Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Internal Revenue Service Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2015 calendar year, or tax year beginning OCT 1, 2015 and ending SEP 30, 2016

Open to Public Inspection

OMB No. 1545-0047

		<u> </u>			<u> </u>
B c	Check if pplicable Addrest change	GIRL SCOUT COUNCIL OF GREATER		D Employer ident	ification number
	Chang Name chang			13-	1624014
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)		E Telephone numb	per
	Final return/ termin		708		-645-4000
_	ated Amend	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	8,039,159.
L	_return □Applic	NEW TORK, NI 10005	DENIGRO	H(a) Is this a group	
	tion pendir	F Name and address of principal officer: DANDANA MONFITT - WAN.	RINGTO		es? Yes X No
		SAME AS C ABOVE			s included? Yes No
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) (e: ► WWW.GIRLSCOUTSNYC.ORG	or 527		a list. (see instructions)
		organization: X Corporation Trust Association Other ►	I Veer	H(c) Group exempt	
	orm of	Summary	L Year	of formation: 1942	M State of legal domicile; NY
		Briefly describe the organization's mission or most significant activities: THE	MTSSTC	ОК ОЕ ТИЕ С	OUNCIL IS TO
Activities & Governance	'	DEVELOP IN GIRLS A SENSE OF COURAGE, CON	FIDENC	TE AND CHAR	ACTER.
nar		Check this box if the organization discontinued its operations or dispo			
Ve	l				34
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)			34
တ္ခ		Total number of individuals employed in calendar year 2015 (Part V, line 2a)			115
λţέ		Total number of volunteers (estimate if necessary)			8213
ţ		Total unrelated business revenue from Part VIII, column (C), line 12			a 0.
⋖		Net unrelated business taxable income from Form 990-T, line 34			b 0.
				Prior Year	Current Year
Ф	8	Contributions and grants (Part VIII, line 1h)		2,328,727	
nue	9	Program service revenue (Part VIII, line 2g)		470,556	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		261,025	
<u> </u>		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,780,745	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,841,053	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		228,294	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	-1
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,373,164	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 622,6		32,055	76,295.
ă				0 454 540	0 440 645
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,474,540	
	l .	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		6,108,053	-
		Revenue less expenses. Subtract line 18 from line 12		-267,000	
Net Assets or Fund Balances		T (D V. II	Be	eginning of Current Yea	
Sse Bala	20	Total assets (Part X, line 16)		10,167,420	
net Pet	21	Total liabilities (Part X, line 26)		8,248,256	
	ırt II	Net assets or fund balances. Subtract line 21 from line 20		0,240,230	• 0,074,107•
		Ities of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	nents, and to the hest of	my knowledge and helief it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of wl			my knowledge and belief, it is
ii uo,	, 001100	t, and complete. Doctar attent of property (care than officer) to become of an information of wi	non propuro	Thus any knowledge:	
Sigi	n	Signature of officer		Date	
Her		BARBARA MURPHY-WARRINGTON, CEO			
	Ū	Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid	i	AARON SHAPRIO		if self-emp	P01333816
	oarer	Firm's name LOEB & TROPER LLP	I	Firm's EIN	13-1517563
Use	Only	Firm's address 655 THIRD AVENUE, 12TH FLOOR			
		NEW YORK, NY 10017		Phone no. 2	12-867-4000
Mav	the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	SEE SCHEDULE O
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
4	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue if any for each program service reported
4a	(Code:) (Expenses \$ 3,165,784. including grants of \$ 212,003.) (Revenue \$ 3,128,207.)
	SEE SCHEDULE O
4b	(Code:) (Expenses \$
	VOLUNTEER OPPORTUNITIES:
	THE GIRL SCOUT PROGRAM ADVANCES THE DEVELOPMENT OF 15 KEY OUTCOMES FOR
	GIRLS RELATED TO DISCOVERING, CONNECTING AND TAKING ACTION IN THEIR
	COMMUNITY. THROUGH THE COUNCIL'S VOLUNTEER CORPS OF OVER 8,200 ADULTS, THE COUNCIL WAS ABLE TO SERVE GIRLS IN VIRTUALLY EVERY ZIP CODE IN THE
	5 BOROUGHS. VOLUNTEERS PARTICIPATED IN TRAINING TO ENHANCE THEIR
	KNOWLEDGE OF THE GIRL SCOUT PROGRAM AND ABILITY TO PROVIDE GIRLS WITH
	TRAVEL-RELATED AND CAMP EXPERIENCES.
4c	(Code:) (Expenses \$1, 068, 777 • including grants of \$) (Revenue \$) (Revenue \$
	SEE SCHEDULE O
	Other program services (Describe in Schedule O.)
4d	
4d	(Expenses \$ 268,474 • including grants of \$) (Revenue \$)
4d 4e	

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, 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 Revenue Procedure 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,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10	х	
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		Х
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		Х
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	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
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			Α,
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			٦,
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		v	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
46	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	4.0		v
	complete Schedule G, Part III	19		X

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Part IV Checklist of Required Schedules (continued)

			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			l
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
Ь	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2-14		
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			ا ۔۔
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			3,7
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	l		₩
	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		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			17
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	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			17
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

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			Tax Compliance

	Check if Schedule O contains a response of note to any line in this part v				Ш
		1 40		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 48			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re				
_	(gambling) winnings to prize winners?	 I	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	115			
	filed for the calendar year ending with or within the year covered by this return	2a 115		v	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns the control of t		2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions				v
	, , , , , , , , , , , , , , , , , , , ,		3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule		3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other times side account in a few irre power (such as a hear), account as a within a casual as a time of the side of the sid	•			x
	financial account in a foreign country (such as a bank account, securities account, or other financial at the local part of the foreign country.	account)?	4a		
D	If "Yes," enter the name of the foreign country:	occupto (FDAD)			
E.o.	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A		5a		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.		5a 5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		30		
ua	any contributions that were not tax deductible as charitable contributions?		6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contribut		Ua		
b	were not tax deductible?	•	6b		
7	Organizations that may receive deductible contributions under section 170(c).		OD		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices 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				
_	to file Form 8282?	•	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation 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		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? \dots		9b		
10	Section 501(c)(7) organizations. Enter:	1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	I			
	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	12a		
	,	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		10-		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
L	Note. See the instructions for additional information the organization must report on Schedule O.				
a	Enter the amount of reserves the organization is required to maintain by the states in which the	12h			
_	organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	<u> </u>	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14a 14b		
ט	in 103, has it lieu a 1 0iii 120 to report these payments: II 100, provide an explanation in Scheduli	· · · · · · · · · · · · · · · · · · ·		990	(2015)
			. 51111		,_5.5

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

	Check if Schedule O contains a response or note to any line in this Part VI			
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year la			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 34			
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
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	Х	
b				
	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	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in 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 in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		37	
	taxable entity during the year?	16a	Х	
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			37
	exempt status with respect to such arrangements?	16b		Х
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NY			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and the section 501(c)(3)s only) and 500-T (Section 501(c)(3)s only) and 500-T (Sec	availab	ie	
	for public inspection. Indicate how you made these available. Check all that apply.			
40	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	tinan	cıal	
00	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ►BARBARA MURPHY-WARRINGTON - 212-645-4000			
	40 WALL STREET, SUITE 708, NEW YORK, NY 10005			
	··· ~			

Form **990** (2015)

Form 990 (2015) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (Ď), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)			(((D)	(E)	(F)
Name and Title	Average		not c		more	than		Reportable	Reportable	Estimated
	hours per week		, unle: cer an					compensation from	compensation from related	amount of other
	(list any hours for related organizations below	Individual trustee or director	Institutional trustee	ľ	Key employee	Highest compensated employee	- L	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
	line)	Indivi	Institu	Officer	Key e	Highe emplo	Former			0
(1) ROSE LITTLEJOHN	3.00							_	_	_
CHAIRPERSON		Х		Х				0.	0.	0 .
(2) MICHELLE CLAYMAN	10.00							_	_	_
PRESIDENT		Х		Х				0.	0.	0
(3) ALYSSA MOEDER	3.00	l								
VICE PRESIDENT		Х		Х				0.	0.	0
(4) JAMES GUNDELL	3.00							•	_	_
VICE PRESIDENT	2 00	Х		Х				0.	0.	0
(5) BARBARA COOPERMAN	3.00	,,		,,				0		_
VICE PRESIDENT	3.00	Х		Х				0.	0.	0
(6) JENNIFER LEE	3.00	x		х				0.	0.	0
VICE PRESIDENT (7) PATRICE TANAKA	3.00	Δ		Δ				0.	0.	0 .
VICE PRESIDENT	3.00	X		х				0.	0.	0 .
(8) SHERI WILSON-GRAY	3.00							0.	0.	
VICE PRESIDENT	3.00	Х		х				0.	0.	0
(9) SUSAN NITZE	3.00								•	
VICE PRESIDENT		x		x				0.	0.	0
(10) ROBERT OUIMETTE	3.00									
VICE PRESIDENT		Х		х				0.	0.	0
(11) JOCELYN GRAHAME	3.00									
VICE PRESIDENT (THROUGH MARCH 2016)		Х		х				0.	0.	0
(12) TODD GUENTHER	3.00									
TREASURER		Х		Х				0.	0.	0
(13) KIM BOURNE	3.00									
SECRETARY		Х		Х				0.	0.	0 .
(14) CHERYL L. SWIATKOWSKI	3.00									
SECRETARY (THROUGH MARCH 2016)		Х		Х				0.	0.	0
(15) AMANDA N. PERSAUD	1.30]_ [_	_	_
BOARD MEMBER	1 22	Х						0.	0.	0
(16) AMY KULE	1.30								_	_
BOARD MEMBER	1 22	Х				_		0.	0.	0 .
(17) AMY SHECTER	1.30	\ \ \							_	_
BOARD MEMBER		Х						0.	0.	0 o

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Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual X 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 Х Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
CAREY LLC		
658 PECONIC AVENUE, WEST BABYLON, NY 11704	ACCOUNTING SERVICES	142,800.
OXER TECHNOLOGIES, 59 FRANKLIN STREET 5TH		
FLOOR, NEW YORK, NY 10013	COMPUTER SERVICES	112,808.

SEE PART VII, SECTION A CONTINUATION

Total number of independent contractors (including but not limited to those listed above) who received more than

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\$100,000 of compensation from the organization

13-1624014

Form 990 NEW TOR.									13-102	4014
Part VII Section A. Officers, Directors, 7	Trustees, Key E	mplo	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average			Pos	ition	ı		Reportable	Reportable	Estimated
	hours	(cl	heck	k all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	irecto				emp		organization	(W-2/1099-MISC)	from the
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	truste	al frus		yee	mpen				organizations
	below	Individual trustee or director	Institutional trustee	<u></u>	Key employee	Highest compensated employee	ъ			0.gaa
	line)	Indivi	Instit	Officer	Key e	Highe	Former			
(27) LINDSAY MCKENNA	1.30				Н					
BOARD MEMBER		Х						0.	0.	0
(28) LIZ GATELEY	1.30									
BOARD MEMBER		Х						0.	0.	0
(29) LYNDA DAVEY	1.30									
BOARD MEMBER		Х						0.	0.	0
(30) MELISSA MCCLENAGHAN MARTIN	1.30									
BOARD MEMBER		Х						0.	0.	0
(31) MELISSA RICE	1.30				М					
BOARD MEMBER		х						0.	0.	0
(32) RHONDA BOSTON	1.30				М					
BOARD MEMBER		х						0.	0.	0
(33) SARAH COGAN	1.30				М					
BOARD MEMBER		Х						0.	0.	0
(34) SAMANTHA KAPPAGODA	1.30				М					
BOARD MEMBER		Х						0.	0.	0
(35) STEPHANIE BRESLOW	1.30				М					
BOARD MEMBER		Х						0.	0.	0
(36) SUSAN LIDDIE	1.30				М					
BOARD MEMBER		Х						0.	0.	0
(37) SUZANNE YADAV	1.30									
BOARD MEMBER		х						0.	0.	0
(38) TRISH MCEVOY	1.30				М					
BOARD MEMBER		х						0.	0.	0
(39) BARBARA MURPHY-WARRINGTON	40.00				М					
CEO		1		х				186,509.	0.	17,986
					М			,		-
		1								
					М					
		1								
		1								
		1								
		1								
					Н					
		1								
					H					
		1								
	1	_								
Total to Part VII, Section A, line 1c								186,509.		17,986
10ta to 1 art vii, 000tion A, iiile 10					<u></u>			===,==,		, , , , ,

GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC. Form 990 (2015) Part VIII Statement of Revenue

		Check if Schedule O cont	aıns a resp	onse	or note to any lin				
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts t	1 a	Federated campaigns	1	а	4,504.				
ran		Membership dues		\neg	, -				
Contributions, Gifts, Grants and Other Similar Amounts		Fundraising events		_	1,024,956.				
iifts ar /		Related organizations		_	, ,				
s, G mila		Government grants (contribut	····-	+	29,000.				
Sig		All other contributions, gifts, gran	· ·	+					
ber	•	similar amounts not included above	I	F	1,181,639.				
ᅙᄛ	a	Noncash contributions included in lines			3,751.				
Sor	_	Total. Add lines 1a-1f				2,240,099.			
		Total Add III to Ta Ti			Business Code				
Θ.	2 a	OTHER PROGRAM SERVICES			611710	260,230.	260,230.		
کار (_ b				721210	202,916.	202,916.		
Program Service Revenue	c	-				,	,		
am	d								
ogr	е								
P	f	All other program service reve	nue						
		Total. Add lines 2a-2f				463,146.			
	3	Investment income (including							
		other similar amounts)			▶	296,584.			296,584.
	4	Income from investment of tax							
	5	Royalties			>				
			(i) Rea	al	(ii) Personal				
	6 a	Gross rents		167.					
	b	Less: rental expenses		088.					
	С	Rental income or (loss)	33,	079.					
	d	Net rental income or (loss)				33,079.			33,079.
	7 a	Gross amount from sales of	(i) Secur		(ii) Other				
		assets other than inventory	542,	998.					
	b	Less: cost or other basis							
		and sales expenses		622.					
		Gain or (loss)				116 206			116 276
		Net gain or (loss)			····· •	116,376.			116,376.
nue	8 a	Gross income from fundraising		ot					
ven		including \$ 1,024							
Re		contributions reported on line	-	а	160,350.				
Other Reve	h	Part IV, line 18			228,984.				
ō		Net income or (loss) from fund				-68,634.			-68,634.
		Gross income from gaming ac	_			,			,
		Part IV, line 19							
	b	Less: direct expenses							
		Net income or (loss) from gam							
		Gross sales of inventory, less							
		and allowances		a	4,164,442.				
	b	Less: cost of goods sold			1,273,810.				
	С	Net income or (loss) from sale	s of invent	ory		2,890,632.	2,890,632.		
		Miscellaneous Revenu	е		Business Code				
	11 a	MISCELLANEOUS			900099	44,373.			44,373.
	b								
	С								
		All other revenue							
	е	Total. Add lines 11a-11d				44,373.			
	12	Total revenue. See instructions.			🕨	6,015,655.	3,353,778.	0.	421,778.

Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) (C) Do not include amounts reported on lines 6b. Program service expenses Management and general expenses Total expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 212,003. 212,003. 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 Compensation of current officers, directors, 237,709. 184,752. 23,991. 28,966. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 2,490,358. 1,934,411. 253,138. 302,809. Other salaries and wages 7 Pension plan accruals and contributions (include 308,065 231,049 33,887. 43,129. section 401(k) and 403(b) employer contributions) 267,889. 38,394. 201,470. 28,025. 9 Other employee benefits 265,409. 198,876. 29,478. 37,055. Payroll taxes 10 Fees for services (non-employees): a Management Legal 190,450. 190,450. Accounting 2,513. 2,513. Lobbying 76,295. 76,295. Professional fundraising services. See Part IV, line 17 35,582 35,582. Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 316,743. 265,206. 33,918 17,619. column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 525,859. 587,571. 11,674. 50,038. Office expenses 13 50,911. 50,911. 14 Information technology 15 Royalties 9,838. 750,737. 730,336. 10,563. 16 Occupancy 66,939. 64,395. 1,256. 1,288. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 7,167. 6,602. 279. 286. Conferences, conventions, and meetings 19 16,765. 16,765. 20 Payments to affiliates _____ 21 2,694. 182,575. 187,663. 2,394. Depreciation, depletion, and amortization 22 98,162. 90,318. 3,922. 3,922. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) **MISCELLANEOUS** 129,414. 45,868. 73,998. 9,548. С

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622,606.

25

4,876,233.

6,298,345.

Check here

All other expenses

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

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

799,506.

Part X Balance Sheet

Part 2	^_	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1,609,908.	1	872,759
2	2	Savings and temporary cash investments	389,524.	2	502,517
3	3	Pledges and grants receivable, net	615,995.	3	514,549
4	4	Accounts receivable, net	39,810.	4	49,808
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
6	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
<u>ب</u>		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
₹ 8	8	Inventories for sale or use	15,938.	8	38,258
9	9	Prepaid expenses and deferred charges	176,034.	9	165,202
10	0a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 4,011,599.			
	b	Less: accumulated depreciation 10b 1,980,119.	1,871,909.	10c	2,031,480
1.		Investments - publicly traded securities	5,069,016.	11	5,481,685
12	2	Investments - other securities. See Part IV, line 11		12	
13	3	Investments - program-related. See Part IV, line 11		13	
14	4	Intangible assets		14	
15	5	Other assets. See Part IV, line 11	379,286.	15	383,676
16	6	Total assets. Add lines 1 through 15 (must equal line 34)	10,167,420.	16	10,039,934
17	7	Accounts payable and accrued expenses	482,450.	17	399,629
18	8	Grants payable		18	
19	9	Deferred revenue	101,734.	19	99,107
20	0	Tax-exempt bond liabilities		20	
2	1	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
စ္မ 22	2	Loans and other payables to current and former officers, directors, trustees,			
┋ │		key employees, highest compensated employees, and disqualified persons.			
		Complete Part II of Schedule L		22	
- 23	3	Secured mortgages and notes payable to unrelated third parties	900,000.	23	900,000
24	4	Unsecured notes and loans payable to unrelated third parties		24	
25	5	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	434,980.	25	567,011
26	6	Total liabilities. Add lines 17 through 25	1,919,164.	26	1,965,747
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
S S		complete lines 27 through 29, and lines 33 and 34.	6 706 000		
Fund Balances	7	Unrestricted net assets	6,736,028.	27	7,092,376
편 28	8	Temporarily restricted net assets	1,117,942.	28	598,135
- 29	9	Permanently restricted net assets	394,286.	29	383,676
로		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐			
<u></u>		and complete lines 30 through 34.			
8 30 S	0	Capital stock or trust principal, or current funds		30	
88 3-	1	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or		Retained earnings, endowment, accumulated income, or other funds	0.010.0=6	32	0 0 0 1 1 2 =
Z 33	3	Total net assets or fund balances	8,248,256.	33	8,074,187
34	4	Total liabilities and net assets/fund balances	10,167,420.	34	10,039,934

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Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI				X		
1	Total revenue (must equal Part VIII, column (A), line 12)		6,01				
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,29	8,3	45.		
3	Revenue less expenses. Subtract line 2 from line 1	3	-28				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,24		$\frac{56.}{40.}$		
5	5 Net unrealized gains (losses) on investments 5						
6	Donated services and use of facilities	6					
7	Investment expenses 7						
8	Prior period adjustments 8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9		3,0	81.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B)) 10						
Part XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		X		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule						
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	d 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	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,					
	consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,						
	review, or compilation of its financial statements and selection of an independent accountant?						
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.						
За	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit						
Act and OMB Circular A-133?							
b	b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u>.</u>	3b				
			Form	990	(2015)		

532012 12-16-15

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

GIRL SCOUT COUNCIL OF GREATER Name of the organization Employer identification number NEW YORK, INC. 13-1624014 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of listed in your (described on lines 1-9 organization support (see other support (see governing document? above (see instructions)) instructions) instructions) Yes No

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 532021 09-23-15

Schedule A (Form 990 or 990-EZ) 2015

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2011 (c) 2013 (d) 2014 (f) Total (b) 2012 (e) 2015 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2,136,388 3,357,175 3,185,104 2,328,727 2,240,099 13,247,493. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 2,136,388. 3,357,175 3,185,104 2,328,727 2,240,099 4 Total. Add lines 1 through 3 13,247,493. 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) 1,066,667. 12,180,826. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total 2,136,388. 3,357,175 3,185,104 2,328,727 2,240,099 13,247,493. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 454,652. 262,527. 422,217. 431,925. 423,751. 1,995,072. and income from similar sources 9 Net income from unrelated business activities, whether or not the

business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 53,051. 39,291. 13,259. 51,693. 44,373. 201,667. assets (Explain in Part VI.) 15,444,232. 11 Total support. Add lines 7 through 10 18,902,299. 12 Gross receipts from related activities, etc. (see instructions)

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Se	ction C. Computation of Public Support Percentage			
14	Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	78.87	%
15	Public support percentage from 2014 Schedule A, Part II, line 14	15	80.24	%
16a	a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or n	nore,	check this box and	
	ston hara. The organization qualifies as a publicly supported organization			. X

b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization

18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	▶□
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the	_
k	10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or	
	meets the facts and circumstances fest. The organization qualifies as a publicly supported organization	

Schedule A (Form 990 or 990-EZ) 2015

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

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

Sec	ction A. Public Support	elow, piease con	ipiete i ait ii.)				
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	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						
2	Gross receipts from activities that						
3	are not an unrelated trade or bus-						
	in						
1	Tax revenues levied for the organ-						
4	· ·						
	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						
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
Ľ	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						
	: Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🖊	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Amounts from line 6						
10a	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						
c	: Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for	the organization	's first second thi	rd fourth or fifth t	av vear as a sect		zation
••		· ·			-		· •
Sec	etion C. Computation of Publi						
	Public support percentage for 2015 (li			column (f))		15	9/
	Public support percentage from 2014					16	9/
	ction D. Computation of Inves					10	/
	•					17	9
	Investment income percentage for 20 Investment income percentage from 2					18	9
198	33 1/3% support tests - 2015. If the	-					
	more than 33 1/3%, check this box ar						
t	33 1/3% support tests - 2014. If the	•			•	•	
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	a box on line 14, 19	ıa. or 19b. check t	nıs box and see i	nstructions	▶∟

Part IV | Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
ŀ			
ļ	2		
	3a		
ı	Ja		
-	3b		
	3с		
ı			
	4a		
	4b		
	4c		
	5a		
-	5b 5c		
	6		
	7		
	8		
	0-		
-	9a		
	9b		
-	9с		
	10a		
	10b		

Pai	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а	A pers	son who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below	, the governing body of a supported organization?	11a		
b	A fam	ily member of a person described in (a) above?	11b		
		controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion E	3. Type I Supporting Organizations			
		1		Yes	No
1		e directors, trustees, or membership of one or more supported organizations have the power to			
	•	rly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax ye	ar? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
		olled the organization's activities. If the organization had more than one supported organization,			
	descri	be how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organi	zations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported			
	organi	ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		vised, or controlled the supporting organization.	2		
Sec	tion (C. Type II Supporting Organizations			
				Yes	No
1		a majority of the organization's directors or trustees during the tax year also a majority of the directors			
		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		nagement of the supporting organization was vested in the same persons that controlled or managed			
S00		pported organization(s). D. All Type III Supporting Organizations	1		
360	LIOII L	2. All Type III Supporting Organizations		Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•		ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	•	ization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	-	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
		ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the or	ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By rea	sson of the relationship described in (2), did the organization's supported organizations have a			
	signifi	cant voice in the organization's investment policies and in directing the use of the organization's			
	incom	e or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		rted organizations played in this regard.	3		
Sec	tion E	E. Type III Functionally-Integrated Supporting Organizations			
1		the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions):			
а		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see insti	ructions		
2		ies Test. Answer (a) and (b) below.		Yes	No
а		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
		pported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		supported organizations and explain how these activities directly furthered their exempt purposes, he organization was responsive to those supported organizations, and how the organization determined			
		nese activities constituted substantially all of its activities.	2a		
h		e activities described in (a) constitute activities that, but for the organization's involvement, one or more	Za		
b		organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
		ns for the organization's position that its supported organization(s) would have engaged in these			
		ies but for the organization's involvement.	2b		
3		t of Supported Organizations. <i>Answer (a) and (b) below.</i>			
		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		es of each of the supported organizations? Provide details in <i>Part VI.</i>	3a		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each			
		supported organizations? If "Yes," describe in <i>Part VI</i> the role played by the organization in this regard.	3b		

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Pa	¹t V	g Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin			uctions. All
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lv-integrat	ed Type III supporting ord	anization (see

Schedule A (Form 990 or 990-EZ) 2015

instructions).

Par	t V	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Secti	ion D -	Distributions			Current Year
1	Amou	nts paid to supported organizations to accomplish exe	mpt purposes		
2	Amou	nts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organi	zations, in excess of income from activity			
3	Admin	istrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amou	nts paid to acquire exempt-use assets			
5	Qualifi	ed set-aside amounts (prior IRS approval required)			
6	Other	distributions (describe in Part VI). See instructions.			
7	Total	annual distributions. Add lines 1 through 6.			
8	Distrib	outions to attentive supported organizations to which the	ne organization is responsive	9	
	(provid	de details in Part VI). See instructions.			
9	Distrib	outable amount for 2015 from Section C, line 6			
10	Line 8	amount divided by Line 9 amount			
			(i)	(ii)	(iii)
.	·	Distribution Allocations (see instance)	Excess Distributions	Underdistributions	Distributable
Secti	ion E -	Distribution Allocations (see instructions)		Pre-2015	Amount for 2015
1	Distrib	outable amount for 2015 from Section C, line 6			
2	Under	distributions, if any, for years prior to 2015			
	(reaso	nable cause required-see instructions)			
3	Exces	s distributions carryover, if any, to 2015:			
а					
b					
С					
d	From 2	2013			
е	From 2	2014			
f	Total	of lines 3a through e			
g	Applie	d to underdistributions of prior years			
h	Applie	d to 2015 distributable amount			
i	Carry	over from 2010 not applied (see instructions)			
j	Remai	inder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distrib	outions for 2015 from Section D,			
	line 7:	\$			
а	Applie	d to underdistributions of prior years			
b	Applie	d to 2015 distributable amount			
С	Remai	inder. Subtract lines 4a and 4b from 4.			
5	Remai	ning underdistributions for years prior to 2015, if			
	any. S	ubtract lines 3g and 4a from line 2 (if amount			
	greate	r than zero, see instructions).			
6	Remai	ning underdistributions for 2015. Subtract lines 3h			
	and 4	o from line 1 (if amount greater than zero, see			
	instruc	ctions).			
7	Exces	s distributions carryover to 2016. Add lines 3j			
	and 4	э.			
8	Break	down of line 7:			
а					
b					
С	Exces	s from 2013			
d	Exces	s from 2014			
_	Evces	s from 2015			

Schedule A (Form 990 or 990-EZ) 2015

GIRL SCOUT COUNCIL OF GREATER

Schedule A (Form 990 or 990-EZ) 2015 NEW YORK, INC.

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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:
SUNDRY SALES, GSUSA PAYMENTS AND OTHER MISCELLANEOUS REVENUES

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public

Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• Section 501(c)(4), (5), or (6) organiza	itions: Complete Part III			
	COUT COUNCIL OF G	REATER	Em	ployer identification number
NEW YOR	K, INC.			13-1624014
Part I-A Complete if the org	ganization is exempt und	der section 501(c)	or is a section 527	organization.
1 Provide a description of the organize2 Political expenditures3 Volunteer hours			>	\$
Part I-B Complete if the org	ganization is exempt und	der section 501(c)	(3).	
1 Enter the amount of any excise tax				\$
2 Enter the amount of any excise tax	incurred by organization manag	ers under section 495	5	\$
3 If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV.				47. \(\alpha\)
Part I-C Complete if the org	<u> </u>		•	. , , ,
1 Enter the amount directly expende	d by the filing organization for se	ection 527 exempt fund	ction activities	\$
2 Enter the amount of the filing organ		J		
exempt function activities				\$
3 Total exempt function expenditures				
line 17b				
4 Did the filing organization file Form				
5 Enter the names, addresses and en made payments. For each organization contributions received that were propolitical action committee (PAC). If	ation listed, enter the amount pair romptly and directly delivered to	id from the filing organi a separate political org	ization's funds. Also enter ganization, such as a sepa	the amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and

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

Schedule C (Form 990 or 990-EZ) 2015

Part II-A Complete if the org	onizatio	n ic ovo	mpt under coetic	n 501/a\/2\ and fil	od Form 5769 /	plaction under
section 501(h)).	ailizatio	II 12 EXE	ilipi ulidel sectio		ed Form 5700 (election under
A Check ► if the filing organizat	ion belong	s to an aff	iliated group (and list i	n Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and share	e of excess	s lobbying	expenditures).			
B Check 🕨 🔲 if the filing organizat	ion checke	ed box A a	nd "limited control" pr	ovisions apply.		
	s on Lobb litures" me		nditures unts paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence publi	c opinion	(grass roots lobbying)			
b Total lobbying expenditures to influ	ence a legi	islative bo	dy (direct lobbying)			
c Total lobbying expenditures (add lir	nes 1a and	1b)				
d Other exempt purpose expenditure	s					
e Total exempt purpose expenditures	s (add lines	1c and 1	d)			
f Lobbying nontaxable amount. Ente	r the amou	ınt from th	e following table in bo	th columns.		
If the amount on line 1e, column (a) or	r (b) is:	The lob	bying nontaxable an	nount is:		
Not over \$500,000		20% of	the amount on line 1e).		
Over \$500,000 but not over \$1,000		\$100,00	00 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1,50			00 plus 10% of the ex			
Over \$1,500,000 but not over \$17,0	000,000		00 plus 5% of the exc	ess over \$1,500,000.		
Over \$17,000,000		\$1,000,	000.			
g Grassroots nontaxable amount (ent						
h Subtract line 1g from line 1a. If zero	,					
i Subtract line 1f from line 1c. If zeroj If there is an amount other than zer	•			ration file Form 4700		
			_			Yes No
reporting section 4911 tax for this y			eraging Period Unde	r section 501/h)		res NO
(Some organizations th	at made a	section 5		have to complete all	of the five columns	pelow.
	Lobby	ying Expe	nditures During 4-Ye	ar Averaging Period		_
Calendar year (or fiscal year beginning in)	(a) 2	012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2015

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	and West warmans are lines to those who tile alone are side in Port IV and at all all and are sinting.	1 (:	<u>.</u>	()	<u>,,</u>
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description e lobbying activity.	(a)		(b)	
Or tir	c lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:		77		
а	Volunteers?		X		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
С	Media advertisements?		X		
	Mailings to members, legislators, or the public?		X		
	Publications, or published or broadcast statements?	v	Λ.	,) E12
	Grants to other organizations for lobbying purposes?	X	X	4	2,513.
	Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
	Other activities?		Λ		2,513.
	Total. Add lines 1c through 1i		X		1,515.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Λ		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)	(5), or se	ection	
	501(c)(6).	o oo . (o,	(0), 0. 00		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ection	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No," OI	R (b) Par	t III-A, lir	ne 3, is
	answered "Yes."			1	
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	cal			
	expenses for which the section 527(f) tax was paid).				
	Current year				
b	Carryover from last year				
С	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
_	expenditure next year?				
	Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information		5		
		- lieth Dest II	I A 1: 1		
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	o list); Part li	I-A, IINES T	and ∠ (see	
	uctions); and Part II-B, line 1. Also, complete this part for any additional information. RT II-B, LINE 1, LOBBYING ACTIVITIES:				
IN	FISCAL YEAR 2016, THE GIRL SCOUT COUNCIL OF GREATE	R NEW	YORK,	INC.	
GA	JE CONTRIBUTIONS TO THE NEW YORK STATE GIRL SCOUT I	EGTSLA	ATTVE:	NETWOE	RΚ
ТО	LOBBY ON BEHALF OF GIRL MEMBERS FOR ALL NEW YORK S	TATE C	IRL S	COUT	
<u>CO</u> 1	JNCILS.				

Schedule C (Form 990 or 990-EZ) 2015

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC.

Employer identification number 13-1624014

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	_	
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	
Day			
Pai		·	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	` ;	
	Preservation of land for public use (e.g., recreation or e		orically important land area
	Protection of natural habitat	Preservation of a cert	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
a	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired		
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	e organization during the tax
	year •	annual to to a short	
4	Number of states where property subject to conservation ea	-	
5	Does the organization have a written policy regarding the per		□ vaa □ Na
	violations, and enforcement of the conservation easements i		
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, and enforcing con	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing concerns	ation agreements during the year
7	\$	diling of violations, and emorcing conserva	ation easements during the year
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	1/b)/4//R)/i)
Ü	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati		
5	include, if applicable, the text of the footnote to the organization		
	conservation easements.	tion's interioral statements that describes	the organization's accounting for
Pai	t III Organizations Maintaining Collections o	f Art. Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		ment and balance sheet works of art.
	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		, , , , , , , , , , , , , , , , , , , ,
b	If the organization elected, as permitted under SFAS 116 (AS		t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	relating to these items:	,	71
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical tre		al gain, provide
	the following amounts required to be reported under SFAS 1		<u> </u>
а	Revenue included on Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		> \$

532051 11-02-15

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

Schedule D (Form 990) 2015

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of in (check all that apply): a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in P During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part I 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? b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year f Ending balance 1c Id 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 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. 1a Beginning of year balance 15,000, 13,000, 12,000, 11,000	Part XIII. Yes No V, line 9, or Yes No
a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in PD During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" 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? b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year 1d Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 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. (a) Current year (b) Prior year (c) Two years back (d) Three years back	Yes No V, line 9, or Yes No
b Scholarly research e Other c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in P During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part I 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? b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance 1 to 1 d 1 d 1 d 1 e 1 f 1 Tyes," 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.	Yes No V, line 9, or Yes No
Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in P During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part I reported an amount 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? b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance 1c 1d 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 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.	Yes No V, line 9, or Yes No
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During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV	Yes No V, line 9, or Yes No
to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part I 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? b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance 1d e Distributions during the year f Ending balance 1d f Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 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. (a) Current year (b) Prior year (c) Two years back (d) Three years back	V, line 9, or Yes No
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part I 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? b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance 10 11 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 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. (a) Current year (b) Prior year (c) Two years back (d) Three years back.	V, line 9, or Yes No
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1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 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. (a) Current year (b) Prior year (c) Two years back (d) Three years back	
on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance 116 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 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. (a) Current year (b) Prior year (c) Two years back (d) Three years back	
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d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 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. (a) Current year (b) Prior year (c) Two years back (d) Three years back	A
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 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. (a) Current year (b) Prior year (c) Two years back (d) Three years back	Amount
e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 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. (a) Current year (b) Prior year (c) Two years back (d) Three years back	
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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. (a) Current year (b) Prior year (c) Two years back (d) Three years back (d) T	Yes No
(a) Current year (b) Prior year (c) Two years back (d) Three years back	
	11775
	
b Contributions 2,000. 1,000. 1,000	0. 6,000.
c Net investment earnings, gains, and losses	
d Grants or scholarships	
e Other expenditures for facilities	
and programs 15,000.	
f Administrative expenses g End of year balance 15,000. 13,000. 12,000	11 000
, , , , , , , , , , , , , , , , , , , ,	0. 11,000.
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:	
a Board designated or quasi-endowment ►% b Permanent endowment ► %	
b Permanent endowment ►% c Temporarily restricted endowment ► %	
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:	Yes No
(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 (b) Cost or other (c) Accumulated	(d) Book value
basis (investment) basis (other) depreciation	• •
1a Land 115,654.	115,654.
b Buildings 2,259,941. 1,593,820.	
c Leasehold improvements	666,121.
d Equipment 830,786. 327,723.	•
e Other	503,063.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)	•

Schedule D (Form 990) 2015 NEW YORK, I	NC.	KEATEK	13-1624014 Page
Part VII Investments - Other Securities.	110.		13 1024014 Page
Complete if the organization answered "Yes"	on Form 990 Part IV Jir	e 11h See Form 990 Part Y line 1	2
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cos	
(1) Financial derivatives	(-,	(2)	
(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"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cos	t 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, lin	ie 11d. See Form 990, Part X, line 15	5.
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		•
Part X Other Liabilities.	,		,
Complete if the organization answered "Yes"	on Form 990, Part IV, lir	e 11e or 11f. See Form 990. Part X.	line 25.
1. (a) Description of liability	, ,	(b) Book value	
(1) Federal income taxes		· ·	
(2) DEFERRED RENT		561,467.	
(3) ANNUITIES PAYABLE		5,544.	
(-)		3,3220	
(4)			
<u>(5)</u>			
<u>(6)</u> (7)			
VII			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ightharpoons2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2015

(8)

567,011.

Schedule D (Form 990) 2015 NEW YORK, INC.

Complete if the organization answered "Yes" on Form 990, Part IV		Revenue per H	teturn	l .
Total revenue, gains, and other support per audited financial statements			1	6,088,054
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			•	.,,
a Net unrealized gains (losses) on investments	2a	105,540.		
b Donated services and use of facilities		71,127.		
c Recoveries of prior year grants				
d Other (Describe in Part XIII.)		97,169.		
e Add lines 2a through 2d	·		2e	273,836.
3 Subtract line 2e from line 1			3	5,814,218.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	35,582.		
b Other (Describe in Part XIII.)		165,855.		004 405
c Add lines 4a and 4b			4c	201,437
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line Part XII Reconciliation of Expenses per Audited Financial	Statements With	- Evnance ner	5 Detu	6,015,655
Complete if the organization answered "Yes" on Form 990, Part IV		ii Expenses per	netu	111.
Total expenses and losses per audited financial statements			1	6,262,123.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			•	.,,
a Donated services and use of facilities	2a	71,127.		
b Prior year adjustments		<u> </u>		
c Other losses				
d Other (Describe in Part XIII.)		94,088.		
e Add lines 2a through 2d			2e	165,215.
3 Subtract line 2e from line 1			3	6,096,908.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b		35,582.		
b Other (Describe in Part XIII.)	4b	165,855.		004 405
c Add lines 4a and 4b			4c	201,437.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Part XIII Supplemental Information.	e 18.)		5	6,298,345.
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a al lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid PART V, LINE 4:			4; Part	X, line 2; Part XI,
THE INVESTMENT INCOME WAS USED FOR CAMP	OPERATIONS			
THE THEORET WIS OBED TON CHILL	01 11111110110	•		
PART X, LINE 2:				
	DE NO MARED	TAI INGED	12 727	mav
THE COUNCIL HAS DETERMINED THAT THERE A				
POSITIONS THAT REQUIRE RECOGNITION OR D	ISCLOSURE I	N THE FINA	NCI	AL
STATEMENTS. PERIODS ENDING SEPTEMBER 3	0, 2013 AND	SUBSEQUEN	IT R	EMAIN
SUBJECT TO EXAMINATION BY APPLICABLE TAX	XING AUTHOR	ITIES.		
PART XI, LINE 2D - OTHER ADJUSTMENTS:				
·				
CHANGE IN VALUE OF BENEFICIAL INTEREST	IN PERPETUA	L TRUSTS		4,390.
RENTAL EXPENSES 532054			0	94,088
09-21-15			Sched	lule D (Form 990) 201

Schedule D (Form 990) 2015 NEW YORK, INC.	13-1624014 Page 5
Part XIII Supplemental Information (continued)	
ACTUARIAL LOSSES ON ANNUITY OBLIGATIONS	-1,309.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	97,169.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
FINANCIAL ASSISTANCE	165,855.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
RENTAL EXPENSES	94,088.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
FINANCIAL ASSISTANCE	165,855.

SCHEDULE G

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2015

Open to Public Inspection

Name of the organization

GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC.

Employer identification number 13-1624014

Part I Fundraising Activities required to complete this pa	S. Complete if the organization answart.	ered "Y	es" oı	n Form 990, Part IV,	line 17. Form 990-EZ	filers are not
 Indicate whether the organization rate a X Mail solicitations b X Internet and email solicitation c Phone solicitations d X In-person solicitations 2 a Did the organization have a written key employees listed in Form 990, I b If "Yes," list the ten highest paid incompensated at least \$5,000 by the 	e X Solicita f X Solicita g X Specia or oral agreement with any individua Part VII) or entity in connection with addividuals or entities (fundraisers) pure	ation of ation of al fundra al (include profess	non-g gover ising ding o	overnment grants nment grants events fficers, directors, true undraising services?	stees or X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
M3 DEVELOPMENT CORPORATE - 17 OCEANVIEW BLVD, MANORVILLE,	CAMPAIGN STRATEGY & PLANNING	Yes	No X	427,100.	76,295.	350,805.
Total	ion is registered at licensed to religit		▶	427,100.	76,295.	350,805.
or licensing.	ion is registered or licensed to solicit	CONTINU	utions	o or rias been notified	a it is exempt from re	gistration

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS Schedule G (Form 990 or 990-EZ) 2015

532081 09-14-15 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 gr	oss income on Form 990	0-EZ, lines 1 and 6b. List		ots greater than \$5,000.
				(b) Event #2 WOMEN OF DISTINCTION	(c) Other events NONE	(d) Total events (add col. (a) through
4)			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	807,730.	377,576.		1,185,306.
	2	Less: Contributions	692,230.	332,726.		1,024,956.
	3	Gross income (line 1 minus line 2)	115,500.	44,850.		160,350.
	4	Cash prizes				
SS	5	Noncash prizes				
pense	6	Rent/facility costs	84,000.	36,000.		120,000.
Direct Expenses	7	Food and beverages	50,448.	28,495.		78,943.
	8	Entertainment	29,040.			29,040.
	9	Other direct expenses	29,040. 476.	525.		1,001.
	10		n 9 in column (d)		>	228,984.
	11	Net income summary. Subtract line 10 from li				-68,634.
Pa	ıτı		answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant		(d) Total gaming (add
υne			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
Revenue						
Ж	1	Gross revenue				
nses	2	Cash prizes				
zybe	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	Ť		Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	
		ter the state(s) in which the organization condu	_			
		the organization licensed to conduct gaming a				Yes No
D	11 "	No," explain:				
10a	We	ere any of the organization's gaming licenses re	evoked, suspended or te	rminated during the tax	year?	Yes No
b	If "	Yes," explain:				

532082 09-14-15 Schedule G (Form 990 or 990-EZ) 2015

GIRL SCOUT COUNCIL OF GREATER NEW YORK INC.

Schedule G (Form 990 or 990-EZ) 2015 NEW YORK, INC.	13-1	624014	Page 3
11 Does the organization conduct gaming activities with nonmembers?			☐ No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other			
to administer charitable gaming?		Yes	☐ No
13 Indicate the percentage of gaming activity conducted in:			
a The organization's facility		13a	%
b An outside facility		13b	%
14 Enter the name and address of the person who prepares the organization's gaming/special events			
Name			
Address ▶			
15a Does the organization have a contract with a third party from whom the organization receives gamin	ng revenue?	Yes	☐ No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$	and the amount		
of gaming revenue retained by the third party > \$			
c If "Yes," enter name and address of the third party:			
Name			
Address ▶			
16 Gaming manager information:			
Name			
Gaming manager compensation > \$			
Description of services provided			
Director/officer Employee Independent contractor			
47 Manual Manual Marketina di Amerikan di			
17 Mandatory distributions:			
a Is the organization required under state law to make charitable distributions from the gaming proce		Yes	☐ No
retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organize		163	140
organization's own exempt activities during the tax year > \$	zations of sperit in the		
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns	(iii) and (v): and Part III. I	ines 9. 9b. 10)b. 15b.
15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).			,,
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAI	D FUNDRAISEF	RS:	
(I) NAME OF FUNDRAISER: M3 DEVELOPMENT CORPORATE			
(I) ADDRESS OF FUNDRAISER: 17 OCEANVIEW BLVD, MANORV	ILLE, NY 11	949	
PART I, LINE 2B, COLUMN (V):			
M3 DEVELOPMENT CORPORATE WAS HIRED AS FUNDRAISING &	CAMPAIGN COL	INSEL T	0
DEVELOP AND GUIDE IMPLEMENTATION OF AN ANNUAL FUNDRA	LISING PLAN 8	<u>.</u>	
STRATEGY; BUILD INTERNAL DEVELOPMENT STAFF CAPACITY;	DEVELOP INT	ERNAL	
532083 09-14-15	Schedule G (Forn	n 990 or 990	-EZ) 2015

Schedule G (Form 990 or 990-EZ)

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Attach to Form 990.

GIRL SCOUT COUNCIL OF GREATER

► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

NEW YORK,	INC.						13-1624014
Part I General Information on Grants a	and Assistance					•	
1 Does the organization maintain records	to substantiate th	e amount of the grants	s or assistance, the	e grantees' eligibilit	ty for the grants or ass	sistance, and the selection	
criteria used to award the grants or assi	stance?						X Yes No
2 Describe in Part IV the organization's pr	ocedures for moni	toring the use of grant	t funds in the Unite	ed States.			
Part II Grants and Other Assistance to	_				anization answered "\	es" on Form 990, Part I	V, line 21, for any
recipient that received more than			1		(f) Method of		
Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
 Enter total number of section 501(c)(3) a Enter total number of other organization 		4					>

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

Page 2

NEW YORK, INC. 13-162

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
EMBERSHIP FINANCIAL AID	11057	0.	165,855.	FMV	WAIVER OF PROGRAM FEES
ROGRAMMATIC SCHOLARSHIPS FOR STUDENTS	6	8,125.	0.	FMV	
EMBERSHIP FINANCIAL AID-MEMBERSHIP	2269	0.	34,035.	FMV	MEMBERSHIP
EMBERSHIP FINANCIAL AID-EQUIPMENT	343	0.	3,988.	₽MV	EOUIPMENT
	510	<u>.</u>	3,255.		

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:

MEMBERSHIP

FOR THE GIRL SCOUT COUNCIL OF GREATER NEW YORK (THE COUNCIL) MEMBERSHIP

(\$15) FINANCIAL ASSISTANCE, THE COUNCIL ASKS LEADERS TO COMPLETE A FORM FOR

A GIRL(S) IN THEIR TROOP WHOSE FAMILIES HAVE A FINANCIAL HARDSHIP. FOR

GIRLS IN CEP, SIMON PROJECT, NYCHA, BREAK PROGRAMS AND OTHER TARGETED

INITIATIVES, WHICH SERVE MOSTLY GIRLS IN UNDER-SERVED, LOW-INCOME

COMMUNITIES, THE COUNCIL AUTOMATICALLY COVERS THE \$15 FEE. THE MEMBERSHIP

SPECIALIST OR MANAGER PROCESS THESE REQUESTS. ALSO, IF A GIRL JOINS A

Part IV | Supplemental Information

PROGRAM SUCH AS SCHOLARS OR CAMP, HER FAMILY CAN DIRECTLY REQUEST FINANCIAL ASSISTANCE IN THE CONTEXT OF THE OVERALL PROGRAM COST. THERE IS A FINANCIAL ASSISTANCE FORM FOR SCHOLARS, CAMP AND COUNCIL'S OTHER MORE EXPENSIVE PROGRAMS. FAMILIES APPLY ON BEHALF OF THEIR GIRL(S). A POINT RATING SYSTEM IS FOLLOWED BY STAFF IN DETERMINING THE LEVEL OF AWARDS.

CRITICAL FACTORS INCLUDE INCOME, SIZE OF FAMILY, YEARS IN GIRL SCOUTING, ETC. IF AFTER AN AWARD IS MADE, AND THE FAMILY STILL CANNOT PAY THE BALANCE THE COUNCIL DOES WORK WITH THEM ON A CASE BY CASE BASIS TO PROVIDE A SOMEWHAT HIGHER AWARD TO ENSURE GIRLS HAVE THE OPPORTUNITY TO PARTICIPATE.

IN ALL CASES, STAFF MUST KEEP FINANCIAL ASSISTANCE REQUEST, RATING FORM AND ALLOCATION INFORMATION FOR THE RESPECTIVE PROGRAM ON FILE. ON RARE

OCCASIONS, THE COUNCIL MAKES A GROUP DETERMINATION IN ENROLLING A CLASS OF GIRLS FOR A PROGRAM (E.G. NYCHA TROOP GOING TO CAMP). THIS IS BASED ON FUNDS AVAILABLE, SIZE OF TROOP AND TROOP HISTORY.

SCHOLARSHIPS

THE COUNCIL'S SCHOLARSHIPS ARE HANDLED BY EITHER VOLUNTEER AND/OR STAFF

COMMITTEES WHO RATE AND RANK APPLICATIONS OR ESSAYS AS WELL AS CONDUCT

INTERVIEWS. NO FAMILY MEMBER, LEADER OR OTHER PERSON WITH A PERSONAL

CONNECTION TO A GIRL IS ALLOWED TO MAKE ANY SCHOLARSHIP DETERMINATION. ANY

PERSON IN SUCH A RELATIONSHIP TO A GIRL IS ASKED TO REMOVE THEMSELVES

BEFORE THE REVIEW PROCESS BEGINS. THERE ARE CRITERIA ESTABLISHED FOR EACH

SCHOLARSHIP, OFTEN BASED ON GRANT OR ENDOWMENT REQUIREMENTS.

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Internal Revenue Service Name of the organization

Questions Regarding Compensation

Department of the Treasury

Part I

GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC.

Open to Public Inspection

OMB No. 1545-0047

Employer identification number 13-1624014

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			37
	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments		v	
	not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015

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 are not 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-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denenis	(B)(i)-(D)	reported as deferred on prior Form 990
(1) BARBARA MURPHY-WARRINGTON (i)	176,509.	10,000.	0.	0.	17,986.	204,495.	0.
CEO (ii)	0.	0.	0.	0.	0.	0.	0.
(i) <u></u>							
(ii)							
(i) <u> </u>							
(ii)							
(i)							
(i)							
(ii)							
(i) [(ii)							
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(i) <u> </u>							
(i)							
(ii)							
(i) [(ii)							
(i)							
(ii) (iii)							1
(i)							
(ii)							
(i)							
(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 7:
THE BOARD APPROVED A MERIT BASED BONUS FOR THE CEO FOR HER DEDICATION TO
THE ORGANIZATION THROUGHOUT THE YEAR.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC.

Employer identification number 13-1624014

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE GIRL SCOUT COUNCIL OF GREATER NEW YORK (THE COUNCIL) WAS ORGANIZED IN 1942 TO CARRY OUT THE MISSION OF THE GIRL SCOUTS OF THE USA FOR GIRLS AGES 5-17 WITHIN THE GREATER NEW YORK AREA.

THAT MISSION IS TO DEVELOP IN GIRLS A SENSE OF COURAGE, CONFIDENCE AND CHARACTER, AND WHO MAKE THEIR COMMUNITIES AND THE WORLD A BETTER PLACE. OVER 29,000 GIRLS REPRESENTING ALMOST EVERY ZIP CODE IN NEW YORK CITY PARTICIPATE IN OUR PROGRAMS AND OVER 8,000 VOLUNTEERS HELP THEM ALONG THEIR JOURNEY. THE COUNCIL OFFERS A WIDE RANGE OF GIRL SCOUT ACTIVITIES IN PUBLIC AND PRIVATE SCHOOLS, PUBLIC HOUSING, AND COMMUNITY-BASED ORGANIZATIONS. AND, THROUGH COUNCIL'S PROGRAMS, THE COUNCIL OFFERS MANY PATHWAYS TO HELP GIRLS GROW INTO LEADERS.

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

GIRL DEVELOPMENT:

OVER 27,800 GIRLS RECEIVED THE GIRL SCOUT LEADERSHIP EXPERIENCE THROUGH A VARIETY OF PATHWAYS (TROOP, CAMP, ONE-DAY EVENTS, SERIES, TRAVEL, AND VIRTUAL). ADAPTED TO AN URBAN LANDSCAPE, THE COUNCIL ALSO DELIVERED PROGRAMMING IN FOUR FOCAL AREAS: STEM (SCIENCE, TECHNOLOGY, ENGINEERING, AND MATHEMATICS); BUSINESS AND ENTREPRENUERSHIP; ENVIRONMENTAL LEADERSHIP; AND PERSONAL IDENTITY LEADERSHIP. GIRLS PARTICIPATED IN SUMMER ENGAGEMENTS FOCUSED ON ENVIRONMENTAL LEADERSHIP.

OVER 12,000 MANAGED THEIR OWN GIRL SCOUT COOKIE BUSINESSES, SELLING

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Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization GIRL SCOUT COUNCIL OF GREATER **Employer identification number** NEW YORK, INC. 13-1624014 OVER 1.72 MILLION BOXES OF COOKIES. 1,825 PARTICIPATED IN THE COUNCIL'S SCIENCE, TECHNOLOGY, ENGINEERING, AND MATH (STEM) EXPERIENCES IN 2016. THIS INCLUDES PROGRAMS THROUGH ONE-DAY EVENTS AT THE MUSESUM OF MATH AND THE NEW YORK HALL OF SCIENCE; PROGRAMS-IN-A-BOX OFFERED AT TROOP MEETINGS; HOUR OF CODE PROGRAMMING VIA AN ONLINE PLATFORM , AND 48 TEAMS DIVISED OF 284 GIRLS IN THE MULTI-LEVEL ROBOTICS VIA THE JUNIOR FIRST AND FIRST LEGO LEAGUES. 1,195 GIRLS PARTICIPATED IN BUSINESS AND ENTREPRENUERSHIP PROGRAMS THROUGH ONE-DAY COOKIE UNIVERSITY EVENTS AND WORKPLACE VISITS. 1,331 ENHANCED THEIR PERSONAL LEADERSHIP SKILLS WHILE PARTICIPATING IN, LEADERSHIP DEVELOPMENT WORKSHOPS, JOURNEY EXPRESS DAYS (NATIONAL PROGRAM PORTFOLIO PROGRAMMING), ONE-DAY CAREER DEVELOPMENT WORKSHOPS, COHORT 4 OF THE GIRL SCOUT LEADERSHIP INSTITUTE (50 GIRLS), AND 152 GIRLS RECEIVED THEIR GOLD AND SILVER AWARDS (THIS IS THE HIGHEST RECOGNITIONS GIRLS CAN EARN IN GIRL SCOUTING FOR COMPLETING PROJECTS TO IMPROVE THEIR COMMUNITIES IN SUSTAINABLE WAYS.) 8 HIGH SCHOOL GIRLS WERE AWARDED COLLEGE SCHOLARSHIPS. 40 GIRLS PARTICICPATED IN CADETTE GREEN CORPS, AT WHICH GIRLS DEVELOPED AN ENVIRONMENTAL LEADERSHIP SERVICE PROJECT. 82 GOLD, 72 SILVER GIRLS RECEIVED THEIR GOLD AND SILVER AWARDS. THIS IS THE HIGHEST RECOGNITIONS GIRLS CAN EARN IN GIRL SCOUTING FOR COMPLETING PROJECTS TO IMPROVE THEIR COMMUNITIES IN SUSTAINABLE WAYS. FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: CAMP OPERATIONS:

Schedule O (Form 990 or 990-EZ) (2015) Page 2 Name of the organization GIRL SCOUT COUNCIL OF GREATER **Employer identification number** NEW YORK, INC. 13-1624014 AT THE COUNCIL'S CAMP KAUFMANN IN DUTCHESS COUNTY, NY, THE COUNCIL PROVIDED OUTDOOR EDUCATIONAL PROGRAMS TO OVER 4,840 GIRLS AND VOLUNTEERS. IN 2016, THE COUNCIL PROVIDED 3,319 CAMPERS WITH SEASONAL WEEKEND OR OVERNIGHT CAMPING EXPERIENCES BETWEEN SEPTEMBER AND JUNE. DURING THE SUMMER, THE COUNCIL HAD 1,231 CAMPERS PARTICIPATE IN THEME-BASED SUMMER WEEKEND CAMPING EXPERIENCES, AS WELL AS 110 CAMPERS TO ATTEND SUMMER SPECIAL EVENTS. CAMP ACTIVITIES OFFERED INCLUDE LOW AND HIGH ROPES CHALLENGE COURSE ELEMENTS, BOATING, FISHING, FROG POND, CRAFTS, HIKING, ARCHERY, AND SWIMMING. IN NEW YORK CITY, WE LAUNCHED 4 URBAN DAY CAMP SITES FOR GIRLS AGES 5-9. THIS PROGRAM SERVED 132 GIRLS. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: OUTREACH - THROUGH PUBLICATIONS INCLUDING THE COUNCIL'S FAMILY GUIDE AND ANNUAL REPORT, ALONG WITH THE COUNCIL'S WEBSITE AND SOCIAL MEDIA PLATFORMS, THE COUNCIL REACHS OUT TO INDIVIDUALS FROM ALL COMMUNITIES TO ENGAGE THEM IN THE GIRL SCOUT PROGRAM. EXPENSES \$ 268,474. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART VI, SECTION A, LINE 6: ALL GIRL SCOUTS AND VOLUNTEERS ARE CONSIDERED MEMBERS. FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS ELECT SERVICE UNIT DELEGATES WHO IN TURN VOTE ON THE SLATE OF BOARD OF DIRECTORS PRESENTED TO THEM AT THE ANNUAL MEETING.

MEMBERSHIP

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

Name of the organization GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC.

Employer identification number 13-1624014

THE MEMBERS OF THE COUNCIL SHALL BE MEMBERS OF THE GIRL SCOUT MOVEMENT, 14
YEARS OF AGE OR OVER, REGISTERED THROUGH THE COUNCIL, WHO ARE ALSO:

- A) DELEGATES ELECTED BY THE SERVICE UNITS (THE "DELEGATES");
- OR B) MEMBERS OF THE BOARD OF DIRECTORS (THE "DIRECTORS");
- OR C) MEMBERS OF THE COUNCIL BOARD DEVELOPMENT COMMITTEE;
- OR D) THE CHAIRPERSON OF AN ASSOCIATION (THE "ASSOCIATION CHAIR").

AT LEAST TWO-THIRDS OF THE MEMBERS OF THE COUNCIL MUST BE DELEGATES. ALL

MEMBERS OF THE COUNCIL SHALL HOLD MEMBERSHIP ONLY FOR THE TERM TO WHICH

THEY HAVE BEEN ELECTED OR, IN THE CASE OF THE ASSOCIATION CHAIR, APPOINTED

AND ONLY FOR AS LONG AS THEY ARE REGISTERED THROUGH THE COUNCIL. FORMER

MEMBERS OF THE BOARD OF DIRECTORS WHO HAVE BEEN DESIGNATED

"HONORARY DIRECTORS" SHALL BE MEMBERS OF THE COUNCIL WITH VOICE BUT WITHOUT

VOTE.

RESPONSIBILITIES OF MEMBERSHIP

THE MEMBERS OF THE COUNCIL SHALL:

- A) ELECT THE OFFICERS OF THE COUNCIL, THE MEMBERS-AT-LARGE OF THE BOARD OF

 DIRECTORS, THE MEMBERS OF THE COUNCIL BOARD DEVELOPMENT COMMITTEE, AND THE

 DELEGATES AND PERSONS TO FILL DELEGATE VACANCIES, SHOULD VACANCIES OCCUR,

 TO THE NATIONAL COUNCIL OF GIRL SCOUTS OF THE UNITED STATES OF AMERICA.
- B) DETERMINE GENERAL LINES OF DIRECTION FOR GIRL SCOUTING WITHIN THE

 JURISDICTION OF THE COUNCIL BY RECEIVING AND RESPONDING TO REPORTS AND

 INFORMATION FROM THE BOARD OF DIRECTORS.
- C) AMEND THE ARTICLES OF INCORPORATION AND BYLAWS.

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC.	Employer identification number 13-1624014
·	
D) TAKE ALL OTHER ACTION REQUIRING MEMBERSHIP VOTE.	
E) CONDUCT SUCH OTHER BUSINESS AS MAY, FROM TIME TO TIME	, COME BEFORE THE
MEMBERS.	
FORM 990, PART VI, SECTION B, LINE 11:	
THE COUNCIL'S MANAGEMENT AND AUDIT COMMITTEE REVIEWED AND	APPROVED THE 990.
THE FINAL 990 WAS PROVIDED TO THE FULL BOARD PRIOR TO FIL	ING.
FORM 990, PART VI, SECTION B, LINE 12C:	
CONFLICT OF INTEREST FORMS ARE DISTRIBUTED ANNUALLY. STAF	F MEMBERS FOLLOW
UP WITH BOARD MEMBERS TO ENSURE THAT ALL FORMS ARE RECEIVE	ED. IF ANY FORMS
ARE MISSING THE BOARD PRESIDENT IS INFORMED FOR APPROPRIA	TE FOLLOW UP. ANY
CONFLICTS THAT WERE TO OCCUR WOULD BE PRESENTED TO THE AU	DIT COMMITTEE FOR
REVIEW. THE INDIVIDUAL WITH WHICH THE CONFLICT OCCURS MAY	NOT VOTE OR
INFLUENCE THE MATTER REVOLVING THE CONFLICT.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE COMPENSATION COMMITTEE APPROVES DEVELOPMENT/IMPLEMENT.	ATION OF
COMPENSATION PROGRAM FOR THE CEO TO ENSURE THAT IT IS REA	SONABLE AND NOT
EXCESSIVE IN LIGHT OF THE ORGANIZATION'S REVENUES, PERFORM	MANCE, AND

NON-PROFIT PURPOSES. THE COMMITTEE CONDUCTS DUE DILIGENCE REGARDING COMPENSATION BY REVIEWING DATA ON COMPENSATION AT COMPARABLE ORGANIZATIONS, CONDUCTED OR UPDATED AT LEAST EVERY YEAR; AND REVIEWS THE ANNUAL PERFORMANCE OF THE CEO AND APPROVES COMPENSATION ADJUSTMENTS AS APPROPRIATE. DETERMINATION OF COMPENSATION FOR OFFICERS OTHER THAN THE CEO IS ESTABLISHED VIA COMPARABILITY TO EXTERNAL MARKET DATA AND THEREAFTER 532212 09-02-15

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Name of the organization GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC.	Employer identification number 13-1624014
APPROVED BY THE CEO AND FINANCE COMMITTEE OF THE BOARD. T	HESE PROCESSES
WERE LAST PERFORMED DURING THE FISCAL YEAR ENDED SEPTEMBE	R 30, 2015.
FORM 990, PART VI, SECTION C, LINE 19:	
THE COUNCIL'S AUDITED FINANCIALS AND FORM 990 ARE POSTED	ON THE COUNCIL'S
WEBSITE, AND OTHER GOVERNING DOCUMENTS AND CONFLICT OF IN	TEREST POLICIES
ARE MADE AVAILABLE UPON REQUEST.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN BENEFICIAL INTEREST IN PERPETUAL TRUST	4,390.
ACTUARIAL LOSSES ON ANNUITY OBLIGATIONS	-1,309.
TOTAL TO FORM 990, PART XI, LINE 9	3,081.
FORM 990, PART XII, LINE 2C:	
THE AUDIT OVERSIGHT PROCESS HAS NOT CHANGED FROM THE PRICE	R YEAR.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

➤ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service GIRL SCOUT COUNCIL OF GREATER Employer identification number Name of the organization NEW YORK, INC. 13-1624014

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No
GIRL SCOUTS OF THE USA - 13-1624016	TO BUILD GIRLS' CHARACTER						
420 5TH AVENUE	AND SKILLS FOR SUCCESS IN						
NEW YORK, NY 10018	THE REAL WORLD	NEW YORK	501(C)(3)	7	N/A		X
	-						
	-						

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

Schedule R (Form 990) 2015

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

	·		1	<u> </u>		1			1		
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	General	Percentage
of related organization		(state or	entity	(related, unrelated, excluded from tax under	income	end-of-year assets	alloca	ations?	amount in box	managin partner	ownership
		foreign country)		Predominant income (related, unrelated, excluded from tax under sections 512-514)		asseis	Yes	No	20 of Coffication	Yes N	5
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	enti	b)(13) rolled :ity?
		country)						Yes	No
									<u> </u>

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

X

Yes No

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	Gift, grant, or capital contribution to related organization(s)				1b	Х	X			
c Gift, grant, or capital contribution from related organization(s)										
	Loans or loan guarantees to or for related organization(s)				1d		X			
е	Loans or loan guarantees by related organization(s)				1e		Х			
f	Dividends from related organization(s)				1f		X			
g Sale of assets to related organization(s)										
h Purchase of assets from related organization(s)										
i Exchange of assets with related organization(s)										
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		_X_			
I	Performance of services or membership or fundraising solicitations for related organization(s				11	Х				
	${f n}$ Performance of services or membership or fundraising solicitations by related organization(s				1m	Х				
	$oldsymbol{n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) \dots				1n		X			
0	Sharing of paid employees with related organization(s)				10		X			
	Reimbursement paid to related organization(s) for expenses				1 p		X			
q	Reimbursement paid by related organization(s) for expenses				1q		Х			
	Other transfer of cash or property to related organization(s)				1r	Х				
S	Other transfer of cash or property from related organization(s)				1 s		<u>X</u>			
2	If the answer to any of the above is "Yes," see the instructions for information on who must	complete t	this line, including covered	relationships and transaction thresholds.						
	Name of related organization Trans	(b) saction e (a-s)	(c) Amount involved	(d) Method of determining amount inv	olved					
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
3216	63 09-08-15	52		Schedule F	R (Forr	n 990)	2015			

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)	(b)	(c)	(d)	(e) Are a)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are a partners	ıll 3 sec.	Share of	Share of	Disp	ropor-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General	or Percentage
of entity		(state or foreign	(related, unrelated,	partners 501(c) orgs.)(3)	total	end-of-year	alloca	nate ations?	amount in box 20	managır	ownership
•		country)	sections 512-514)	Yes I		income	assets	Vac	No	(Form 1065)	Yes N	
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Schedule R	R (Form 990) 2015	NEW YORK	, INC.	13-1624014 Page 5
Part VII	(Form 990) 2015 Supplemental Inf	ormation		
	Provide additional info	rmation for responses	s to questions on Schedule R (see instructions).	

Asset No.	Description	Da [.] Acqu		Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	BUILDINGS BLDG & BLDG												
	IMPROVEMENTS	VAR:	IES	SL	.000	16	2,259,941.			2,259,941.	1,535,236.		58,584.
	* 990 PAGE 10 TOTAL BUILDINGS						2,259,941.		0.	2,259,941.	1,535,236.	0.	58,584.
	MACHINERY & EQUIPMENT FURNITURE AND												
28	EQUIPMENT	VAR:	IES	SL	.000	16	830,786.			830,786.	237,147.		90,576.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPM						830,786.		0.	830,786.	237,147.	0.	90,576.
	LAND												
		VAR:	IES		.000	16	115,654.			115,654.			0.
	* 990 PAGE 10 TOTAL LAND						115,654.		0.	115,654.	0.	0.	0.
	OTHER												
27		VAR:	IES	SL	.000	16	538,519.			538,519.	22,675.		35,901.
	COSTRUCTION IN PROGRESS	VAR:	IES		.000	16	266,699.			266,699.			0.
	* 990 PAGE 10 TOTAL OTHER						805,218.		0.	805,218.	22,675.	0.	35,901.
	* GRAND TOTAL 990 PAGE 10 DEPR						4,011,599.		0.	4,011,599.		0.	
							,,,			_,:,:_,:			