE CHAIR       1.00       x       x       x       0.       0.       0.         (9) KIMBERLY HODGE-BELL       1.00       x       x       x       0.       0.       0.         2ND VICE CHAIR       x       x       x       x       0.       0.       0.         (10) DONNA DOERHOFF       1.00       x       x       x       0.       0.       0.         (11) CYNDY DONATO       1.00       x       x       0.       0.       0.       0.         SECRETARY       x       x       0.       0.       0.       0.       0.       0.         IL2 KARLA BAKERSMITH       1.00       x       x       0.       0.       0.       0.       0.       0.         IL3 JENNY BARLOW       1.00       x       0.		1.00									
IST VICE CHAIR         x			Х		Х				0.	0.	0.
(9)       KIMBERLY HODGE-BELL       1.00       x       x       0.       0.       0.         2ND VICE CHAIR       x       x       x       0.       0.       0.       0.         (10)       DONNA DOERHOFF       1.00       x       x       0.       0.       0.       0.         (11)       CYNDY DONATO       1.00       x       x       0.       0.       0.       0.         SECRETARY       x       x       x       0.       0.       0.       0.       0.         (12)       KARLA BAKERSMITH       1.00       x       0.	( )	1.00									
2ND VICE CHAIR         x			Х		Х				0.	0.	0.
(10) DONNA DOERHOFF       1.00       X       X       X       0.       0.       0.         TREASURER       X       X       X       0.       0.       0.       0.         (11) CYNDY DONATO       1.00       X       X       X       0.       0.       0.         SECRETARY       X       X       X       0.       0.       0.       0.         (12) KARLA BAKERSMITH       1.00       X       X       0.       0.       0.       0.         DIRECTOR (TERM 3/22)       X       X       0.       0.       0.       0.       0.         (13) JENNY BARTLOW       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.       0.         (14) LISA BELL-REIM       1.00       X       0. <td></td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		1.00									
TREASURER         X         X         X         X         0.			Х		Х				0.	0.	0.
(11) CYNDY DONATO       1.00       X       X       X       0.       0.       0.         SECRETARY       1.00       X       X       X       0.       0.       0.         (12) KARLA BAKERSMITH       1.00       X       X       0.       0.       0.         DIRECTOR (TERM 3/22)       X       0       0.       0.       0.       0.         (13) JENNY BARTLOW       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.       0.         (15) CLARA BONSTEAD       1.00       X       0       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0       0		1.00									
SECRETARY         x         x         x         x         x         x         x         0.<			Х		Х				0.	0.	0.
(12) KARLA BAKERSMITH       1.00       X       0.       0.       0.       0.         DIRECTOR (TERM 3/22)       X       0.       0.       0.       0.       0.       0.         (13) JENNY BARTLOW       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (14) LISA BELL-REIM       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (15) CLARA BONSTEAD       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (16) LAUREL "BUFF" BURKEL       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (17) DANA CRESWELL       1.00       X       0.       0.       0.       0.       0.       0.         DIRECTOR (TERM 3/22)       X       0.       0.       0.		1.00									
DIRECTOR (TERM 3/22)       X       X       0.       0			Х		Х				0.	0.	0.
(13) JENNY BARTLOW       1.00       1.00       0.       <		1.00									
DIRECTOR       X       0       0.       0.       0.       0.         (14) LISA BELL-REIM       1.00       X       0       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.       0.         (15) CLARA BONSTEAD       1.00       X       0       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.         (16) LAUREL "BUFF" BURKEL       1.00       X       0       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.         (17) DANA CRESWELL       1.00       X       0       0.       0.       0.       0.         DIRECTOR (TERM 3/22)       X       0       0.       0.       0.       0.       0.       0.       0.			Х						0.	0.	0.
(14) LISA BELL-REIM       1.00       x       0.       0.       0.       0.         DIRECTOR       x       0       0.       0.       0.       0.       0.         (15) CLARA BONSTEAD       1.00       x       0.       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.         (16) LAUREL "BUFF" BURKEL       1.00       x       0.       0.       0.       0.         DIRECTOR       x       0       0.       0.       0.       0.       0.         DIRECTOR       x       0       0.       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.         UIRECTOR (TERM 3/22)       X       0       0.       0.       0.       0.       0.		1.00									
DIRECTOR         X         0         0. <th< td=""><td></td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>			Х						0.	0.	0.
(15) CLARA BONSTEAD       1.00       0       0. <th< td=""><td></td><td>1.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></th<>		1.00									
DIRECTOR         X         0. <t< td=""><td></td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>			Х						0.	0.	0.
(16) LAUREL "BUFF" BURKEL       1.00       x       0.       0.       0.       0.         DIRECTOR       x       1.00       x       0.       0.       0.       0.         (17) DANA CRESWELL       1.00       x       0.       0.       0.       0.       0.         DIRECTOR (TERM 3/22)       x       x       0.       0.       0.       0.       0.		1.00									
DIRECTOR         X         0. </td <td></td> <td></td> <td>Х</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>			Х						0.	0.	0.
(17) DANA CRESWELL         1.00         X         0. <td></td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		1.00									
DIRECTOR (TERM 3/22) X 0. 0. 0.			х						0.	0.	0.
		1.00									
	DIRECTOR (TERM 3/22)		Х						0.	0.	0. Form <b>990</b> (2021)

132007 12-09-21

Form 990 (2021)

# 12430209 701245 131658.300

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Form 990 (2021) GIRL SCOUTS C	OF EASTERN	MIS	SOU	RI :	INC	•			43-06624	71	F	Page <b>8</b>
Part VII Section A. Officers, Directors, Trust	ees, Key Em	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			(0				(D)	(E)		(F)	
Name and title	Average	(do		Posi heck r			ne	Reportable	Reportable	E	stimat	ted
	hours per	box	, unles	ss per	son i	s both	n an	compensation	compensation	a	mount	t of
	week		cer an	ıd a di	recto	or/trus	tee)	from	from related		othe	r
	(list any	ector						the	organizations		npens	
	hours for	or dir	e.			ated		organization	(W-2/1099-MISC/		from t	
	related	Istee	trustee		æ	pens		(W-2/1099-MISC/	1099-NEC)	· ·	ganiza	
	organizations below	ual tru	io nal .		ploye	t com ee		1099-NEC)			nd rela	
	line)	ndividual trustee or director	In stitutional t	Officer	Key employee	Highest compensated employee	Former			org	janizat	lions
(18) VICKI DAWKINS	1.00	_		0	×	1 0	4			+		
DIRECTOR		х						0.	0.			0.
(19) ERIC EOLOFF	1.00											
DIRECTOR		х						0.	0.	,		Ο.
(20) JEROMEY FARMER	1.00											
DIRECTOR		х						0.	0.			Ο.
(21) KALEN FUMAGALLI	1.00											
DIRECTOR		х						0.	0.			Ο.
(22) CHRISTINE IOVALDI	1.00											
DIRECTOR		х						0.	0.			Ο.
(23) MIRA IYER	1.00											
DIRECTOR		х						0.	0.			0.
(24) MIKE KIEFER	1.00											
DIRECTOR		х						0.	0.	.		Ο.
(25) JULIE LEVERENZ	1.00											
DIRECTOR		х						0.	0.	.		Ο.
(26) KEITH MARTY	1.00											
DIRECTOR		х						0.	0.			Ο.
1b Subtotal								1,049,118.	0.		83	,849.
c Total from continuation sheets to Part VI								0.	0.			0.
d Total (add lines 1b and 1c)								1,049,118.	0.		83	,849.
2 Total number of individuals (including but no							o re	eceived more than \$100.	000 of reportable			
compensation from the organization						,						5
											Yes	S No
<b>3</b> Did the organization list any <b>former</b> officer,	director, trust	ee, k	key e	emple	oye	e, or	hig	hest compensated emp	oyee on			
line 1a? If "Yes," complete Schedule J for su	uch individual		•		-					3		x
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150										4	х	
5 Did any person listed on line 1a receive or a												
rendered to the organization? <i>If "Yes." com</i>										5		x
Section B. Independent Contractors	<u></u>					2.1.						
1 Complete this table for your five highest cor	npensated inc	lepe	nder	nt co	ontra	actor	rs th	hat received more than \$	100,000 of compens	ation fr	om	
the organization. Report compensation for t												
(A)								(B)		(	C)	
Name and business	address							Description of s	ervices	Compe	ensatio	on
PALMER & CAY, LLC, 3050 PEACHTREE ROA	AD NW											
SUITE 475, ATLANTA, GA 30305								INSURANCE BROKER			243	,114.
CHARTWELLS DINING SERVICES												
PO BOX 91337, CHICAGO, IL 60693								RESIDENT CAMP MEAL	SERVICES		181	,362.
EPS NETWORKS, 58 PROGRESS PARKWAY,												
MARYLAND HEIGHTS, MO 63043								OUTSOURCED IT SERV	ICES		126	,962.
2 Total number of independent contractors (ir		ot lir	nitec	d to t			ted	above) who received mo	pre than			
\$100,000 of compensation from the organiz						3				_	000	(0.5.5.)
SEE PART VII, SECTION A CONTINU	JATION SHEE	TS								Form	990	(2021)
132008 12-09-21												

Form 990 GIRL SCOUTS O	OF EASTERN	MIS	SOU	RI	INC				43-06624	171
Part VII Section A. Officers, Directors, Tru		nplo	yee			ligh	est (		, ,	
(A) Name and title	<b>(B)</b> Average hours	(cl		Pos	<b>C)</b> ition that		ly)	<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	per week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) MARK MURRAY DIRECTOR	1.00	x						0.	0.	0.
(28) SONNI NOLAN DIRECTOR	1.00	x						0.	0.	0.
(29) DANA PLONKA	1.00									
DIRECTOR (30) THUY VI QUACH-BRAIG	1.00	X						0.	0.	0
DIRECTOR (31) JEFF STEINER	1.00	x						0.	0.	0
DIRECTOR (32) ANASTASIA STEVENSON	1.00	Х						0.	0.	0
DIRECTOR (33) KIT SUNDARARAMAN	1.00	х						0.	0.	0
DIRECTOR (TERM 3/22)		x						0.	0.	0
(34) SUSAN L. THOMAS DIRECTOR	1.00	x						0.	0.	0
		-								
		-								
		-								
		-								
Fotal to Part VII, Section A, line 1c										

132201 04-01-21

		Check if Schedule O	conta	ains a respoi	nse	or note to any line	in this Part VIII (A)	(B)	(C)	[ D)
							Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue exclu from tax und sections 512 -
0	1 a	Federated campaigns		1a		389,939.				
		•• • • •								
		Fundraising events				218,070.				
τ		Related organizations								
0		Government grants (cont				2,392,491.				
5		All other contributions, gifts		· · ·						
D		similar amounts not include				4,237,498.				
5	g	Noncash contributions included in				38,559.				
	h	Total. Add lines 1a-1f				►	7,237,998.			
						Business Code				
	2 a	CAMP FEES				900099	547,987.	547,987.		
	b	PROGRAM EVENTS				900099	188,156.	188,156.		
n	с									
2	d									
	е				_					
	f	All other program service	e reve	nue						
		Total. Add lines 2a-2f					736,143.			
	3	Investment income (inclu	ding	dividends, ir	tere	st, and				
		other similar amounts) $\dots$				►	577,342.			577,3
	4	Income from investment	of tax	exempt bor	nd p	roceeds 🕨 🕨				
	5	Royalties	· · · <u>· · · · · · · ·</u>							
				(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 (los	s) <u></u>			<b>&gt;</b>				
	7 a	Gross amount from sales of	:	(i) Securiti	es	(ii) Other				
		assets other than inventory	7a	7,109,1	18.	1,300.				
	b	Less: cost or other basis								
		and sales expenses				1,150.				
	С	Gain or (loss)	7c	62,9	15.	150.				
	d	Net gain or (loss)				<b>&gt;</b>	63,065.			63,0
	8 a	Gross income from fundrais		•						
		including \$	218,	070. of						
		contributions reported or		,						
		Part IV, line 18			8a	45,278.				
		Less: direct expenses			8b	131,037.				
		Net income or (loss) from		-	ts	····· ►	-85,759.			-85,7
	9 a	Gross income from gami								
		Part IV, line 19			<u>9a</u>					
		Less: direct expenses			9b					
		Net income or (loss) from	-	-		▶				
1	10 a	Gross sales of inventory,				11 070 075				
	-	and allowances				11,972,877.				
1		Less: cost of goods sold				2,970,660.	0.000.015	0.000.017		
+	С	Net income or (loss) from	1 sales	s of inventor	у		9,002,217.	9,002,217.		
		NT GOELL ANDOUG				Business Code	145 540	145 542		
Ð	-	MISCELLANEOUS				900099	145,543.	145,543.		
E C	b									
Develue	С									
1		All other revenue				L	446 644			
		Total. Add lines 11a-11d					145,543.	0.000.007		
	12	Total revenue. See instruct	ions			🕨	17,676,549.	9,883,903.	0.	554,6

GIRL SCOUTS OF EASTERN MISSOURI INC.

Form 990 (2021)

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43-0662471

GIRL SCOUTS OF EASTERN MISSOURI INC.

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

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#### 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 409,607 409,607, individuals. See Part IV, line 22 3 Grants and other assistance to foreign 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, 220,100. trustees, and key employees 703,151 220,100 262,951. Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 5,358,673. 4,467,486. 492,738. 398,449. 7 8 Pension plan accruals and contributions (include 26,697 section 401(k) and 403(b) employer contributions) 229,529 193,754. 9,078. 540,715 438,583, 72,649 29,483. Other employee benefits 9 423,264 335,641 50,862. 36,761. 10 Payroll taxes 11 Fees for services (nonemployees): Management а 3,037. 4,180 449 694. b Legal 49,029, 35,619, 5,271, 8,139. С Accounting Lobbying d 25,901 25,901. Professional fundraising services. See Part IV, line 17 е 56,024. 56,024 Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g 266,297 223,420 33,060 9,817. column (A), amount, list line 11g expenses on Sch 0.) 263,403 223,225, 5,154 35,024. Advertising and promotion 12 499,817. 414,416. 36,463 48,938. 13 Office expenses Information technology 14 Royalties 15 775,627 669,442. 82,052, 24,133. 16 Occupancy 92,541 88,319, 3,711, 511. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 97,438. 64,008. 19,022. 14,408. Conferences, conventions, and meetings ..... 19 20 Interest Payments to affiliates 21 544,160 497,968, 34,644 11,548. 22 Depreciation, depletion, and amortization ..... 269,067 3,335. 306,417 34,015 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 2,350,317. 2,350,317. а SUPPLIES 712,574 694,968. 4,721 12,885. b MISCELLANEOUS 295,243. 268,315. 13,469 13,459. С BAD DEBT 64,486. 64,486. d 11,000 11,000. All other expenses е 14,079,393 11,931,778, 1,191,101 956,514. 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 if following SOP 98-2 (ASC 958-720)

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2021.05040 GIRL SCOUTS OF EASTERN MI 131658.1

Form 990 (2021)

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		Cash - non-interest-bearing			-,,		-,,
	2	Savings and temporary cash investments			9,749,596.	2	13,978,102.
	3	Pledges and grants receivable, net			7,301,020.	3	3,160,510.
	4	Accounts receivable, net			74,304.	4	117,583.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	ributor, or 35%				
		controlled entity or family member of any of thes			5		
	6	Loans and other receivables from other disqualit	ied person				
		under section 4958(f)(1)), and persons described				6	
s	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			195,085.	8	215,944.
As	9				162,661.	9	172,977.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	24,328,646.			
	b	Less: accumulated depreciation		16,080,324.	7,965,549.	10c	8,248,322.
	11	Investments - publicly traded securities			11,741,899.	11	9,580,549.
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		2,662,294.	15	3,363,455.	
	16	Total assets. Add lines 1 through 15 (must equa			42,530,088.	16	41,876,901.
	17	Accounts payable and accrued expenses		1,021,310.	17	1,105,132.	
	18	Grants payable			18		
	19	Deferred revenue		102,538.	19	126,194.	
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete I			21		
ß	22	Loans and other payables to any current or form					
itie		trustee, key employee, creator or founder, subst					
Liabilities		controlled entity or family member of any of thes			22		
Ë	23	Secured mortgages and notes payable to unrela	ted third pa			23	
	24	Unsecured notes and loans payable to unrelated	-		1,223,000.	24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines					
		of Schedule D			116,785.	25	50,051.
	26	Total liabilities. Add lines 17 through 25			2,463,633.	26	1,281,377.
		Organizations that follow FASB ASC 958, che					
ŝ		and complete lines 27, 28, 32, and 33.					
lances	27	Net assets without donor restrictions			22,133,097.	27	22,484,323.
	28	Net assets with donor restrictions			17,933,358.	28	18,111,201.
pd		Organizations that do not follow FASB ASC 9					
Ľ		and complete lines 29 through 33.					
۶ ۵	29	Capital stock or trust principal, or current funds				29	
sets	30	Paid-in or capital surplus, or land, building, or ec				30	
As	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Ba	32	Total net assets or fund balances	-		40,066,455.	32	40,595,524.
z	1	Total liabilities and net assets/fund balances	42,530,088.	33	41,876,901.		

**(A)** Beginning of year

2,677,680.

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

Cash - non-interest-bearing

**(B)** End of year

3,039,459.

Form 990 (2021)

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Form	990 (2021) GIRL SCOUTS OF EASTERN MISSOURI INC.	43-066247	1	Pa	<sub>ge</sub> 12
	rt XI Reconciliation of Net Assets				<u>.</u>
	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	17,	,676,	549.
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,	,079,	393.
3	Revenue less expenses. Subtract line 2 from line 1	3	3,	,597,	156.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	40,	,066,	455.
5	Net unrealized gains (losses) on investments	5	-2,	,680,	131.
6	Donated services and use of facilities	6		81,	620.
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9		469,	576.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	40,	,595,	524.
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
		r		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				
	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 Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	

Form **990** (2021)

132012 12-09-21

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.

## N

Nam	e of t	the organization						Employer	identification number
			COUTS OF EASTER						43-0662471
Pa	rt I	Reason for Public (	Charity Status.	(All organizations must o	omplete th	nis part.) S	ee instruction	s.	
The	organ	ization is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)			
1		A church, convention of ch	urches, or associatio	n of churches described	l in <b>sectio</b>	n 170(b)(1	I)(A)(i).		
2		A school described in secti	ion 170(b)(1)(A)(ii).	Attach Schedule E (Forn	n 990).)				
3		A hospital or a cooperative	hospital service orga	anization described in s	ection 170	(b)(1)(A)(ii	ii).		
4		A medical research organization						)(iii). Enter	the hospital's name,
		city, and state:	·						
5		An organization operated for	or the benefit of a col	llege or university owned	l or operate	ed by a go	vernmental u	nit describe	ed in
		section 170(b)(1)(A)(iv). (C		о ,	·	, 0			
6		A federal, state, or local gov		nental unit described in	section 17	70(b)(1)(A)	(v).		
	X	An organization that norma	-					ne general i	oublic described in
-		section 170(b)(1)(A)(vi). (C	-		onn a gore			ie general j	
8		A community trust describe		(1)(A)(vi), (Complete Par	+ II )				
9	$\square$	An agricultural research org				ed in conii	inction with a	land-grant	college
•		or university or a non-land-g				-		-	-
		university:	,			·····, ···,	,		
10		An organization that norma	Ilv receives (1) more	than 33 1/3% of its supr	ort from c	ontributior	ns. membersh	ip fees, and	d aross receipts from
		activities related to its exem							
		income and unrelated busir		-					-
		See section 509(a)(2). (Cor		(				,	,
11		An organization organized a	. ,	velv to test for public sa	fetv. See	section 50	)9(a)(4).		
12	$\square$	An organization organized a	-	•	•			rrv out the	purposes of one or
		more publicly supported or	-	-				•	
		lines 12a through 12d that	-						
а		<b>Type I.</b> A supporting orga	• •					-	giving
		the supported organization	-	-	• • • •	-			
		organization. You must c			·····j-···j -				1-
b		<b>Type II.</b> A supporting org	-		tion with it:	s supporte	ed organizatio	n(s). bv hav	vina
		control or management o	-				-		•
		organization(s). You mus						5	
с		Type III functionally inte			in connect	tion with, a	and functional	lv integrate	d with.
		its supported organization						, ,	
d		Type III non-functionally	. , .	•	-			ted organiz	zation(s)
		that is not functionally int						-	
		requirement (see instructi			-				
е		Check this box if the orga		•				II. Type III	
		functionally integrated, or					51 7 51	, ,,	
f	Ente	er the number of supported c		, , , , , , , , , , , , , , , , , , , ,					
		vide the following informatior	•						
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed ng document?	(v) Amount of	fmonetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)
Tota									

OMB No. 1545-0047

2021

**Open to Public** 

Inspection

GIRL SCOUTS OF EASTERN MISSOURI INC.

43-0662471 Page **2** 

 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) 🕨	(a) 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	3,045,408.	6,521,368.	8,685,140.	7,981,147.	7,237,998.	33,471,061.
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	3,045,408.	6,521,368.	8,685,140.	7,981,147.	7,237,998.	33,471,061.
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)						6,990,897.
	Public support. Subtract line 5 from line 4. ction B. Total Support						26,480,164.
		()	(1) 00 (0	()	( )) 0000	() 222 (	(0
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020 7,981,147.	(e) 2021	(f) Total
	Amounts from line 4	3,045,408.	6,521,368.	8,685,140.	7,901,147.	7,237,998.	33,471,061.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	107 721	207 602	205 251	202 112	577 242	1 470 120
•	and income from similar sources	187,731.	207,693.	205,251.	292,113.	577,342.	1,470,130.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	52,636.	51,142.	41,486.	27,978.	145,543.	318,785.
	assets (Explain in Part VI.) Total support. Add lines 7 through 10	52,050.	51,112.	41,400.	27,570.	110,010.	35,259,976.
	Gross receipts from related activities,					12	66,632,088.
	First 5 years. If the Form 990 is for th	,	,	ourth or fifth tax v	ear as a section 5	· · ·	,,
10	organization, check this box and <b>stor</b>						
Se	ction C. Computation of Publi						
	Public support percentage for 2021 (I			olumn (f))		14	75.10 %
	Public support percentage from 2020		•			15	69.53 %
	<b>33 1/3% support test - 2021.</b> If the o					· · · · ·	
	stop here. The organization qualifies					, 	X
b	<b>33 1/3% support test - 2020.</b> If the o		-				s box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	10% -facts-and-circumstances test	- 2021. If the org	anization did not c				or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te			-	-	-	►□
b	0 10% -facts-and-circumstances test	- 2020. If the org	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	10% or
	more, and if the organization meets th	ne facts-and-circum	stances test, chec	k this box and <b>st</b> e	<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	on did not check a l	box on line 13, 16a	, 16b, 17a, or 17b	, check this box a	nd see instructions	
						Schedule A	(Form 990) 2021

132022 01-04-22

# 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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(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						
3	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						
	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6				, ,		
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
	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.)						
13	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) organ	ization,
	check this box and stop here						
	tion C. Computation of Publi					<del> </del>	
	Public support percentage for 2021 (I		•	column (f))		15	%
	Public support percentage from 2020					16	%
	tion D. Computation of Inves					<u> </u>	
17	Investment income percentage for 20					17	%
18	Investment income percentage from					18	%
19a	33 1/3% support tests - 2021. If the						
_	more than 33 1/3%, check this box an						▶∟
b	<b>33 1/3% support tests - 2020.</b> If the	-					
	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check ti	his box and see ins		
13202	3 01-04-22		16			Sched	lule A (Form 990) 2021

1

2

3a

Yes No

# Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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.)

17

132024 01-04-21

3b 3c 4a 4b 4c 5a 5b <u>5c</u> 6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021
----------------------------

GIRL SCOUTS OF EASTERN MISSOURI INC.

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> Yes No

1

2

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	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 is 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 expeniation(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 <b>Part VI</b> how			
3	the organization maintained a close and continuous working relationship with the supported organization(s). 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 <b>Part VI</b> the role the organization's	2		
	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 satisfy the Integral Part Test during the ye	ear (see instructions)
-	Oneon the box next to the method that the organization used to satisfy the integral r art rest during the ye	<i>,ai</i> ( <i>eeeeaiea<i>ieaieaieaieaieaieaieaieaieaieaieaa<i>ieaieaieaieaieaieaieaieaa<i>ieaieaieaiea<i>ieaieaiea<i>ieaieaieaiea<i>ieaieaiea<i>ieaieaieaieaiea<i>ieaiea<i>ieaiea<i>ieaieaieaieaieaieaieaieaieaieaieaieaieaieaieaiea<i>ieaieaieaieaieaieaieaieaieaieaieaieaieaieaieaieaaieaa<i>iaaaaaaaaaaaaa</i></i></i></i></i></i></i></i></i></i></i></i></i>

- 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.

с	The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instructions).	
	<b>o</b> 11 <b>o</b> ,		_

- 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. 132025 01-04-22

3b Schedule A (Form 990) 2021

2a

2b

3a

Yes No

12430209 701245 131658.300

18

Sche	dule A (Form 990) 2021 GIRL SCOUTS OF EASTERN MISSOURI INC	43-0662471	Page 6		
Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	nizations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust or	n Nov. 20, 1970 ( <i>explain i</i>	n Part VI). See inst	ructions.
	All other Type III non-functionally integrated supporting organizations must of		•		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
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	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current (optiona	
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 Y	'ear
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	integra	ted Type III supporting or	ganization (see	

instructions).

Schedule A (Form 990) 2021

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Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Secti	on D - Distributions				Current Year	
1	Amounts paid to supported organizations to accomplish exe		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	3	3			
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - prior	ovide details in Part VI)		5		
6	Other distributions (describe in Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2021 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
		(i)	(ii)		(iii)	
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributior Pre-2021	าร	Distributable Amount for 2021	
_1	Distributable amount for 2021 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2021 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2021					
a	From 2016					
b	From 2017					
C	From 2018					
d	From 2019					
e	From 2020					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
<u>h</u>	Applied to 2021 distributable amount					
i	Carryover from 2016 not applied (see instructions)					
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2021 from Section D,					
	line 7: \$					
a	Applied to underdistributions of prior years					
b	Applied to 2021 distributable amount					
C	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2022. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
<u>a</u>	Excess from 2017					
b	Excess from 2018					
C	Excess from 2019					
d	Excess from 2020					
е	Excess from 2021					

Schedule A (Form 990) 2021

132027 01-04-22

12430209 701245 131658.300

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:

THER		
017 AMOUNT: \$ 52,636.		
018 AMOUNT: \$ 51,142.		
019 AMOUNT: \$ 41,486.		
020 AMOUNT: \$ 27,978.		
021 AMOUNT: \$ 145,543.		
32028 01-04-22		Schedule & (Form 990) 203
32028 01-04-22	21	Schedule A (Form 990) 20

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

# Schedule of Contributors

OMB No. 1545-0047

ation number

(Form 990)	<ul> <li>Attach to Form 990 or Form 990-PF.</li> <li>Go to www.irs.gov/Form990 for the latest information.</li> </ul>	2021				
Department of the Treasury Internal Revenue Service						
Name of the organization	1	Employer identification n				
	GIRL SCOUTS OF EASTERN MISSOURI INC.	43-0662471				
Organization type (chec	k 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	on				
	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					
, ,	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Sp	pecial Rule. See instructions.				
General Rule						
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution any one contributor. Complete Parts I and II. See instructions for determining a cor					
Special Rules						
sections 509(a) contributor, du	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or ing the year, total contributions of the greater of <b>(1)</b> \$5,000; or <b>(2)</b> 2% of the amou EZ, line 1. Complete Parts I and II.	r 16b, and that received from any one				

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

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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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) (2021)

Schedule B

Part I	Contributors (see instructions). Use duplicate copies of Part I if addi	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$1,223,000.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
<u> </u>	Name, address, and ZIP + 4	Total contributions	Type of contribution         Person       X         Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$1,169,491.	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
4		\$1,000,000.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$605,500.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$372,629.	Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021)

GIRL SCOUTS OF EASTERN MISSOURI INC.

Name of organization

Employer identification number

43-0662471

12430209 701245 131658.300

2021.05040 GIRL SCOUTS OF EASTERN MI 131658.1

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Page 2

## Schedule B (Form 990) (2021)

Name of organization

Employer identification number

GIRL SCOUTS OF EASTERN MISSOURI INC.

- -

43-0662471

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional additionadditional additionadditionadditionadditionad additionadd	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$12,882.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2021)

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123452 11-11-21

2021.05040 GIRL SCOUTS OF EASTERN MI 131658.1

Page **2** 

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art 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. rom 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
		\$	
(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) (2021)

Employer identification number

123453 11-11-21

Schedule B (Form 990) (2021)

# 12430209 701245 131658.300

Name of or	ganization		Employer identification number		
TRL SCO	UTS OF EASTERN MISSOURI INC.		43-0662471		
Part III			ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year		
	completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 or	r less for the year. (Enter this info. once.) <b>*</b>		
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-			<u> </u>		
		(e) Transfer of gif			
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
		[			
(a) No. from	(b) Purpose of gift	(a) Lies of gift	(d) Description of how gift is hold		
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-		(e) Transfer of git	ft		
	Transferee's name, address, and ZIP + 4				
-	Transieree's name, address, a		Relationship of transferor to transferee		
		[			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I					
		(e) Transfer of gif	ft		
	Transferee's name, address, a	Relationship of transferor to transferee			
(a) No.					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Ļ					
		(e) Transfer of gif	ft		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
123454 11-11-	-21		Schedule B (Form 990) (202		

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# 12430209 701245 131658.300

SC	HEDULE D	Supplementa	al Financial S	Statements		OMB No. 1545-0047
(Forr	n 990)	► Complete if the org Part IV, line 6, 7, 8, 9, 10	, 11a, 11b, 11c, 11d, <sup>-</sup>	Yes" on Form 990, 11e, 11f, 12a, or 12b.		2021
	ment of the Treasury I Revenue Service	Go to www.irs.gov/Form9	Attach to Form 990. 90 for instructions an	d the latest information.		Open to Public Inspection
Nam	e of the organizat					loyer identification number
		GIRL SCOUTS OF EASTERN MISS		<u></u>		43-0662471
Pa		ations Maintaining Donor Advise on answered "Yes" on Form 990, Part IV, lin		Similar Funds or A	ccoun	<b>tS.</b> Complete if the
			(a) Donor advi	sed funds	<b>(b)</b> Fun	ds and other accounts
1	Total number at e	nd of year				
2	Aggregate value o	of contributions to (during year)				
3		of grants from (during year)				
4		at end of year				
5	-	on inform all donors and donor advisors in	-			
•		on's property, subject to the organization's				Yes No
6		on inform all grantees, donors, and donor a				
	impermissible priv	poses and not for the benefit of the donor o vate benefit?			•	Yes No
Pa		vation Easements. Complete if the org				
1		servation easements held by the organization			,	
	Preservation	n of land for public use (for example, recrea	tion or education)	Preservation of a hist	orically	important land area
	Protection of	of natural habitat		Preservation of a cer	tified his	storic structure
	Preservation	n of open space				
2	-	through 2d if the organization held a qualit	fied conservation contr	ibution in the form of a co	onservat	
	day of the tax yea					Held at the End of the Tax Year
a		onservation easements			2a	
b	v				2b	
ے اب		rvation easements on a certified historic stru			2c	
d		rvation easements included in (c) acquired a nal Register	•		2d	
3		vation easements modified, transferred, rel				during the tax
-	year 🕨		,, -	· · · · · · · · · · · · · · · · · · ·		
4	Number of states	where property subject to conservation eas	sement is located 🕨			
5	Does the organiza	ation have a written policy regarding the per	iodic monitoring, inspe	ection, handling of		
		forcement of the conservation easements it				
6	Staff and voluntee	er hours devoted to monitoring, inspecting,	handling of violations,	and enforcing conservati	on ease	ments during the year
_	►					
7		ses incurred in monitoring, inspecting, hanc	lling of violations, and	enforcing conservation ea	asement	s during the year
•		 rvation easement reported on line 2(d) abov	a action the requireme	$rac{1}{20}$	\ <i>(</i> ;)	
8		)(4)(B)(ii)?				Yes No
9		be how the organization reports conservation				
•	-	d include, if applicable, the text of the footr		•		
		counting for conservation easements.	5			
Pa	rt III Organiz	ations Maintaining Collections of	Art, Historical Ti	reasures, or Other S	Simila	r Assets.
	Complete i	if the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	•	elected, as permitted under FASB ASC 95	•			
		easures, or other similar assets held for put			nce of p	public
-	· •	Part XIII the text of the footnote to its finar				
b	-	elected, as permitted under FASB ASC 95				
		sures, or other similar assets held for public	exhibition, education,	or research in furtherand	e ot pub	DIIC SERVICE,
	-	ing amounts relating to these items:				\$
		uded on Form 990, Part VIII, line 1 ed in Form 990, Part X			•	ν \$
2	• •	received or held works of art, historical tre				•
_		unts required to be reported under FASB A				
а	-	l on Form 990, Part VIII, line 1	-			\$

b	Assets included in Form 990,	Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.								Schedule D (Form 990) 2021			
132051 10-28-21		28									
430209 701245	131658.300	2021.05040	GIRL	SCOUTS	OF	EASTERN	MI	131658	.1		

\$

d Grants or scholarships	Sche		S OF EASTERN MIS					662471	Pa	<sub>age</sub> 2
colection terms (check all that apply): <ul> <li></li></ul>	Par	t III Organizations Maintaining C	ollections of Art	t, Historical T	reasures, oi	r Other	Similar Asse	ets <sub>(contil</sub>	nued)	
a       Public exhibition       d       Can or exchange program         b       Scholary research       e       Other	3	Using the organization's acquisition, accessi	on, and other records	s, check any of th	e following that	make sig	nificant use of it	ts		
b       Scholarly research       e       Other         c       Preservation for future generations       Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.         5       Uning the year, did the organization's collections and explain how they further the organization's exempt purpose in Part XIII.       School the organization's collection?       Yes       No         Part V       Escrow and Cutstochial Arrangements. Complete if the organization's collection?       Yes       No         b       if "Yes," explain the arrangement in Part XIII and complete the following table:       Amount       10         c       Beginning balance       10       11       11       14       14         d       Additions during the year       10       14       14       14         Distributions during the year       10       14       14       15       16       174       18       10       174       193 <td< td=""><td></td><td>collection items (check all that apply):</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>		collection items (check all that apply):								
c       Preservation for future generations         4       Provide a description of the organization's collections and explain how they three the organization's exempt purpose in Part XIII.         5       During the year, did the organization is collections and explain how they three the organization's exempt purpose in Part XIII.         6       Dering the year, did the organization solut or receive donations of art, historical trassues, or other similar assets         7       The solution is the transmission of the reganization's exempt purpose in Part XIII.         7       Image: Solution of the organization answered 'Yes' on Form 990, Part X, line 21.         7       Is the organization an agent, theste, custodian or other intermediary for contributions or other assets not included on form 900, Part X, line 21.         7       Is the organization on agent, theste, custodian or other intermediary for contributions or other assets not included on form 900, Part X, line 21.         7       Is a doditions during the year         16       Image: Solution transmission include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?         2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Image: Solution transmission and second transmission include an amount on Form 990, Part X, line 21, for escrow and Customer to Part XIII.         Part V       Endowment FundS.       Complete if the organization answered 'Yes' on Form 990, Part X, line 10.         Part V	а	Public exhibition	d	Loan or e	xchange progra	am				
<ul> <li>4 Provide a description of the organization's collections and explain how they further the organization's exempt purgoes in Part XIII.</li> <li>5 During the year, did the organization solicit or receive donations of at, historical treasures, or other similar assets</li> <li>1 The set of the organization and the organization and the organization's collection?</li> <li>1 The set of the organization and the organization and the organization answered "Ves" on Form 980, Part X, line 9, or reported an amount on Form 980, Part X, line 21.</li> <li>1 The is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X, line 21.</li> <li>1 The iste organization angent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X, line 21.</li> <li>1 The iste organization include an amount on Form 980, Part X, line 21. (or escrew or custodial account liability?</li> <li>2 Did the organization include an amount on Form 980, Part X, line 21. (or escrew or custodial account liability?</li> <li>2 Did the organization include an amount on Form 980, Part X, line 21. (or escrew or custodial account liability?</li> <li>2 Did the organization include an amount on Form 980, Part X, line 21. (or escrew or custodial account liability?</li> <li>2 Did the organization include an amount on Form 980, Part X, line 21. (or escrew or custodial account liability?</li> <li>2 Did the organization and the organization answered "Yes" on Form 980, Part X, line 10.</li> <li>2 Provide the estimates the part of the organization answered "Yes" on Form 980, Part X, line 21. (or escrew or custodial account liability?</li> <li>3 A content examples, gans, and losses</li> <li>2</li></ul>	b	Scholarly research	е	Other						
<ul> <li>4 Provide a description of the organization's collections and explain how they further the organization's exempt purgoes in Part XIII.</li> <li>5 During the year, did the organization solicit or receive donations of at, historical treasures, or other similar assets</li> <li>1 The set of the organization and the organization and the organization's collection?</li> <li>1 The set of the organization and the organization and the organization answered "Ves" on Form 980, Part X, line 9, or reported an amount on Form 980, Part X, line 21.</li> <li>1 The is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X, line 21.</li> <li>1 The iste organization angent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X, line 21.</li> <li>1 The iste organization include an amount on Form 980, Part X, line 21. (or escrew or custodial account liability?</li> <li>2 Did the organization include an amount on Form 980, Part X, line 21. (or escrew or custodial account liability?</li> <li>2 Did the organization include an amount on Form 980, Part X, line 21. (or escrew or custodial account liability?</li> <li>2 Did the organization include an amount on Form 980, Part X, line 21. (or escrew or custodial account liability?</li> <li>2 Did the organization include an amount on Form 980, Part X, line 21. (or escrew or custodial account liability?</li> <li>2 Did the organization and the organization answered "Yes" on Form 980, Part X, line 10.</li> <li>2 Provide the estimates the part of the organization answered "Yes" on Form 980, Part X, line 21. (or escrew or custodial account liability?</li> <li>3 A content examples, gans, and losses</li> <li>2</li></ul>	с	Preservation for future generations								
5       During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets         10       Part IV       Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part X, line 21.         11       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. for escrow or custodial account liability?       Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Is the organization answered 'Yes' on Form 990, Part X line 92.         2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Is a station of the organization answered 'Yes' on Form 990, Part X line 92.       No         b If 'Yes', scippin the arrangement in Part XIII account for the organization answered 'Yes' on Form 990, Part X line 92.       No       Is array or escreware or escreware of Part XIII account liability?       Is a station of the account liability?         1a Beginning of year balance       [10, 1741, 899, 10,	4	Provide a description of the organization's co	ollections and explair	how they further	the organizatio	n's exem	pt purpose in Pa	art XIII.		
tops sold to raise funds: rather than to be maintained as part of the organization a collection?         Yes         No.           Part W         Escrow and Custodial Arrangements. Complete if the organization answered Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         Is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.         Is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.         Amount           c         Beginning balance         Id         Id         Amount           d Additions during the year         Ie         Int         Int         Yes         No           b If "Yes,' explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII         Int         Int<	5									
Part W       Escrow and Custodial Arrangements. Complete if the organization answerd 'Yes' on Form 990, Part N, line 9, or reported an amount on Form 990, Part X, line 21.         1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X // Intermediary for contributions or other assets not included on Form 990, Part X, line 21.         b If 'Yes,' explain the arrangement in Part XIII and complete the following table: <ul> <li>Amount</li> <li>d</li> <lid< li=""> <lid< li=""> <lid< li=""> <l< td=""><td></td><td>to be sold to raise funds rather than to be ma</td><td>aintained as part of th</td><td>ne organization's</td><td>collection?</td><td></td><td>[</td><td>Yes</td><td></td><td>No</td></l<></lid<></lid<></lid<></ul>		to be sold to raise funds rather than to be ma	aintained as part of th	ne organization's	collection?		[	Yes		No
reported an amount on Form 990, Part X, line 21.         1a       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?       Image: Type:	Par							V. line 9. or		
on Form 990, Part X2				Ũ			,			
on Form 990, Part X2	1a	Is the organization an agent, trustee, custodi	an or other intermed	iarv for contributio	ons or other ass	sets not in	ncluded			
b       If Yes, " explain the arrangement in Part XIII and complete the following table:          Amount          c       Beginning balance          Id          d       Additions during the year          Id          e       Distributions during the year          Id          1d          Id           Id          2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?           Yes          Part V       Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.           Im          1a       Beginning of year balance           (a) Current year         (b) Prior year         (c) Two years back         (d) Three years back         (d) Current year         (d) Ourrent year halance           (d) Prior year         (d) Three years back         (d) Ford year          1a          Beginning of year balance           (d) Prior year         (d) Three years back         (d) Three years back         (d) Ford year          1a          Dedint							r	Yes		No
c       Beginning balance       Id         d       Additions during the year       Id         e       Distributions during the year       Id         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation naws been provided on Part XIII.       Image: Check here if the explanation naws been provided on Part XIII.       Image: Check here if the explanation naws been provided on Part XIII.       Image: Check here if the explanation answered "Yes" on Form 990, Part X, line 10.         Part V       Endowment Funds.       Complete if the organization answered "Yes" on Form 990, Part X, line 10.       Image: Check here if the explanation naws been provided on Part XIII.       Image: Check here if the explanation naws been provided on Part XIII.       Image: Check here if the explanation naws been provided on Part XIII.       Image: Check here if the explanation naws been provided on Part XIII.       Image: Check here if the explanation naws been provided on Part XIII.       Image: Check here if the explanation naws been provided on Part XIII.       Image: Check here if the explanation naws been provided on Part XIII.       Image: Check here if the explanation naws been provided on Part XIII.       Image: Check here if the explanation naws been provided on part XIII.       Image: Check here if the explanation naws been provided on part XIII.       Image: Check here if the explanation naws been provided on part XIII.       Image: Check here if the	b									
d Additions during the year       id         e Distributions during the year       id         if       id         2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b If 'Yes,'' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Image: Complete if the organization answered 'Yes' on Form 990, Part V, line 10.         Part V       Endowment FundS. Complete if the organization answered 'Yes' on Form 990, Part V, line 10.       (e) Four years back       (e) four years back       (e) four years back       (e) four years back         1a Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) four years back       (e) four years back         1a Grants or scholarships       -2,161,350.       1,665,102.       1,183,596.       142,271.       750,360.         9 End of year balance       9,580,549.       11,741,999.       10,076,797.       8,893,201.       8,750,930.         2 Provide the estimated percentage of the current year end balance (line 10, column (a)) held as:       a Board designated or quasi-endowment 1       100       %         9 For of year balance       .0000       %       .       .       .       .       .       .       .       .       .       .       .	-			ie in ig tablet				Amoun	t	
d Additions during the year       1d         e Distributions during the year       1d         f Ending balance       1t         2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b If 'Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Part V       Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.         l a Beginning of year balance       [a) Current year       (b) Prior year       (c) Two years back       (e) Four years back	c	Beginning balance					1c			
e       Distributions during the year       1e         f       Ending balance       Yes       No         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Im										
f       Ending balance       If         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       No         b       f *%es, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XII       Im       Im         Part V       Enclowment Funds. Complete if the organization answered 'Yes' on Form 990, Part X, line 10.       Image: Complete if the organization answered 'Yes' on Form 990, Part X, line 10.         1a       Beginning of year balance       11, 741, 899, 10, 076, 797, 8, 893, 201, 8, 750, 930, 8, 483, 000, 1, 750, 360, 12, 750, 360, 142, 271, 750, 360, 1, 665, 102, 1, 183, 596, 142, 271, 750, 360, 12, 750, 360,										
2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Yes       No         Part V       Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.       Image: Complete if the organization answered 'Yes' on Form 990, Part X, line 21, 1783, 293.       (a) Four years back (b) Four years back (c) Fouryears back (c) Four years back (c) Four years back (							1 1			
b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.         Ia       Beginning of year balance       (a) Current year       (b) Prov years back       (d) Four years back       (e) Four years back         Ia       Beginning of year balance       11,741,899.       10,076,797.       8,893,201.       8,750,930.       8,483,000.         C       Ontributions								Yes		No
Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.         (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         (b) Contributions       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         (c) Charles of the complete if the organization answered "Yes" on Form 990, Part IV, line 11.       8, 933, 201.       8, 750, 930.       8, 483, 000.         (c) Charles of facilities       -2, 161, 350.       1, 665, 102.       1, 183, 596.       142, 271.       750, 360.         (c) Prevestion teamings, gains, and losses       -2, 161, 350.       1, 665, 102.       1, 183, 596.       142, 271.       750, 930.         (c) Other expenditures for facilities       and programs       482, 430.       482, 430.         (f) Administrative expenses       9, 580, 549.       11, 741, 899.       10, 076, 797.       8, 893, 201.       8, 750, 930.         (g) Ford year balance		-								1
(a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       11, 741, 899.       10, 076, 797.       8, 893, 201.       8, 750, 930.       8, 483, 000.         b       Contributions       -       -       1, 1, 741, 899.       10, 076, 797.       8, 893, 201.       8, 750, 930.       8, 483, 000.         b       Contributions       -       -       1, 1, 665, 102.       1, 1, 183, 596.       142, 271.       750, 360.         c       Other expenditures for facilities       -       -       482, 430.         and programs       -       -       482, 430.         g       End of year balance       9, 580, 549.       11, 741, 899.       10, 076, 797.       8, 893, 201.       8, 750, 930.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       Board designated or quasiendowment ▶       100       %         5       Permanent endowment ▶       .0000       %       %       Yes       No         3a Are there endowment ▶       .0000       %       .       Yes       No         3a(i)       are there and organizations       .       .       Sa(i)       X							D.			-
1a       Beginning of year balance       11,741,899.       10,076,797.       8,893,201.       8,750,930.       8,483,000.         b       Contributions       -2,161,350.       1,665,102.       1,183,596.       142,271.       750,360.         c       Net investment earnings, gains, and losses       -2,161,350.       1,665,102.       1,183,596.       142,271.       750,360.         c       Other expenditures for facilities       -2,161,350.       1,665,102.       1,183,596.       142,271.       750,360.         c       Other expenditures for facilities       -2,161,350.       1,665,102.       1,100,76,797.       8,893,201.       8,750,930.         g       End of year balance       -9,580,549.       11,741,899.       10,076,797.       8,893,201.       8,750,930.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       a       80ard designated or quasi-endowment		·						ck <b>(e)</b> Fou	r years I	back
b       Contributions	1a	Beginning of year balance	11,741,899.		7. 8,893	3,201.	8,750,930	0. 8	,483,0	000.
c       Net investment earnings, gains, and losses       -2,161,350.       1,665,102.       1,183,596.       142,271.       750,360.         d       Grants or scholarships				· ·			· · ·			
d Grants or scholarships			-2,161,350.	1,665,102	2. 1,183	3,596.	142,27	1.	750,	360.
e       Other expenditures for facilities and programs       482,430.         f       Administrative expenses       9,580,549.       11,741,899.       10,076,797.       8,893,201.       8,750,930.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       Board designated or quasi-endowment ▶       100       %         b       Permanent endowment ▶       .0000       %       *       <			. ,							
and programs       482,430.         f Administrative expenses       9,580,549.       11,741,899.       10,076,797.       8,893,201.       8,750,930.         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a Board designated or quasi-endowment ▶       100       %         b Permanent endowment ▶       .0000       %       %       %         c Term endowment ▶       .0000       %       %         there endowment ▶       .0000       %       %         there endowment ▶       .0000       %       %         (i) Unrelated organizations										
f       Administrative expenses       9,580,549.       11,741,899.       10,076,797.       8,893,201.       8,750,930.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       Board designated or quasi-endowment ▶       100       %         b       Permanent endowment ▶       .0000       %       %       Term endowment ▶       .0000       %         c       Term endowment ▶       .0000       %       %       %       %       %         b       Permanent endowment ▶       .0000       %       %       %       %       %         c       Term endowment ▶       .0000       %       %       %       %       %         c       Term endowment ▶       .0000       %       %       %       %       %         f)       Percentages on lines 2a, 2b, and 2c should equal 100%.       3a       % <td>•</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>482,</td> <td>430.</td>	•								482,	430.
g End of year balance       9,580,549.       11,741,899.       10,076,797.       8,893,201.       8,750,930.         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a Board designated or quasi-endowment ▶       100       %         b Permanent endowment ▶       .0000       %         c Term endowment ▶       .0000       %         c Term endowment ▶       .0000       %         c Term endowment Londs not in the possession of the organization that are held and administered for the organization by:       (i) Unrelated organizations       Yes       No         (i) Unrelated organizations	f									
2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:         a       Board designated or quasi-endowment ▶100%         b       Permanent endowment ▶0000%         c       Term endowment ▶0000%         3a       Are there endowment ▶0000%         3a       Are there endowment ▶0000%         (i)       Unrelated organizations			9,580,549.	11,741,899	10.076	5,797.	8,893,20	1. 8	750	930.
a Board designated or quasi-endowment ▶       100 %         b Permanent endowment ▶       .0000 %         c Term endowment ▶       .0000 %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       (i) Unrelated organizations         (ii) Related organizations       3a(i) x         (ii) Related organizations       3a(i) x         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3a(i) x         4 Describe in Part XIII the intended uses of the organization's endowment funds.       Part VI         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (other)       (b) Cost or other depreciation         1a Land       1, 391, 057.       1, 391, 057.         b Buildings       14, 779, 401.       9, 543, 643.       5, 235, 758.         c Leasehold improvements       3, 021, 874.       2, 970, 501.       51, 373.         d Equipment       2, 093, 613.       1, 719, 451.       374, 162.         e Other       3, 042, 701.       1, 846, 729.       1, 195, 972.         Total. Add lines 1a through	-		••••••••••••••••••••••••••••••••••••••		,	, ,	, ,			
b       Permanent endowment ▶       .0000       %         c       Term endowment ▶       .0000       %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       (i) Unrelated organizations       3a(i)       x         (ii)       Norelated organizations       3a(ii)       x       3a(ii)       x         (iii)       Related organizations       3a(ii)       x       3a(ii)       x         (iii)       Related organizations       3a       ix       x       3a(ii)       x         (iii)       Related organizations       3a       ix       x       3a(ii)       x         4       Describe in Part XIII the intended uses of the organization's endowment funds.       3b       3b       3b       3b         Part VI       Land, Buildings, and Equipment.       Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         1a       Land       1,391,057.       1,391,057.       1,391,057.         b       Buildings       14,779,401.       9,543,643.       5,235,758.         c       Leasehold improvements       3,042,701.       1,846,729.										
c       Term endowment       .0000 %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations listed as required on Schedule R?</li> <li>(iii) Land, Buildings, and Equipment.</li> </ul> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.</li> <li>Description of property</li> <li>(a) Cost or other basis (investment)</li> <li>(b) Cost or other depreciation</li> <li>(c) Accumulated depreciation</li> <li>1a Land</li> <li>1,391,057.</li> <li>1,391,057.</li> <li>(c) Accumulated depreciation</li> <li>(d) Book value basis (investment)</li> <li>(investment)</li> <li>(c) Accumulated depreciation</li> <li>t Land</li> <li>(c) Accumulated depreciation</li> <li>(d) Book value depreciation</li> <li>(e) Cost or other depreciation</li> <li>(f) Book value depreciation</li> <li>(c) Accumulated depreciation</li> <li>(c) Accumulated depreciation</li> <li>(c) Accumulated depreciation</li> <li>(c) Accum</li>		<b>.</b>	%							
The percentages on lines 2a, 2b, and 2c should equal 100%.         3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(iii) Related organizations</li> <li>(iii) Related organizations</li> <li>(iii) Related organizations is listed as required on Schedule R?</li> <li><b>4</b> Describe in Part XIII the intended uses of the organization's endowment funds.</li> </ul> <li>Part VI Land, Buildings, and Equipment.         <ul> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.</li> </ul> </li> <li>Description of property         <ul> <li>(a) Cost or other basis (investment)</li> <li>(b) Cost or other basis (other)</li> <li>(c) Accumulated depreciation</li> <li>1, 391, 057.</li> <li>1, 391, 057.</li> <li>1, 391, 057.</li> <li>1, 391, 057.</li> <li>(b) Buildings</li> <li>(c) Accumulated depreciation</li> <li>(c) Accumulated depreciation</li> <li>(c) Accumulated depreciation</li> <li>(c) Accumulated depreciation</li> </ul> </li> <li>I a Land</li> <li>(c) Accumulated 3, 021, 874.</li> <li>(c) 970, 501.</li> <li>(c) 374, 162.</li> <li>(c) Other</li> <li>(c) Acgument 2, 093, 613.</li> <li>(c) Acgument 3, 042, 701.</li> <li>(c) Acgument 4, 020, 020, 021, 874.</li> <li>(c) Acgument 4, 020, 020, 021, 874.</li> <li< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></li<>										
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organization answered "Yes" on Schedule R?</li> <li>(iii) Land, Buildings, and Equipment.</li> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.</li> <li>(c) Accumulated depreciation</li> <li>(d) Book value</li> <li>(a) Cost or other basis (investment)</li> <li>(b) Cost or other basis (other)</li> <li>(c) Accumulated depreciation</li> <li>(d) Book value</li> <li>(i) 391,057.</li> <li>(i) 4000000000000000000000000000000000000</li></ul>	•									
by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements c Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) New Yes No 3a(i) X 3a(i)	3a			tion that are held	and administer	ed for the	organization			
(i) Unrelated organizations       3a(i)       X         (ii) Related organizations       3a(ii)       X         (ii) Related organizations       3a(ii)       X         (ii) Related organizations       3a(ii)       X         (ii) Perfective on line 3a(ii), are the related organizations listed as required on Schedule R?       3b       3c         4 Describe in Part XIII the intended uses of the organization's endowment funds.       Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (c) Accumulated depreciation         Description of property       (a) Cost or other basis (other)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a Land       1,391,057.       1,391,057.       1,391,057.         b Buildings       14,779,401.       9,543,643.       5,235,758.         c Leasehold improvements       3,021,874.       2,970,501.       51,373.         d Equipment       2,093,613.       1,719,451.       374,162.         e Other       3,042,701.       1,846,729.       1,195,972.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.)       8,248,322.							, e. gainzation		Yes	No
(ii)       Related organizations       3a(ii)       X         b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b       3b       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.       Part VI       Land, Buildings, and Equipment.       3b       3b         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (c) Accumulated depreciation       (d) Book value         Description of property       (a) Cost or other basis (other)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a       Land       1,391,057.       1,391,057.       1,391,057.         b       Buildings       14,779,401.       9,543,643.       5,235,758.         c       Leasehold improvements       3,021,874.       2,970,501.       51,373.         d       Equipment       2,093,613.       1,719,451.       374,162.         e       Other       3,042,701.       1,846,729.       1,195,972.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       8,248,322.		-						3a(i)		X
b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a       Land       1,391,057.       1,391,057.         b       Buildings       14,779,401.       9,543,643.       5,235,758.         c       Leasehold improvements       3,021,874.       2,970,501.       51,373.         d       Equipment       2,093,613.       1,719,451.       374,162.         e       Other       3,042,701.       1,846,729.       1,195,972.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       8,248,322.										X
4 Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (c) Accumulated depreciation         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a Land       1,391,057.       1,391,057.         b Buildings       14,779,401.       9,543,643.       5,235,758.         c Leasehold improvements       3,021,874.       2,970,501.       51,373.         d Equipment       2,093,613.       1,719,451.       374,162.         e Other       3,042,701.       1,846,729.       1,195,972.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       8,248,322.	b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R	?			<u>Jan</u>		
Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. <ul> <li>Description of property</li> <li>(a) Cost or other basis (investment)</li> <li>basis (other)</li> <li>(c) Accumulated depreciation</li> <li>(d) Book value</li> </ul> 1a Land         1,391,057.         1,391,057.           b Buildings         14,779,401.         9,543,643.         5,235,758.           c Leasehold improvements         3,021,874.         2,970,501.         51,373.           d Equipment         2,093,613.         1,719,451.         374,162.         3,042,701.         1,846,729.         1,195,972.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)              & 8,248,322.                & 8,248,322.	4									
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land1,391,057.1,391,057.b Buildings14,779,401.9,543,643.5,235,758.c Leasehold improvements3,021,874.2,970,501.51,373.d Equipment2,093,613.1,719,451.374,162.e Other3,042,701.1,846,729.1,195,972.Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)8,248,322.	Par									,
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land1,391,057.1,391,057.b Buildings14,779,401.9,543,643.5,235,758.c Leasehold improvements3,021,874.2,970,501.51,373.d Equipment2,093,613.1,719,451.374,162.e Other3,042,701.1,846,729.1,195,972.Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)8,248,322.		Complete if the organization answere	d "Yes" on Form 990	, Part IV, line 11a	See Form 990	, Part X, li	ine 10.			
basis (investment)         basis (other)         depreciation           1a Land         1,391,057.         1,391,057.           b Buildings         14,779,401.         9,543,643.         5,235,758.           c Leasehold improvements         3,021,874.         2,970,501.         51,373.           d Equipment         2,093,613.         1,719,451.         374,162.           e Other         3,042,701.         1,846,729.         1,195,972.           Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)         8,248,322.		· · ·			1			(d) Boo	k value	 a
b Buildings       14,779,401.       9,543,643.       5,235,758.         c Leasehold improvements       3,021,874.       2,970,501.       51,373.         d Equipment       2,093,613.       1,719,451.       374,162.         e Other       3,042,701.       1,846,729.       1,195,972.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       8,248,322.			1	• • •		• •		( <b>u</b> ) 200	it value	
b Buildings       14,779,401.       9,543,643.       5,235,758.         c Leasehold improvements       3,021,874.       2,970,501.       51,373.         d Equipment       2,093,613.       1,719,451.       374,162.         e Other       3,042,701.       1,846,729.       1,195,972.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       8,248,322.	1a	Land			, ,			1	,391,	057.
c       Leasehold improvements       3,021,874.       2,970,501.       51,373.         d       Equipment       2,093,613.       1,719,451.       374,162.         e       Other       3,042,701.       1,846,729.       1,195,972.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       8,248,322.				1			9,543,643.			
d Equipment       2,093,613.       1,719,451.       374,162.         e Other       3,042,701.       1,846,729.       1,195,972.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.)       8,248,322.										
e Other       3,042,701.       1,846,729.       1,195,972.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       8,248,322.										
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 8,248,322.								1	,	
				X column (B) line						
			<u>quari onn 330, Fall</u>		100.7					

## GIRL SCOUTS OF EASTERN MISSOURI INC. Schedule D (Form 990) 2021 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. (c) Method of valuation: Cost or end-of-year market value (a) Description of security or category (including name of security) (b) Book 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 BENEFICIAL INTEREST IN THIRD PARTY TRUST (1) EMPLOYEE RETENTION CREDIT RECEIVABLE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ► Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability (b) Book value 1 (1) Federal income taxes UNAMORTIZED TENANT IMPROVEMENT ALLOCATION 50,051 (2)(3) (4) <u>(5)</u> (6) (7)(8) (9) 50,051. Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►

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

Schedule D (Form 990) 2021

1,664,993.

1,698,462.

3,363,455.

132053 10-28-21

Sche	dule D (Form 990) 2021 GIRL SCOUTS OF EASTERN MISSOURI INC.			43-0662471	Page <b>4</b>
Pa	t XI Reconciliation of Revenue per Audited Financial Statemen	ts With I	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	10,173,475.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-2,680,131.		
b	Donated services and use of facilities	2b	81,620.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	131,037.		
е	Add lines 2a through 2d			2e	-2,467,474.
3	Subtract line 2e from line 1			3	12,640,949.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	56,024.		
b	Other (Describe in Part XIII.)	4b	4,979,576.		
с	Add lines 4a and 4b			4c	5,035,600.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)				17,676,549.
Pa	t XII Reconciliation of Expenses per Audited Financial Statemer	nts With	Expenses per R	leturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	14,155,653.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	132,284.		
е	Add lines 2a through 2d			2e	132,284.
3	Subtract line 2e from line 1			3	14,023,369.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	56,024.		
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	56,024.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	14,079,393.
Pa	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additi			; Part X, line 2;	Part XI,
PARI	V, LINE 4:				
THE	QUASI-ENDOWMENT CONSISTS OF A BOARD DESIGNATED FUND FOR OPERAT	ING			
RESE	RVES AS WELL AS LAND RESERVES. SPECIFICALLY, THE FUND WAS ESTAN	BLISHED			
	,				
WITH	THE INTENTION TO ACQUIRE ADDITIONAL LAND NEAR GSEM'S CAMPS AS	WELL AS			
TO E	ROVIDE PERPETUAL, PLANNED, STABLE FUNDING TO AUGMENT ANNUAL OPP	ERATIONS			
IN C	RDER TO MAXIMIZE SERVICES TO MEMBERS AND PROVIDE RESOURCES TO T	THE			
OPEF	ATING 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 \$30,143,983 AT SEPTEMBER 30, 2022.

132054 10-28-21

Schedule D (Form 990) 2021

# Part XIII Supplemental Information (continued)

### PART X, LINE 2:

THE	ORGANIZATION	OTIALTETES	ΔS	Δ	NONPROFT	ORGANTZATION	AND	TS	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, 2022 AND 2021. 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 990 131,037.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

ACTIVITY OF COMBINED ENTITY

CHANGE IN VALUE OF BENEFICIAL INTEREST IN TRUST

TOTAL TO SCHEDULE D, PART XI, LINE 4B

PART XII, LINE 2D - OTHER ADJUSTMENTS:

BAD DEBT EXPENSE RELATED TO UNCOLLECTIBLE

PLEDGES/CONTRIBUTIONS

SPECIAL EVENT DIRECT EXPENSES NETTED AGAINST REVENUE ON 990

TOTAL TO SCHEDULE D, PART XII, LINE 2D

1,247. 131,037.

4,511,247.

468,329.

4,979,576.

132,284.

Schedule D (Form 990) 2021

132055 10-28-21

SCHEDULE G	Suppleme	ental Information Regarding	Func	Iraisi	ing or Gaming A	ctiv	ities	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" on organization entered more than \$1				r <b>19</b> ,	or if the	2021
Department of the Treasury		Open to Public						
Internal Revenue Service		o to www.irs.gov/Form990 for instr	uction	s and	the latest information	on.		Inspection
Name of the organization		S OF EASTERN MISSOURI INC.					43-06624	entification number
Part I Fundrais		Complete if the organization answe	ered "Y	'es" or	n Form 990, Part IV, li	ne 1		
required to	complete this par	t.						
a X Mail solicitat b X Internet and c Phone solici d X In-person so	tions email solicitations tations licitations	s f X Solicita g X Special	tion of tion of fundra	non-g gover aising	overnment grants nment grants events			
key employees list	ed in Form 990, P highest paid indiv	or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu organization.	rofessi	onal fi	undraising services?	-	X Yes	
(i) Name and addres or entity (fund		(ii) Activity	fùndi have c or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (c	Amount paid or retained by) fundraiser ted in col. <b>(i)</b>	<b>(vi)</b> Amount paid to (or retained by) organization
WD INC 22 CHES			Yes	No				
LANE, CHESTERFIELD	, MO 63017	CAMPAIGN CONSULTANT		X	0.		25,901.	-25,901.
Total							25,901.	-25,901.
	ich the organizatic	on is registered or licensed to solicit o	contrib	utions	or has been notified	it is e		•

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

Schedule G (Form 990) 2021

132081 10-21-21

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 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b, List events with gross receipts greater than \$5,000.

			(a) Event #1	(b) Event #2 WOMEN'S LEADERSHIP	(c) Other events	(d) Total events
			DESSERT FIRST	NETWORK	1	(add col. (a) through
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue	1	Gross receipts	221,920.	35,670.	5,758.	263,348.
	2	Less: Contributions	186,270.	26,642.	5,158.	218,070
	3	Gross income (line 1 minus line 2)	35,650.	9,028.	600.	45,278,
	4	Cash prizes				
	5	Noncash prizes				
penses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	40,249.	7,632.	108.	47,989
ā	8	Entertainment	31,909.	6,648.		38,557
	9	Other direct expenses			21,389.	44,491
	10	Direct expense summary. Add lines 4 through	<b>a</b> ( )		•	131,037
	11	Net income summary. Subtract line 10 from I	ine 3, column (d)			-85,759
Pa	rt I	<b>II Gaming.</b> Complete if the organization	answered "Yes" on Form	n 990, Part IV, line 19, or re	eported more than	
		\$15,000 on Form 990-EZ, line 6a.	1			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Reve	1	Gross revenue				
es	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
ect	4	Rent/facility costs				
اظ			1			1
Di	5	Other direct expenses	Yes %	Yes%	Yes %	

7 Direct expense summary. Add lines 2 through 5 in column (d)
8 Net gaming income summary. Subtract line 7 from line 1, column (d)
9 Enter the state(s) in which the organization conducts gaming activities:
a Is the organization licensed to conduct gaming activities in each of these states?
b If "No," explain:

No

IL

No

**10a** Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?
 Image: Second Se

132082 10-21-21

Schedule G (Form 990) 2021

No

No

6 Volunteer labor

Sch	edule G (Form 990) 2021	GIRL SCOUTS OF EASTERN M	ISSOURI INC.	43-0662471	Page <b>3</b>
11	Does the organization conduct g	aming activities with nonmembers?		Yes	No No
12	Is the organization a grantor, ber	eficiary or trustee of a trust, or a me	ember of a partnership or other entity formed		
	to administer charitable gaming?			Yes	No No
13	Indicate the percentage of gamir				
a	The organization's facility			<u>13a</u>	%
k	• An outside facility			13b	%
14	Enter the name and address of the	e person who prepares the organiz	ation's gaming/special events books and record	S:	
	Name N				
	Name				
	Address				
15a	a Does the organization have a co	tract with a third party from whom	the organization receives gaming revenue?	Yes	No No
k			zation 🕨 \$ and the amo	unt	
		e third party <b>&gt;</b> \$			
c	If "Yes," enter name and address	of the third party:			
	Nama N				
	Name 🕨				
16	Gaming manager information:				
	Name 🕨				
	Gaming manager compensation	▶ \$			
	Description of services provided	▶			
	Director/officer	Employee	Independent contractor		
			ndependent contractor		
17	Mandatory distributions:				
	•	r state law to make charitable distri	butions from the gaming proceeds to		
	retain the state gaming license?		5 51	Yes	🗌 No
k			ributed to other exempt organizations or spent in		
	organization's own exempt activi				
Pa			s required by Part I, line 2b, columns (iii) and (v);	and Part III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, a	s applicable. Also provide any addit	ional information. See instructions.		
1320	83 10-21-21			Schedule G (Form	n 990) 2021
			35		-,

12430209 701245 131658.300

Part IV	Supplemental Information (cc	ontinued)	
			Schedule G (Form 990)

132084 11-18-21

SCHEDULE I (Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.								
Department of the Trea		Compi	lete in the organization	Attach to For		rt iv, line 21 or 22.		Open to Public	
Internal Revenue Servi	-		Go to www.ir	s.gov/Form990 fo		nation.		Inspection	
Name of the org	anization GIRL SCOUTS OI	F EASTERN MISS	SOURI INC.					Employer identification number 43-0662471	
Part I Gen	eral Information on Grants a	nd Assistance							
	organization maintain records t ed to award the grants or assis		÷		• • • •	<ul> <li>•</li> </ul>			
2 Describe in	n Part IV the organization's pro	ocedures for monit	oring the use of grant	funds in the United	States.				
	nts and Other Assistance to I bient that received more than \$					anization answered "Y	′es" on Form 990, Par	IV, line 21, for any	
<b>1 (a)</b> Name a	and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance	
_									
	number of section 501(c)(3) and number of other organizations		5	e line 1 table				· ▶	
	rwork Reduction Act Notice,							Schedule I (Form 990) 2021	

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

Schedule I (Form 990) 2021

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# 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>(b)</b> Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	404	23,466.	0.		
MEMBERSHIP ASSISTANCE	14122	368,626.	0.		
UNIFORMS ASSISTANCE	247	17,515.	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 THROUGH FINANCIAL RECORDKEEPING EFFORTS.

Page 2

sc	HEDULE J	Compens	ation Information	1	OMB No. 1	545-004	17
(Fo	rm 990)	-	rs, Trustees, Key Employees, and Highest		0004		
•		Comp	ensated Employees		20	<b>Z</b> I	
_			nswered "Yes" on Form 990, Part IV, line 23. ach to Form 990.		Open to	Publ	ic
	tment of the Treasury al Revenue Service		) for instructions and the latest information.		Inspe		
Nan	ne of the organizatio	<u>-</u>		Employer i	dentificatio	on nur	nber
		GIRL SCOUTS OF EASTERN MISS	OURI INC.	43-0	662471		
Pa	rt I Question	s Regarding Compensation					
						Yes	No
1a	Check the appropri	ate box(es) if the organization provided any c	of the following to or for a person listed on Form	990,			
	Part VII, Section A,	line 1a. Complete Part III to provide any relev	ant information regarding these items.				
	First-class or o	harter travel	Housing allowance or residence for person	nal use			
	Travel for com	panions	Payments for business use of personal res	sidence			
	Tax indemnifie	ation and gross-up payments	Health or social club dues or initiation fees	5			
	Discretionary	spending account	Personal services (such as maid, chauffeu	ır, chef)			
b	•	on line 1a are checked, did the organization t					
	reimbursement or p	rovision of all of the expenses described abo	ove? If "No," complete Part III to explain		<b>1</b> b		
2			or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, reg	arding the items checked on line 1a?		2		<u> </u>
3			establish the compensation of the organization's				
			boxes for methods used by a related organization	on to			
		ation of the CEO/Executive Director, but expl					
	X Compensation		Written employment contract				
		ompensation consultant	X Compensation survey or study				
	Form 990 of o	ther organizations	X Approval by the board or compensation c	ommittee			
4	During the year did	any person listed on Form 990, Part VII, Sec	tion A line 12 with respect to the filing				
-	organization or a re		stion A, inte Ta, with respect to the hing				
а	•	e payment or change-of-control payment?			4a		x
b		eive payment from a supplemental nonqualif					x
c	•	eive payment from an equity-based compens			10		x
_		les 4a-c, list the persons and provide the app					
	,						
	Only section 501(	)(3), 501(c)(4), and 501(c)(29) organizations	must complete lines 5-9.				
5			the organization pay or accrue any compensatio	n			
	contingent on the r		-				
а	The organization?				. 5a		x
							X
		r 5b, describe in Part III.					
6	For persons listed	n Form 990, Part VII, Section A, line 1a, did	the organization pay or accrue any compensatio	n			
	contingent on the r	et earnings of:					
а	The organization?				. 6a		x
b	Any related organiz	ation?			6b		X
	If "Yes" on line 6a o	r 6b, describe in Part III.					
7			the organization provide any nonfixed payments				
					7		X
8	Were any amounts	reported on Form 990, Part VII, paid or accru	ed pursuant to a contract that was subject to th	e			
		ption described in Regulations section 53.49			8		X
9		d the organization also follow the rebuttable					
					9		
LHA	For Paperwork R	eduction Act Notice, see the Instructions f	or Form 990.	Sched	ule J (Form	1 990)	2021

132111 11-02-21

Schedule J (Form 990) 2021

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)	350,000.	100,000.	244.	14,500.	18,012.	482,756.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JULIE CUBBAGE	(i)	156,820.	5,000.	244.	7,520.	0.	169,584.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KATHLEEN MACK	(i)	148,320.	5,000.	294.	7,581.	5,980.	167,175.	0.
CHIEF HR OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KATHLEEN DABROWSKI	(i)	141,495.	5,000.	244.	7,237.	5,979.	159,955.	0.
DIRECTOR CAPITAL PROJ & RISK MGMT	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KELLY DALEEN	(i)	136,231.	0.	226.	6,823.	10,217.	153,497.	0.
CHIEF MEMBERSHIP & MKTING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2021

### Schedule J (Form 990) 2021 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

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

Department of the Treasury
Internal Revenue Service

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

2021 **Open to Public** Inspection

Employer identification number

Name of the	organization
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► Go to www.irs.gov/Form990 for instructions and the latest information.

GIRL	SCOUTS	OF	EASTERN	MISSOURI	INC.

							1	
Pa	rt I Types of Property							
		<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	<b>(c)</b> Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contri		•	s
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	Х	8	38,559.	PUBLICLY TRADED	) EXCHA	NGE	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other $\dots$							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other  ( )							
26	Other ► ()							
27	Other ► ()							
28	Other  ()							
29	Number of Forms 8283 received by the organi	-						
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29			0	
							Yes	No
30a	During the year, did the organization receive b							
	must hold for at least three years from the date	_						v
	exempt purposes for the entire holding period	?				<u>30a</u>		X
	If "Yes," describe the arrangement in Part II.			af any management and a subvibu	tioneQ	31	v	
31							X	
32a	Does the organization hire or use third parties contributions?		•			32a		x
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	r for which column (a) is che	cked,			
	describe in Part II.							
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 990	).	Schedule	M (Forr	n 990)	2021

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<b>Part II</b> Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and is reporting in Part I, column (b), the number of contributions, the number of items received, or a contribution part for any additional information.	33, and whether the organi ombination of both. Also co	zation mplete
CHEDULE M, PART I, COLUMN (B):		
HE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS.		
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SCHEDULE O (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

# 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 105 YEARS OLD AND

SERVES MORE THAN 30,000 GIRLS AND ADULT VOLUNTEERS IN THE CITY OF ST.

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

GIRL SCOUT COUNCIL OUT OF 111 ACROSS THE US.

IN 2022, GIRL SCOUTS OF EASTERN MISSOURI CONTINUED TO CARRY OUT ITS

MISSION TO BUILD GIRLS OF COURAGE, CONFIDENCE, AND CHARACTER. THROUGH

GIRL SCOUTING, GIRLS DEVELOP THE SKILLS NEEDED TO LEAD TODAY AND IN THE

FUTURE. THE ORGANIZATION PROVIDES GIRLS WITH A VITAL LEADERSHIP

EXPERIENCE THAT GROWS AND EXPANDS ALONGSIDE THEM AS THEY GET OLDER,

DISCOVER THE WORLD AROUND THEM AND REALIZE THEIR DREAMS.

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 SOCIOECONOMIC STATUS. IN 2022, ACCESSIBILITY WAS OUR

FOCUS AS GSEM STRIVED TO MAKE PARTICIPATION IN THE GIRL SCOUT

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

VOLUNTEER LEADERS.

COMMUNITY TROOP PROGRAM: WHILE GIRL SCOUTING IS VIBRANT IN THE EASTERN

MISSOURI REGION, IT WAS NOT ALWAYS UNILATERALLY ACCESSIBLE. TO BETTER

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

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Schedule O (Form 990) 2021 Name of the organization		Page 2 Employer identification number
GIRL SCOUTS OF EASTERN MISSOURI INC		43-0662471
MEET THE NEEDS OF ALL GIRLS, WE LAUNCHED THE COMMUNITY TH	ROOP PROGRAM	
(CTP) IN 2014 BY LEVERAGING GIRL SCOUT STAFF MEMBERS AS	FROOP LEADERS	
IN AREAS WHERE 75% TO 100% OF STUDENTS RECEIVE FREE OR R	EDUCED-PRICE	
LUNCHES. IN 2022, MEMBERSHIP IN THE CTP PROGRAM SAW A SIC	GNIFICANT	
INCREASE WITH MORE THAN 3,000 GIRLS IN 74 TROOPS WHO PAR	FICIPATED,	
HELPING THEM DEVELOP THE QUALITIES AND PROFICIENCIES NEED	DED TO PREPARE	
THEM FOR SUCCESS IN LIFE. COMMUNITY TROOP MEMBERS EARNED	12,000+ BADGES	
ON TOPICS INCLUDING PUBLIC SPEAKING, DESIGNING ROBOTS AND	D FIRST AID.	
RURAL TROOP START UP: GIRL SCOUTS OF EASTERN MISSOURI'S	EFFORTS TO	
REACH NEW FAMILIES ALSO EXTEND TO UNDER-REPRESENTED RURA	L COMMUNITIES.	
THE AMEREN MISSOURI RURAL TROOP START UP SUPPORTS START-	UP COSTS FOR	
EACH NEW TROOP FORMED IN IDENTIFIED RURAL COMMUNITIES. TH	HIS INCLUDES	
STAFF SUPPORT, VOLUNTEER TRAINING, MEMBERSHIP FEES, UNIF	ORM PIECES, AND	
PROGRAM FEES. AS A RESULT, THESE NEWLY FORMED TROOPS CAN	PARTICIPATE IN	
THE FULL RANGE OF GIRL SCOUT LEADERSHIP PROGRAMMING WHIC	H INCLUDES, BUT	
IS NOT LIMITED TO, THE GIRL SCOUT COOKIE PROGRAM, STEM,	CAMPING AND	
OTHER OUTDOOR ADVENTURE, COMMUNITY SERVICE PROJECTS, AND	BADGEWORK AND	
OTHER TROOP ACTIVITIES. 519 NEW DAISY GIRL SCOUTS WERE P	LACED INTO 43	
TROOPS, EACH COMPLETING THEIR FIRST YEAR OF BADGE WORK,	COMMUNITY	
SERVICE AND ENTREPRENEURIAL COOKIE SALES.		
LAUNCH INTO GIRL SCOUTS: IN 2022, LAUNCH INTO GIRL SCOUT	S CONTINUED TO	
INTRODUCE PRE-K GIRLS TO ACTIVITIES THAT WILL INCREASE THE	HEIR CONFIDENCE	
AND BUILD NECESSARY SKILLSWHILE PREPARING GIRLS FOR KIND	ERGARTEN AND A	
SUCCESSFUL JOURNEY AS NEW DAISY (KINDERGARTEN) GIRL SCOU	IS. THE PROGRAM	
WAS CONDUCTED IN PARTNERSHIP WITH HEAD START, URBAN LEAG	UE, EARLY	
CHILDHOOD CENTERS AND SCHOOL DISTRICT PARTNERS, AND PROV	IDED PRESCHOOL	
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Name of the organization GIRL SCOUTS OF EASTERN MISSOURI INC.	Employer identification number 43-0662471
GIRLS WITH AN INTRODUCTORY PACKET, THREE MONTHS OF PROGRAMMING MAILED	
DIRECTLY TO THEIR HOMES, AND PLACEMENT INTO A DAISY TROOP IN THE FALL	
TO CONTINUE THEIR JOURNEY.	
SCHOLARSHIP FUND: THE OVERALL GIRL SCOUT EXPERIENCE EQUIPS ITS MEMBERS	
WITH THE MENTAL, PHYSICAL, AND EMOTIONAL RESOURCES TO BE RESILIENT.	
SCHOLARSHIPS GIVE EVERY EASTERN MISSOURI GIRL THE OPPORTUNITY TO ACCESS	
THE FULL BREADTH OF GIRL SCOUT PROGRAMMING. FAMILIES CAN APPLY FOR	
FINANCIAL ASSISTANCE FOR ANY GIRL SCOUT ACTIVITY, INCLUDING YEARLY	
MEMBERSHIP FEES, PROGRAM REGISTRATIONS, CAMP FEES AND UNIFORM	
ASSISTANCE. THE SCHOLARSHIP FUND ENSURES THAT EVERY GIRL WHO WANTS	
THESE OPPORTUNITIES CAN HAVE THEM, REGARDLESS OF ANY SOCIAL, ECONOMIC,	
OR GEOGRAPHIC BARRIERS. EVEN WITH MODEST FEES FOR PARTICIPATION, 41% OF	
GIRL SCOUTS RELY ON FINANCIAL ASSISTANCE, MAKING IT CLEAR THAT A	
HEALTHY SCHOLARSHIP PROGRAM IS ESSENTIAL.	
IMPACTFUL PROGRAMS	
GIRL SCOUTS OF EASTERN MISSOURI CONTINUES TO BE AN ESSENTIAL FORCE IN	
GIRLS' LIVES, HELPING THEM NAVIGATE NEW CHALLENGES BROUGHT ON BY SOCIAL	
DISTANCING AND LEARNING LOSS DURING THE PANDEMIC ERA, AND EMERGING FROM	
THOSE EXPERIENCES WITH RENEWED HOPE AND CONFIDENCE. THROUGH THEIR	
PARTICIPATION IN GIRL SCOUTS, GIRLS ENGAGE IN RELEVANT PROGRAMS, BUILT	
ON THE FOUR CORE PROGRAM PILLARS OF THE GIRL SCOUT LEADERSHIP	
EXPERIENCE: STEM (SCIENCE, TECHNOLOGY, ENGINEERING, AND MATHEMATICS),	
ENTREPRENEURSHIP, LIFE SKILLS AND THE OUTDOORS. THESE IMPACT PROGRAMS	
HELP THEM BUILD ESSENTIAL SKILLS AND SPARK NEW INTERESTS THEY WILL USE	
TO LEAD IN THEIR HOMES, OUR WORKPLACES, AND OUR COMMUNITIES. IN 2022,	
MORE THAN 58,000 SKILL-BUILDING BADGES WERE EARNED BY GIRL SCOUTS IN	
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Name of the organization GIRL SCOUTS OF EASTERN MISSOURI INC.	Employer identification number 43-0662471
EASTERN MISSOURI ACROSS THE FOUR PROGRAM PILLARS.	
SCIENCE, TECHNOLOGY, ENGINEERING AND MATH (STEM): AT GIRL SCOUTS OF	
EASTERN MISSOURI, STEM (SCIENCE, TECHNOLOGY, ENGINEERING, AND MATH)	
ENCOMPASSES EVERYTHING FROM PROTECTING BELOVED NATURAL RESOURCES TO	
BUILDING ROBOTS AND EXPLORING THE NIGHT SKY. WOMEN HAVE HISTORICALLY	
BEEN UNDERREPRESENTED IN STEM FIELDS AND GIRL SCOUTS OF EASTERN	
MISSOURI PROVIDES OPPORTUNITIES FOR GIRLS TO JUMP INTO STEM AND EXPLORE	
THEIR INTERESTS AND PASSIONS WITH FUN AND CHALLENGING ACTIVITIES LIKE	
BUILDING RACE CARS, DESIGNING APPS AND VIDEO GAMES, AND LEARNING HOW TO	
STAY SAFE WHILE EXPLORING ONLINE. GIRLS ENGAGE IN STEM THROUGH ALL GIRL	
SCOUTING PROGRAMMING WHETHER AT CAMP, IN A TROOP MEETING, AT THE BERGES	
FAMILY GIRL SCOUT PROGRAM CENTER, WITH STEM PARTNERS, AND THROUGH	
VIRTUAL PROGRAMS.	
GIRL SCOUTS OF EASTERN MISSOURI'S ROBOTICS PROGRAM SOARED IN 2022 WITH	
82 TEAMS COMPRISED OF 400 GIRL SCOUTS. ONE OF THOSE TEAMS A FIRST LEGO	
LEAGUE CHALLENGE TEAM (GR. 4-8) QUALIFIED FOR THE EASTERN MISSOURI	
REGIONAL CHAMPIONSHIP AS WELL AS THE RAZORBACK OPEN INVITATIONAL AT THE	
UNIVERSITY OF ARKANSAS. TWO NEW TEAMS WERE FORMED IN HANNIBAL, MO AS	
PART OF GSEM'S ROBOTICS TROOP START UP PROGRAM DESIGNED TO INCREASE	
ACCESS TO ROBOTICS PROGRAMMING IN MORE RURAL PARTS OF THE EASTERN	
MISSOURI REGION.	
FORM 990, PART III, LINE 4	
ENTREPRENEURSHIP: THE SOCIAL AND EMOTIONAL QUALITIES THAT LEAD TO	
SUCCESSFUL ENTREPRENEURSHIP LIKE CURIOSITY CONFIDENCE AND	

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GIRL SCOUTS OF EASTERN MISSOURI INC.	43-0662471
INNOVATION, ARE CRUCIAL FOR ALL TYPES OF ACADEMIC AND CAREER SUCCESS.	
GIRL SCOUTS OF EASTERN MISSOURI BUILDS GIRLS' "ENTREPRENEURIAL MINDSET"	
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 2022, EASTERN MISSOURI GIRL SCOUTS SOLD	
MORE THAN 2 MILLION PACKAGES OF COOKIES AND EARNED MORE THAN \$1.9	
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 94,000 PACKAGES DONATED FOR DISTRIBUTION TO MILITARY MEMBERS.	
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	
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.	

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AN IMPORTANT STEP IN THE GIRL SCOUT JOURNEY. BY TACKLING THE SPECIFIC

CURRICULUM AND TASKS ASSOCIATED WITH EACH PATCH, SHE IS LEARNING THE

SKILLS NEEDED TO LEAD IN THE HOME, THE WORKPLACE, AND THE COMMUNITY.

GSEM'S DISABILITY AWARENESS PROGRAM CONSISTED OF IN-PERSON PROGRAMMING

THAT SERVED 224 GIRL SCOUTS AND TROOP BOXES THAT REACHED MORE THAN

2,800 GIRL SCOUTS ACROSS EASTERN MISSOURI.

OUTDOORS: AT GIRL SCOUT CAMP, GIRLS FOLLOW THEIR OWN CONVICTIONS AND

EXPLORE ALL THE EXTRAORDINARY THINGS THEY ARE CAPABLE OF. WITH PROGRAMS

IN THE OUTDOORS RANGING FROM EQUESTRIAN AND ROBOTICS TO THEATRE AND

SURVIVAL SKILLS, GIRLS HAVE THE SPACE AND SUPPORT THEY NEED TO DEVELOP

CHALLENGE-SEEKING SKILLS, POSITIVE VALUES, AND LEADERSHIP ABILITIES.

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 12,564

GIRL SCOUT CAMP EXPERIENCES IN 2022.

EXCITING CAPITAL IMPROVEMENTS FOR GSEM'S CAMP PROPERTIES IN 2022

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	45 0002471
INCLUDED THE INSTALLATION OF OUTDOOR ADVENTURE COURSE AT CAMP TUCKAHO,	
RESTORATIONS TO THE TRAIL SYSTEM AT CAMP FIDDLECREEK, AND ACCESSIBILITY	
IMPROVEMENTS TO THE ARCHERY RANGE AT CAMP CEDARLEDGE. IN EARLY 2023,	
SSEM WILL ENGAGE IN SEVERAL NEW RESTORATION PROJECTS INCLUDING BREAKING	
GROUND ON THE CONSTRUCTION OF AN ALL-NEW STEM CENTER AT CAMP	
FIDDLECREEK.	
/OLUNTEER SUPPORT	
GIRL SCOUTS OF EASTERN MISSOURI CONTINUES TO EVOLVE TO ACCOMMODATE THE	
NEEDS OF ITS MEMBERS AND VOLUNTEERS. PROGRAMS INCLUDE:	
DAISY DROP BOX: THIS UNIQUE PROGRAM SPECIFICALLY SUPPORTS TROOP LEADERS	
DF DAISY (K-1ST) GIRL SCOUTS IN THEIR FIRST AND SECOND YEAR BY MAILING	
LEADERS A DAISY DROP BOX EACH MONTH WITH ALL SUPPLIES NEEDED TO HOLD	
TWO SUCCESSFUL TROOP MEETINGS. IN 2022, 2,613 DAISY DROP BOXES WERE	
DELIVERED TO DAISY TROOP LEADERS WITH FUN SKILL-BUILDING ACTIVITIES FOR	
SUCCESSFUL TROOP MEETINGS. BECAUSE OF THE SUCCESS OF THIS PROGRAM IN	
SUPPORTING VOLUNTEER TROOP LEADERS, GIRL SCOUTS OF EASTERN MISSOURI	
VILL OFFER THE "BROWNIE BUNDLE" IN SUPPORT OF BROWNIE TROOP LEADERS	
(GRADES 2-3) IN 2022-2023.	
LIVE FROM GIRL SCOUTS: GIRL SCOUTS OF EASTERN MISSOURI CONTINUED WITH	
SEASON 4 OF LIVE FROM GIRL SCOUTS, INTERACTIVE PROGRAMS DELIVERED	
THROUGHOUT THE YEAR IN-PERSON AND ONLINE. IN EACH LIVE FROM GIRL SCOUTS	
EPISODE, ONE LUCKY TROOP IS CHOSEN TO PARTICIPATE LIVE ON-LOCATION IN	
THE BERGES FAMILY GIRL SCOUT PROGRAM CENTER WHILE HUNDREDS OF	
ADDITIONAL GIRLS PARTICIPATE ONLINE WITH SUPPLIES DELIVERED DIRECTLY TO	
THEIR HOMES. LIVE FROM GIRL SCOUTS AFFORDS GIRLS THE OPPORTUNITY TO	
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Name of the organization GIRL SCOUTS OF EASTERN MISSOURI INC.	Employer identification number 43-0662471
COMBINE LEADERSHIP AND GROWTH MINDSET DEVELOPMENT IN A FUN, FLEXIBLE,	
AND INFORMAL ENVIRONMENT FEATURING IN-PERSON AND VIRTUAL EXPERIENCES	
THAT SUPPORT YOUTH-DRIVEN EXPLORATION AND LEARNING. LIVE FROM GIRL	
SCOUTS HAS SUCCESSFULLY GARNERED MORE THAN 2,600 REGISTRATIONS DURING	
2022.	
COMMUNITY SERVICE	
CONDUCTING COMMUNITY SERVICE PROJECTS DIRECTLY RELATES TO THE	
LEADERSHIP OUTCOME OF COMMUNITY PROBLEM SOLVING, WHICH MEASURES GIRLS'	
DESIRE TO HELP OTHERS, MAKE A POSITIVE DIFFERENCE IN THE WORLD (CIVIC	
ORIENTATION), AS WELL AS HAVING THE SKILLS NECESSARY TO DO SO (CIVIC	
ENGAGEMENT). IN 2022, THROUGH APRIL SHOWERS, MORE THAN 13,900 GIRL	
SCOUTS AND ADULT VOLUNTEERS COLLECTED MORE THAN 1.4 MILLION PERSONAL	
CARE ITEMS, MANY OF WHICH ARE NOT AVAILABLE THROUGH WIC AND SNAP	
PROGRAMS.	
HIGHEST AWARDS: IN 2022, 532 EASTERN MISSOURI GIRLS EARNED GIRL SCOUTS'	
HIGHEST COMMUNITY SERVICE AWARDS - THE 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.	
DIVERSITY, EQUITY AND INCLUSION	
AT GIRL SCOUTS OF EASTERN MISSOURI, WE ARE COMMITTED TO OUR FUTURE AND	
WHAT THAT LOOKS LIKE FOR ALL GIRLS, EVERYWHERE. WE RECOGNIZE THAT EACH	
EMPLOYEE, GIRL SCOUT, AND VOLUNTEER HAS UNIQUE EXPERIENCES,	
PERSPECTIVES, IDENTITIES, AND VIEWPOINTS THAT ADD VALUE TO OUR ABILITY	Schedule O (Form 990) 2021
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Name of the organization	n	Employer identification number
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O CREATE AND DELT	VER THE BEST POSSIBLE SERVICE TO EACH OTHER, OUR	

GIVEN THAT OUR INDIVIDUAL SOCIAL, ECONOMIC, AND CULTURAL IDENTITIES

SHAPE AND INFLUENCE OUR EXPERIENCES AND PERSPECTIVES, GIRL SCOUTS OF

EASTERN MISSOURI WILL DO ITS BEST WORK BY ENSURING DIVERSITY IN OUR

WORKFORCE AND MEMBERSHIP. WE ARE COMMITTED TO FOSTERING INCLUSIVITY IN

OUR ORGANIZATION AND CREATING AN ENVIRONMENT IN WHICH ALL EMPLOYEES

FEEL VALUED, INCLUDED, AND EMPOWERED AND ALL GIRLS AND VOLUNTEERS KNOW

THEY BELONG.

IN 2022, GIRL SCOUTS OF EASTERN MISSOURI WELCOMED ITS FIRST CHIEF

DIVERSITY, EQUITY AND INCLUSION OFFICER TO ITS EXECUTIVE LEADERSHIP

TEAM WHO HAS DEDICATED HER FIRST YEAR TO IMPLEMENTING NUMEROUS

STRATEGIES TO IMPROVE GIRL SCOUTING FOR ITS TEAM MEMBERS, ITS

VOLUNTEERS, AND OF COURSE ITS GIRL MEMBERS.

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

THE ORGANIZATION HAS AN EXECUTIVE COMMITTEE THAT HAS THE AUTHORITY TO ACT

ON BEHALF OF THE ENTIRE BOARD OF DIRECTORS. THIS POWER MAY BE EXERCISED

WHEN TIME SENSITIVE MATTERS ARISE.

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

THE 990 IS REVIEWED THEN APPROVED BY THE AUDIT COMMITTEE AND THEN REVIEWED

AND APPROVED BY THE FULL BOARD OF DIRECTORS PRIOR TO FILING WITH IRS.

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

EACH MEMBER OF THE BOARD OF DIRECTORS COMPLETES AN ANNUAL QUESTIONNAIRE

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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 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 BOARD	
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 -1,247.	
CHANGE IN BENEFICIAL INTEREST IN TRUST -468,329.	
TOTAL TO FORM 990, PART XI, LINE 9 -469,576.	
FORM 990, PART XII, LINE 2:	
THE ORGANIZATION HAS INDICATED IN PART XII, LINE 2B THAT THE FINANCIAL	
STATEMENTS ARE AUDITED BY AN INDEPENDENT ACCOUNTANT AND ISSUED ON A	

<sup>2021.05040</sup> GIRL SCOUTS OF EASTERN MI 131658.1

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Name of the organization GIRL SCOUTS OF EASTERN MISSOURI INC.	Employer identification number 43-0662471
CONSOLIDATED BASIS RATHER THAN ON A SEPARATE BASIS. PLEASE NOTE	, THE
ORGANIZATION'S FINANCIAL STATEMENTS ARE ACTUALLY ISSUED AND AUDI	FED ON
A COMBINED BASIS RATHER THAN A CONSOLIDATED BASIS. SINCE FORM 9	90 DOES
NOT GIVE "COMBINED" AS AN OPTION THE ORGANIZATION CONCLUDED IT W	AS MOST
APPROPRIATE TO NOTATE AS "CONSOLIDATED" RATHER THAN "SEPARATE".	
132212 11-11-21	Schedule O (Form 990) 2021
54 430209 701245 131658.300 2021.0504	) GIRL SCOUTS OF EASTERN MI 131658

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8.1

SCHEDULE R

## **Related Organizations and Unrelated Partnerships**

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

Attach to Form 990.

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

Name of the organization

Department of the Treasury Internal Revenue Service

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

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

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

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

Schedule R (Form 990) 2021

OMB No. 1545-0047

**Open to Public** 

Inspection

Employer identification number

43-0662471

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

(a)       (b)       (c)       (d)       (e)       (f)       (g)       (h)       (i)       (j)       (k)         Name, address, and EIN of related organization       Primary activity       Image: controlling (state or rowity)       Predominant income entity       Share of total income       Share of total income       Share of total income       Disproprimate end-of-year assets       Image: controlling allocations?       General or end-of-year assets       Image: controlling end-of-year assets       Image: controlling end-o			· <b>)</b>									
(state or entry (related, unrelated, income end-of-year allocations? and internet box (state or entry excluded from tax under 20 of Schedule	(a)	(b)		(d)	(e)	(f)	(g)	(1	n)			(k)
Indeptine     Insections 512-514)     Yes     No     K-1 (Form 1065)     Yes     No	Name, address, and EIN of related organization	Primary activity	(state or	Direct controlling entity	(related, unrelated, excluded from tax under	Share of total income	end-of-year	alloca	tions?	Code V-UBI amount in box 20 of Schedule	Genera manag partne	l or Percentag <sup>ing</sup> ownership r?
			country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	10
		]										
		]										

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	<b>(d)</b> 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	(i Sec 512(t contr ent	(i) ction b)(13) rolled tity?
		country)		0				Yes	No
	1								

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.		Ye	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		
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b		
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)			
g Sale of assets to related organization(s)			
h Purchase of assets from related organization(s)	1h		
i Exchange of assets with related organization(s)	<u>1i</u>		
j Lease of facilities, equipment, or other assets to related organization(s)		_	+
k Lease of facilities, equipment, or other assets from related organization(s)	1k		
Performance of services or membership or fundraising solicitations for related organization(s)	11		
n Performance of services or membership or fundraising solicitations by related organization(s)			
n 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	<u>1p</u>		
Reimbursement paid by related organization(s) for expenses			+
Other transfer of cash or property to related organization(s)			
s Other transfer of cash or property from related organization(s)	1s		

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

Schedule R (Form 990) 2021 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

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# GIRL SCOUTS OF EASTERN MISSOURI INC. Schedule R (Form 990) 2021 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.

132165 11-17-21