** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www irs gov/form990

Open to Public Inspection

А	or the	e 2013 calendar year, or tax year beginning OCT I, 2013 and 6	enaing 5	EP 30, 2014	l .
	Check if applicable	GIRL SCOUT COUNCIL OF GREATER		D Employer identifi	ication number
X	Addres	NEW YORK, INC			
Ļ	Name change			13-1	624014
L	Initial return		Room/suite	E Telephone number	er
Ļ	Termin ated	40 WADD SIKEEI	708	212-	645-4000
L	Ameno	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	8,787,281.
	Application pending	I NEW TORK, NI 10005		H(a) Is this a group r	
	pendii	F Name and address of principal officer: BARBARA MURPHY - WARF	RINGTO		
_		SAME AS C ABOVE		H(b) Are all subordinates i	ncluded? Yes No
1.	Tax-exe	empt status: X 501(c)(3) 501(c) ()	or 527	· · · · · · · · · · · · · · · · · · ·	list. (see instructions)
		e: WWW.GIRLSCOUTSNYC.ORG	-	H(c) Group exemption	
		organization: X Corporation Trust Association Other	L Year	of formation: 1942	M State of legal domicile: NY
Pa	art I	Summary			
æ	1	Briefly describe the organization's mission or most significant activities: THE	COUNCI	L'S MISSION	IS TO
Activities & Governance		DEVELOP IN GIRLS A SENSE OF COURAGE, CONF			
ern	2	Check this box $lacktriangle$ $lacktriangle$ if the organization discontinued its operations or dispos	sed of more	I	
Š	1			3	37
8		Number of independent voting members of the governing body (Part VI, line 1b)			37
es		Total number of individuals employed in calendar year 2013 (Part V, line 2a)			114
Σį		Total number of volunteers (estimate if necessary)			8095
Αct	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
Revenue				Prior Year	Current Year
		Contributions and grants (Part VIII, line 1h)		3,357,175.	3,185,104.
	9	Program service revenue (Part VIII, line 2g)		520,296.	
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		249,848.	154,945.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,752,518.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .		6,879,837.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		184,757.	220,491.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .		3,450,076.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		122,500.	95,375.
xpe	b b	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 713,09	93.		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,793,621.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,550,954.	
	19	Revenue less expenses. Subtract line 18 from line 12		1,328,883.	737,382.
Net Assets or Fund Balances			Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		8,477,726.	9,821,800.
t As	21	Total liabilities (Part X, line 26)		588,708.	919,606.
ENE PER	22	Net assets or fund balances. Subtract line 21 from line 20		7,889,018.	8,902,194.
	art II	Signature Block			
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of m	y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.	
Sig	n	Signature of officer		Date	
Hei	·e	BARBARA MURPHY-WARRINGTON, CEO			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	10	Date Check	PTIN
Pai	d	ISRAEL TANNENBAUM		if self-employ	_{/ed} P01589203
Pre	parer	Firm's name LOEB & TROPER LLP		Firm's EIN	13-1517563
Use	Only	Firm's address 655 THIRD AVENUE, 12TH FLOOR			
		NEW YORK, NY 10017		Phone no.21	2-867-4000
Ma	v the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

	990 (2013) NEW YORK, INC	13-1624014	Page 2
Pa	t III Statement of Program Service Accomplishments		[]
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:	MAG ODGANI	ממס.
	THE GIRL SCOUT COUNCIL OF GREATER NEW YORK (THE COUNCIL) IN 1942 TO CARRY OUT THE INFORMAL EDUCATIONAL PROGRAMS O		ZED
	SCOUTS OF THE USA FOR GIRLS AGES 5-17 WITHIN THE GREATER		
	AREA. (SEE SCHEDULE O FOR CONTINUATION OF OUR MISSION ST		
2	Did the organization undertake any significant program services during the year which were not listed on	AIBMENI • /	
2		Vos	X No
	the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	L1es	L21 INO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Ves	X No
3	If "Yes," describe these changes on Schedule O.		I40
4	Describe the organization's program service accomplishments for each of its three largest program services, as r	measured by expense	9
7	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	• •	
	revenue, if any, for each program service reported.	s, the total expenses,	and
4a	(Code:) (Expenses \$ 3,045,046 • including grants of \$ 220,491 •) (Revenue	2,879,	824.
	GIRL DEVELOPMENT:		
	OVER 29,000 GIRLS RECEIVED THE GIRL SCOUT LEADERSHIP EXP	ERIENCE THR	OUGH
	A VARIETY OF PATHWAYS (TROOP, CAMP, ONE-DAY EVENTS, SERI	ES, TRAVEL,	AND
	VIRTUAL). ADAPTED TO AN URBAN LANDSCAPE, THE COUNCIL ALS	O DELIVERED)
	PROGRAMMING IN FOUR FOCAL AREAS: STEM (SCIENCE, TECHNOLO	GY,	
	ENGINEERING, AND MATHEMATICS); BUSINESS AND ENTREPRENUER	SHIP;	
	ENVIRONMENTAL LEADERSHIP; AND PERSONAL IDENTITY LEADERSH		
	·		
	(SEE SCHEDULE O FOR AN EXPLANATION OF SPECIFIC PROGRAM A	CTIVITIES C	F
	THIS PROGRAM)		
4b	(Code:) (Expenses \$329,011 • including grants of \$) (Revenue	23,	410.)
	VOLUNTEER OPPORTUNITIES:		
	THE GIRL SCOUT PROGRAM ADVANCES THE DEVELOPMENT OF 15 KE		
	GIRLS RELATED TO DISCOVERING, CONNECTING AND TAKING ACTI		
	COMMUNITY. THROUGH OUR VOLUNTEER CORPS OF 8,058 ADULTS,		
	SERVE GIRLS IN VIRTUALLY EVERY ZIP CODE IN THE 5 BOROUGH		
	CUMULATIVELY PARTICIPATED IN OVER 6,534 HOURS OF TRAININ		
	THEIR KNOWLEDGE OF THE GIRL SCOUT PROGRAM AND ABILITY TO	PROVIDE GI	RLS
	WITH TRAVEL-RELATED AND CAMP EXPERIENCES.		
	F07.100	206	FO.4
4c	(Code:) (Expenses \$ 597, 109. including grants of \$) (Revenue	206 <u>,</u>	584.
	CAMP OPERATIONS:		
	AM OUD CAME VALLEMANN IN DIMOLEGG COUNTY MY ME DECUTED	OTTERDOOR	
	AT OUR CAMP KAUFMANN IN DUTCHESS COUNTY, NY, WE PROVIDED		יהדק
	EDUCATIONAL PROGRAMS TO OVER 3,100 GIRLS AND VOLUNTEERS.		/E
	PROVIDED 2,010 CAMPERS WITH SEASONAL WEEKEND OR OVERNIGH		22
	EXPERIENCES BETWEEN SEPTEMBER AND JUNE. DURING THE SUMME		
	CAMPERS PARTICIPATE IN THEME-BASED SUMMER WEEKEND CAMPIN		
	AS WELL AS 176 CAMPERS TO ATTEND SUMMER SPECIAL EVENTS.		
	OFFERED INCLUDE LOW AND HIGH ROPES CHALLENGE COURSE ELEM	ENIS, BOATI	.NG,
	FISHING, ARCHERY, AND SWIMMING.		
4d			
_	(Expenses \$ 148,317 • including grants of \$) (Revenue \$ Total program service expenses ▶ 4,119,483 •)	
<u>4e</u>	Total program service expenses ► 4,119,483.	- 0	200 /

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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			7.7
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	44.1		Х
_	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e	Х	
e f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1 Ie	22	
'	the organization's separate of consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			77
	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	4-		Х
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	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 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,"	10	- 42	
13	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			~~~	

Form 990 (2013) NEW YORK, INC
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	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 individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		х
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 so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			х
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		
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):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
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	X	
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?			77
•-	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			Х
20	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		
38	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		,	_	

### Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 22			
b	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	eportable gaming			
	(gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 114			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?	5b		Х
С	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				
	any contributions that were not tax deductible as charitable contributions?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	$Did the organization \ receive \ a \ payment \ in \ excess \ of \$75 \ made \ partly \ as \ a \ contribution \ and \ partly \ for \ goods \ and \ services \ a$	vices provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as required			
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c	ontract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	act?	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		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Di				
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	1			
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
40	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		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		40		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	401-			
	organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand	13c	44-		Х
			14a		
d	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	÷ U	14b	aan	(2012)

13-1624014

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.

<u> </u>	Check if Schedule O contains a response or note to any line in this Part VI						Λ
Sec	tion A. Governing Body and Management						
		ı	1	2 m		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		37			
	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.			ام د			
b	Enter the number of voting members included in line 1a, above, who are independent	1b		37			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other				
	officer, director, trustee, or key employee?			L	2		X
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision				
	of officers, directors, or trustees, or key employees to a management company or other person? $\dots$			L	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form	990 w	as filed?	L	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		[	5		X
6	Did the organization have members or stockholders?			Г	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a			Γ			
	more members of the governing body?				7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,						
	persons other than the governing body?				7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by th	ne 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 real			··· ├			
-	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 F						
						Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			Γ	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such or			··· ⊦			
~	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 boo				11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	.,	g	` <b> </b>			
12a					12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If ")			··· ├	120		
·	in Schedule O how this was done				12c	Х	
13				··· ⊢	13	X	
14	Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?				14	X	
				⊦	14		
15	Did the process for determining compensation of the following persons include a review and approx persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		nacheureur				
_	• • • • • • •				150	Х	
	The organization's CEO, Executive Director, or top management official				15a	X	
D	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			}	15b	22	
16-		mont.	with a				
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange				16-		Х
	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the organization the organiz			⊦	16a		- 22
D							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization with respect to such arrangements?				16h		
Sec	exempt status with respect to such arrangements? tion C. Disclosure				16b		
	List the states with which a copy of this Form 990 is required to be filed ►NY						
17 12	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (\$^^	tion 501(a)(2)a an	lv) c	railah	lo.	
18		ı (Sec	11011 00 1 (C)(3)8 ON	ıy) a\	andD	iC	
	for public inspection. Indicate how you made these available. Check all that apply.  X Own website Another's website X Upon request Other (explain	n in Sa	hedule (1)				
10	·			اءم	fin	oial	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c	OHILICT	or interest policy	, and	ıırıar	icial	
00	statements available to the public during the tax year.	٠٠٠ امـمــــ		. : 4 *	<b>_</b>		
20	State the name, physical address, and telephone number of the person who possesses the books a BARBARA MURPHY-WARRINGTON $-212-645-4000$	aria red	orus of the organ	ıızatı	on: 📂	_	
	40 WALL STREET, SUITE 708, NEW YORK, NY 10005						
	TO WALL DINEEL, DOLLE 100, MEM ION, MI IOUD						

# 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 (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week	box,	not c unle	ss pe	ition more rson	than is bot	h an	(D)  Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) ROSE LITTLEJOHN	10.00	, .		77				0.	0.	0	
PRESIDENT (2) ALYSSA MOEDER	3.00	Х		Х			-	0.	0.	0.	
VICE PRESIDENT	3.00	х		х				0.	0.	0.	
(3) JOCELYN GRAHAME	3.00	^		_			$\vdash$	0.	0.	<u></u>	
VICE PRESIDENT	3.00	x		х				0.	0.	0.	
(4) PATRICE TANAKA	3.00	77		21			┢		0.		
VICE PRESIDENT	3.00	x		Х				0.	0.	0.	
(5) ROBERT OUIMETTE	3.00								•		
VICE PRESIDENT		x		х				0.	0.	0.	
(6) SHERI WILSON-GRAY	3.00								•		
VICE PRESIDENT		x		х				0.	0.	0.	
(7) SUSAN NITZE	3.00										
VICE PRESIDENT		х		Х				0.	0.	0.	
(8) TODD GUENTHER	3.00										
TREASURER		Х		Х				0.	0.	0.	
(9) CHERYL L. SWIATKOWSKI	3.00										
SECRETARY		Х		Х				0.	0.	0.	
(10) KIM BOURNE	3.00										
ASSISTANT SECRETARY		Х		Х				0.	0.	0.	
(11) AMY KULE	1.30										
BOARD MEMBER		Х						0.	0.	0.	
(12) AMY SHECTER	1.30								_	_	
BOARD MEMBER		Х						0.	0.	0.	
(13) BARBARA COOPERMAN	1.30										
BOARD MEMBER	1 22	Х						0.	0.	0.	
(14) BETTY SPENCE	1.30										
BOARD MEMBER	1 20	Х						0.	0.	0.	
(15) CATHERINE KEATING	1.30	, ,							_	_	
BOARD MEMBER	1 20	Х						0.	0.	0.	
(16) CHRISTINE BATTAGLIA	1.30	х						0.	0.	0.	
BOARD MEMBER (17) DONNA BLANK	1.30	^			_		$\vdash$	<u> </u>	0.	<u> </u>	
BOARD MEMBER	1.30	х						0.	0.	0.	
DOARD MEMDER		Λ				L	<u> </u>	1 0.	0.	- 000	

332007 10-29-13

	•											
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ghe	st C	ompensated Employe	es (continued)			
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average	(do	not c	Pos	ition	l than	one	Reportable	Reportable	Es	timate	ed
	hours per	box	, unle	ss pe	erson	is bot	h an	compensation	compensation	an	nount	of
	week	Offic	cer ar	nd a d	irecto	or/trus	tee)	from	from related		other	
	(list any	ector						the	organizations	com	pensa	tion
	hours for	or dir	a a			ited		organization	(W-2/1099-MISC)	fr	om the	Э
	related	trustee or director	ruste		l	Sens		(W-2/1099-MISC)			anizati	
	organizations	al tru	onal t		loyee	co m					d relate	
	below line)	Individual 1	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			orga	anizatio	ons
	line)	рщ	su	0#!	Key	E High	For					
(18) FELITA HARRIS	1.30							_	_			_
BOARD MEMBER		Х						0.	0.			0.
(19) FERNANDA KELLOGG	1.30											
BOARD MEMBER		Х						0.	0.			0.
(20) HELEN GURRERA	1.30											
BOARD MEMBER		Х						0.	0.			0.
(21) JAMES GUNDELL	1.30											
BOARD MEMBER		Х						0.	0.			0.
(22) JENNIFER LEE	1.30											
BOARD MEMBER		Х						0.	0.			0.
(23) KATE MAITLAND	1.30											
BOARD MEMBER		Х						0.	0.			0.
(24) KERRY TATLOCK	1.30											
BOARD MEMBER		Х						0.	0.			0.
(25) LESLIE MAYS	1.30											_
BOARD MEMBER		Х						0.	0.			0.
(26) LIZ GATELEY	1.30											
BOARD MEMBER		Х						0.	0.			0.
1b Sub-total							left	0.	0.			0.
c Total from continuation sheets to Part VI								185,286.	0.	1	0,1	47.
d Total (add lines 1b and 1c)							▶	185,286.	0.	1	0,1	47.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed a	bove	e) wh	no re	eceived more than \$100	0,000 of reportable			
compensation from the organization												1
											Yes	No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	ey er	nplo	yee	, or h	nighest compensated e	mployee on			
line 1a? If "Yes," complete Schedule J for s				-	-	-				3		Х
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150										4	Х	
5 Did any person listed on line 1a receive or a												

**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) Name and business address	(B) Description of services	<b>(C)</b> Compensation
KOSZYN & CO.		
41 EAST 11T STREET, NEW YORK, NY 10003	FUNDRAISING	153,125.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	

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

rendered to the organization? If "Yes," complete Schedule J for such person

Part VII Section A. Officers, Directors, To		nplo	oyee			ligh	est			<b>T</b>
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average hours	(cl			ition that		ıly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) LYNDA DAVEY	1.30	x						0.	0.	0
BOARD MEMBER	1 20	Δ						0.	0.	0.
(28) MELISSA MCCLENAGHAN MARTIN BOARD MEMBER	1.30	x						0.	0.	0.
(29) MELISSA RICE	1.30							-	•	
BOARD MEMBER	1.30	Х						0.	0.	0.
(30) MICHELLE CLAYMAN	1.30									
BOARD MEMBER		Х						0.	0.	0 .
(31) NINA MCLEMORE	1.30	7,							0	_
BOARD MEMBER (32) PAULA ZIRINSKY	1.30	Х						0.	0.	0
BOARD MEMBER	1.30	x						0.	0.	0
(33) SAMANTHA KAPPAGODA	1.30							•	•	
BOARD MEMBER		x						0.	0.	0 .
(34) SHERRY MATAYS	1.30									
BOARD MEMBER		х						0.	0.	0
(35) STEPHANIE BRESLOW	1.30									
BOARD MEMBER		Х						0.	0.	0 .
(36) SUSAN VOBEJDA	1.30									
BOARD MEMBER	1 20	Х						0.	0.	0
(37) TRISH MCEVOY BOARD MEMBER	1.30	x						0.	0.	0
(38) BARBARA MURPHY-WARRINGTON CEO	35.00			х				185,286.	0.	10,147
								103,200.		10,147
		_								
Total to Part VII, Section A, line 1c								185,286.		10,147

## Form 990 (2013) NEW YOR: Part VIII Statement of Revenue

		Check if Schedule O conta	ains a resnonse	or note to any lin	e in this Part VIII			
		CHOCK II CONCUCIO C CONC	anio a response	or riote to drift iii	(A)	(B)	(C)	(D) Revenue excluded
					Total revenue	Related or exempt function	Unrelated business	I from tax under
						revenue	revenue	sections 512 - 514
nts	1 a	Federated campaigns	1a	2,747.				
<u> </u>	b	Membership dues	1b					
Am (	С	Fundraising events	1c	997,759.				
直		Related organizations		69,000.				
ii,	е	Government grants (contributi	ions) <b>1e</b>	33,500.				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grant	ts, and					
혈		similar amounts not included abov	/e <b>1f</b>	2,082,098.				
	g	Noncash contributions included in lines	1a-1f: \$	8,749.				
<u>8</u> 8	h	Total. Add lines 1a-1f			3,185,104.			
				Business Code				
Se	2 a			721310	423,753.	423,753.		
e Z	b	OTHER PROGRAM SERVICES		611710	25,380.	25,380.		
en S	С							
e S	d							
Program Service Revenue	е							
۱ ۵		All other program service reve						
	g	Total. Add lines 2a-2f			449,133.			
	3	Investment income (including						
		other similar amounts)			113,421.			113,421.
	4	Income from investment of tax						
	5	Royalties						
			(i) Real	(ii) Personal				
		Gross rents	318,504.					
		Less: rental expenses	290,308.					
		Rental income or (loss)	28,196.		20.106			20 106
					28,196.			28,196.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	752,236.					
	D	Less: cost or other basis	710,712.					
	_	and sales expenses						
		Gain or (loss)  Net gain or (loss)			41,524.			41,524.
		Gross income from fundraising			12,521.			11,521.
une	o a	including \$ 997	•					
Ş		contributions reported on line						
Other Revenu		Part IV, line 18	•	145,200.				
the	b	Less: direct expenses		223,955.				
0		Net income or (loss) from fund			-78,755.			-78,755.
		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		3,810,424.				
	b	Less: cost of goods sold						
		Net income or (loss) from sales		<b></b>	2,660,685.	2,660,685.		
		Miscellaneous Revenue	е	Business Code				
ſ	11 a	MISCELLANEOUS		900099	13,259.			13,259.
	b							
	С							
		All other revenue						
	е	Total. Add lines 11a-11d		▶ [	13,259.			
	12	Total revenue. See instructions.			6,412,567.	3,109,818.	0	. 117,645.

## GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC

Form 990 (2013)

### Part IX | Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	mplete column (A).	
	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	220,491.	220,491.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	041 510	160 071	40 202	22 027
	trustees, and key employees	241,510.	169,271.	48,302.	23,937.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B)	2,362,008.	1,676,413.	317,429.	368,166.
7	Other salaries and wages Pension plan accruals and contributions (include	4,304,000.	1,0/0,413.	J11,44J•	J00,100.
8	section 401(k) and 403(b) employer contributions)	314,217.	229,753.	33,439.	51,025.
0	* * * * * * * * * * * * * * * * * * * *	230,045.	168,111.	26,305.	35,629.
9 10	Other employee benefits	243,870.	168,781.	39,674.	35,415.
11	Payroll taxes Fees for services (non-employees):	213,0700	100,701	35,014	55,415
	Management				
b	Legal	770.		770.	
	Accounting	156,496.		156,496.	
	Lobbying	,		,	
e	Professional fundraising services. See Part IV, line 17	95,375.			95,375.
f	Investment management fees	35,384.		35,384.	
g	//t/:   1.400/ t/: 05				
	column (A) amount, list line 11g expenses on Sch O.)	402,813.	302,480.	90,777.	9,556.
12	Advertising and promotion				
13	Office expenses	483,318.	360,962.	52,959.	69,397.
14	Information technology				
15	Royalties	4-4-0			
16	Occupancy	451,935.	441,319.	5,308.	5,308.
17	Travel	69,338.	66,258.	1,595.	1,485.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	10 265	17 707	0.50	700
19	Conferences, conventions, and meetings	19,365.	17,707.	859.	799.
20	Interest	8,175.		8,175.	
21	Payments to affiliates	201,766.	196,476.	2,645.	2,645.
22	Depreciation, depletion, and amortization	107,398.	93,878.	6,760.	6,760.
23 24	Other expenses. Itemize expenses not covered	107,3301	33,070.	0,7001	0,700.
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 0.)				
а	BAD DEBT	10,489.		10,489.	
b		,		, , , , ,	
c					
d					
e	All other expenses	20,422.	7,583.	5,243.	7,596.
25	Total functional expenses. Add lines 1 through 24e	5,675,185.	4,119,483.	842,609.	713,093.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
					Farm <b>QQ</b> (2012)

### GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC

Form 990 (2013)
Part X | Balance Sheet

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing	771,094.	1	1,423,844
2	Savings and temporary cash investments	85,031.	2	251,870
3	Pledges and grants receivable, net	1,027,793.	3	1,092,723
4	Accounts receivable, net	25,126.	4	7,752
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
<u>ب</u>	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	Notes and loans receivable, net		7	
8   ۴	Inventories for sale or use	3,471.	8	13,030
9	Prepaid expenses and deferred charges	144,739.	9	191,162
10a	Land, buildings, and equipment; cost or other			
	basis. Complete Part VI of Schedule D 10a 3,430,631.			
b	basis. Complete Part VI of Schedule D Less: accumulated depreciation  10a 3,430,631.  2,625,053.	656,401.	10c	805,578
11	Investments - publicly traded securities	5,285,904.	11	5,580,667
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	478,167.	15	455,174
16	Total assets. Add lines 1 through 15 (must equal line 34)	8,477,726.	16	9,821,800
17	Accounts payable and accrued expenses	300,963.	17	419,288
18	Grants payable		18	
19	Deferred revenue	168,091.	19	257,807
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ဖွ 22	Loans and other payables to current and former officers, directors, trustees,			
≣	key employees, highest compensated employees, and disqualified persons.			
Liabilities	Complete Part II of Schedule L		22	000 000
_ 23	Secured mortgages and notes payable to unrelated third parties		23	200,000
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of	110 (54		40 F11
	Schedule D	119,654.		42,511. 919,606.
26	Total liabilities. Add lines 17 through 25	588,708.	26	919,606
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
Se	complete lines 27 through 29, and lines 33 and 34.	6 220 061		6 715 176
<u>E</u> 27	Unrestricted net assets	6,338,961. 1,131,500.		6,715,476 1,755,739
B 28	Temporarily restricted net assets	418,557.		
면   29 도	Permanently restricted net assets	410,337.	29	430,979
년	Organizations that do not follow SFAS 117 (ASC 958), check here			
0 0	and complete lines 30 through 34.		00	
\$ 30	Capital stock or trust principal, or current funds		30	
ğ 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances 27 28 29 30 31 32 32 32 32 32 32 32 32 32 32 32 32 32	Retained earnings, endowment, accumulated income, or other funds	7,889,018.	32	8,902,194
33	Total net assets or fund balances	8,477,726.	33	9,821,800
34	Total liabilities and net assets/fund balances	0,411,140.	34	9,021,000

Form 990 (2013)

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 2 3 4 5 6 7 8 9	Total revenue (must equal Part VIII, column (A), line 12)  Total expenses (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  Prior period adjustments  Other changes in net assets or fund balances (explain in Schedule O)	1 2 3 4 5 6 7 8	6,41 5,67 73 7,88 26	2,5 5,1 7,3 9,0 6,3	85. 82.
10					94.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
1 2a	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 Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	No X
<u> Lu</u>	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e basis, e audit,		v	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
За	If the organization changed either its oversight process or selection process during the tax year, explain in Sch As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Act and OMB Circular A-133?	ngle Audit	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or guidite, explain why in Schodule O and deparths any stone taken to undergo such guidite		26		

#### **SCHEDULE A**

(Form 990 or 990-EZ)

### Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

GIRL SCOUT COUNCIL OF GREATER Emplo

NEW YORK, INC

Employer identification number 13-1624014

Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I 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.) 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. 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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). 11 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 that describes the type of supporting organization and complete lines 11e through 11h. d Type III - Non-functionally integrated **b** Type II c Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes Nο the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (vi) Is the (iv) Is the organization (v) Did you notify the (vii) Amount of monetary (i) Name of supported (ii) EIN (iii) Type of organization organization in col. in col. (i) listed in your organization in col. (described on lines 1-9 organization support (i) organized in the aovernina document? (i) of your support? above or IRC section U.S.? (see instructions)) Yes No Yes No Yes No

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

Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-13

Total

#### Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2,492,737.	2,297,778.	2,136,388.	3,357,175.	3,185,104.	13,469,182.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	2,492,737.	2,297,778.	2,136,388.	3,357,175.	3,185,104.	13,469,182.
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)						525,892.
	Public support. Subtract line 5 from line 4.						12,943,290.
	ction B. Total Support					· · · · · · · · · · · · · · · · · · ·	
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 4	2,492,737.	2,297,778.	2,136,388.	3,357,175.	3,185,104.	13,469,182.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	250 101	411 005	400 017	454 650	421 025	1 050 000
	and income from similar sources	∠50,191.	411,005.	422,217.	454,652.	431,925.	1,969,990.
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	10 052	20 056	E2 0E1	20 201	12 250	162 E10
	assets (Explain in Part IV.)	18,053.	39,856.	53,051.	39,291.	13,239.	163,510.
	Total support. Add lines 7 through 10		,				15,602,682. ,602,565.
	Gross receipts from related activities,						,002,303.
13	First five years. If the Form 990 is for	-			•		<b>.</b> .
Sec	organization, check this box and stop ction C. Computation of Publi						<b>P</b>
	Public support percentage for 2013 (I	• • • • • • • • • • • • • • • • • • • •		olumn (fl)		14	82.96 %
						15	79.89 %
	15 Public support percentage from 2012 Schedule A, Part II, line 14						
	stop here. The organization qualifies as a publicly supported organization						
b	b 33 1/3% support test - 2012. 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	and stop nere. The organization qualifies as a publicly supported organization						
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization						
	meets the "facts-and-circumstances"			-	•	-	
b	10% -facts-and-circumstances tes						
-	more, and if the organization meets the	-					
	organization meets the "facts-and-circ		•				
18	Private foundation. If the organization						
				,,,	,		-:: 000 F7\ 0040

Schedule A (Form 990 or 990-EZ) 2013

### 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.)

Section A. Public Support	now, prodec com	proto r art my				
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>1</b> Gifts, grants, contributions, and		, , , , , , , , , , , , , , , , , , ,	, ,	` '		.,
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6		, , , , , , , , , , , , , , , , , , ,	, ,	, ,		.,
<b>10a</b> Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b, whether or not the business is						
regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV.)						
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax vear as a sectic	on 501(c)(3) organiz	ation.
check this box and <b>stop here</b>	•		•	•		
Section C. Computation of Publi	c Support Pe	rcentage				
15 Public support percentage for 2013 (li	ne 8, column (f) d	livided by line 13, o	column (f))		15	%
16 Public support percentage from 2012	Schedule A, Part	III, line 15			16	%
Section D. Computation of Inves	tment Incom	e Percentage				
17 Investment income percentage for 20	13 (line 10c, colur	mn (f) divided by lir	ne 13, column (f))		17	%
18 Investment income percentage from 2	:012 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2013. If the					33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	e organization qual	ifies as a publicly	supported organiz	ation	▶□
b 33 1/3% support tests - 2012. If the	organization did r	not check a box or	line 14 or line 19	a, and line 16 is mo	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, chec	ck this box and <b>s</b>	<b>top here.</b> The orga	anization qualifies	as a publicly supp	orted organization	
20 Private foundation. If the organization	า did not check a	box on line 14, 19	a, or 19b, check t	his box and see in:	structions	<u> </u>

332023 09-25-13

### GIRL SCOUT COUNCIL OF GREATER

Schedule A (Forn	n 990	or 990-EZ)	2013	NEW YO	JKK,	INC					13-162	4014 Page
Part IV Su	pple	mental I	nform	nation. Pr	ovide th	ne explanations re	quired	by Part	II, line 10; Pa	art II, line 17a c	r 17b; and Pa	rt III, line 12.
Also	com	plete this p	art for a	any additio	nal info	rmation. (See inst	ructions	s).				
CHEDULE	Α,	PART	II,	LINE	10,	EXPLANAT	ION	FOR	OTHER	INCOME:		
IISCELLA	1EO	US										
			-									

#### ** PUBLIC DISCLOSURE COPY **

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No. 1545-0047

Name of the organization

Employer identification number

GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC

13-1624014

Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
,	on is covered by the <b>General Rule</b> or a <b>Special Rule.</b> I(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General Rule					
-	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one mplete Parts I and II.				
Special Rules					
509(a)(1) and 17	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year					
	n that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Employer identification number

13-1624014

_	51111 TITO		1021011
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$69,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$80,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)

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

Employer identification number

13-1624014

	OIII.		1021011
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 150,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ 200,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)

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

Employer identification number

13-1624014

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		Oahadula D /Farma (	100 000 E7 ar 000 DE\ /2012\

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) Page 4 Name of organization Employer identification number GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC 13-1624014 religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the Part III Exclusively religious, charitable, etc., individual contributions to section of (C)(1), (0), or (10) organization year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) Use duplicate copies of Part III if additional space is needed. (a) No. `from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

Transferee's name, address, and ZIP + 4

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held

(e) Transfer of gift

Relationship of transferor to transferee

(a) No. from Part I

Relationship of transferor to transferee

Relationship of transferor to transferee

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

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

► Attach to Form 990.

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

2013
Open to Public Inspection

Name of the organization

GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC

 $Employer\ identification\ number\\13-1624014$ 

Par	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor of		
	• •		
Par	rt II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e		orically important land area
	Protection of natural habitat	Preservation of a certif	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form o	of a conservation easement on the last
	day of the tax year.		
	,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic stru		
d			
	listed in the National Register		
3	Number of conservation easements modified, transferred, rele		
	year >		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and e	enforcing conservation easements during t	the year > \$
8	Does each conservation easement reported on line 2(d) abov	ve satisfy the requirements of section 170(r	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	tion's financial statements that describes the	he organization's accounting for
	conservation easements.		
Par	rt III Organizations Maintaining Collections of	f Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furtheran	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pub	lic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financial	gain, provide
	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	Assets included in Form 990, Part X		

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Schedule D (Form 990) 2013

		GIVE	BCOU.	1 COO1	истп	Or	GKEA	IUK	
Schedule D	(Form 990) 2013	NEW	YORK,	INC					
Part III	Organizations	Maintain	ing Colle	ections	of Art,	Histo	orical 1	reasure	s, or C

Pai	t III	Organizations Maintaining C	collections of A	rt, Historical Tr	easures, or C	ther S	Similar Asse	ts(contin	ued)			
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items											
	(check all that apply):											
а												
b	b Scholarly research e Other											
С												
4												
5												
	to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No											
Pai	t IV	Escrow and Custodial Arran	gements. Comple	ete if the organization	n answered "Yes	" to For	m 990, Part IV,	line 9, or				
		reported an amount on Form 990, Par	rt X, line 21.									
1a	Is th	e organization an agent, trustee, custod	ian or other intermed	diary for contribution	ns or other assets	not inc	luded	_				
	on Form 990, Part X? Yes No											
b	b If "Yes," explain the arrangement in Part XIII and complete the following table:											
						Ī		Amount				
С	Beg	inning balance					1c					
d		itions during the year					1d					
е		ributions during the year					1e					
f		ing balance					1f					
2a	Did ·	the organization include an amount on F	orm 990, Part X, line	21?				Yes	No			
		es," explain the arrangement in Part XIII.										
	t V	Endowment Funds. Complete i										
			(a) Current year	(b) Prior year	(c) Two years ba	ck (d)	Three years back	(e) Four	years back			
1a	Beg	inning of year balance	418,557.	392,696.	352,69	95.	388,308.		378,118.			
b		tributions	1,000.	1,000.	6,00	00.						
С		investment earnings, gains, and losses	11,422.	24,861.	34,00	)1.	-35,613.		10,190.			
d	Grar	nts or scholarships										
е		er expenditures for facilities										
		programs										
f		ninistrative expenses										
g		of year balance	430,979.	418,557.	392,69	6.	352,695.		388,308.			
2	Prov	vide the estimated percentage of the cur	rent year end baland	ce (line 1g, column (a	a)) held as:							
а		rd designated or quasi-endowment	•	%								
b		manent endowment ► 100.00	%	_								
С		porarily restricted endowment	<del></del>									
		percentages in lines 2a, 2b, and 2c shou	uld equal 100%.									
За		there endowment funds not in the posse		ation that are held a	and administered	for the c	organization					
	by:	·	· ·						Yes No			
		unrelated organizations						3a(i)	X			
		related organizations						-	X			
b		es" to 3a(ii), are the related organizations										
4		cribe in Part XIII the intended uses of the										
Pai	t VI											
		Complete if the organization answere	d "Yes" to Form 990	, Part IV, line 11a. S	see Form 990, Par	t X, line	10.					
		Description of property	(a) Cost or o				mulated	(d) Book	value			
		. , ,	basis (investr	1 ' '	(other)	depred						
	Land	d		11	5,654.			11!	5,654.			
b		dings				1,51	9,087.		3,047.			
		sehold improvements			0,337.		4,042.		5,295.			
d		ipment			4,116.		1,924.	262	2,192.			
		er			3,390.			233	3,390.			
		I lines 1a through 1e. (Column (d) must e							5,578.			
		3			. , ,		Schedule		990) 2013			

Schedule D (Form 990) 2013 NEW YORK, 1.	NC		13-1624014 Page 3
Part VII Investments - Other Securities.	t- F 000 Dt IV I	11b O F 000 Dt V	the a 40
Complete if the organization answered "Yes"  (a) Description of security or category (including name of security)	(b) Book value		ine 12. n: Cost or end-of-year market value
(4) = 1   1   1   1	(b) Dook value	(c) Method of Valdation	1. Oost of end-of-year market value
(O) Olasakakakakakakaka			
(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"	to Form 990, Part IV, li	ne 11c. See Form 990, Part X, I	line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation	n: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.		4410 5 000 5 14	
Complete if the organization answered "Yes"	to Form 990, Part IV, II Description	ne 11d. See Form 990, Part X,	(b) Book value
	Description		(b) Book value
(1)			
(2)			
(3)			
<u>(4)</u>			
(5) (6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		<b>•</b>
Part X Other Liabilities.	- ,		
Complete if the organization answered "Yes"	to Form 990, Part IV, li	ne 11e or 11f. See Form 990, P	art X, line 25.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) DEFERRED RENT		33,323.	
(3) ANNUITIES PAYABLE		9,188.	
(4)			
(5)			
(6)			
(7)			
(8)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)  $\triangleright$ 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2013

42,511.

Schedule D (Form 990) 2013

Pa	rt XI Reconciliation of Revenue per Audited Financial Sta		Revenue per F	<b>leturn</b>	<b>).</b>
	Complete if the organization answered "Yes" to Form 990, Part IV, line				
1	Total revenue, gains, and other support per audited financial statements			1	6,767,470.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а			266,370.	-	
b	Donated services and use of facilities			4	
С	Recoveries of prior year grants		000 500	4	
d	,	2d	299,732.	_	F.C.C. 100
е	• • • • • • • • • • • • • • • • • • • •			2e	566,102.
3	Subtract line 2e from line 1			3	6,201,368.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	25 204		
а	, , , ,		35,384. 175,815.	-	
b	Other (Describe in Part XIII.)		•	-	211 100
С	Add lines 4a and 4b			4c	211,199.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	6,412,567.
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta		n Expenses per	Retu	rn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line			т. т	5,754,294.
1	Total expenses and losses per audited financial statements			1	5,754,494.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا ء ا			
a	Donated services and use of facilities			-	
b	Prior year adjustments			-	
C	Other losses		290,308.	4	
d				_	290,308.
e	• • • • • • • • • • • • • • • • • • • •			2e 3	5,463,986.
3	Subtract line 2e from line 1			3	3,403,500.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	40	35,384.		
a	, , , ,		175,815.	-	
b	A dd E 4d 4b		•	4c	211,199.
5	Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 18</i>			5	5,675,185.
	rt XIII Supplemental Information.	5.)		1 3 1	3,3,3,233
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	4· Part IV lines 1h	and 2b: Part V line	4· Part	X line 2: Part XI
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide ar			1,1 0.1	71, III 0 2, 1 air 71,
	Za ana 15, ana 1 ar 741, into Za ana 15.7 noo complete tine part to provide an	ry additional line	manorn.		
PA	RT V, LINE 4:				
	·				
TH:	E ENDOWMENT IS TO REMAIN IN PERPETUITY	AND INVES	TMENT		
IN	COME IS TO BE USED FOR SUCH PURPOSES OF	SAID COR	PORATION A	S M	AY BE
DE'	TERMINED BY ITS BOARD OF TRUSTEES OR GO	VERNING E	BODY.		
PA	RT X, LINE 2:				
TH:	E COUNCIL HAS DETERMINED THAT THERE ARE	NO MATER	RIAL		
UN	CERTAIN TAX POSITIONS THAT REQUIRE RECO	GNITION C	R DISCLOSU	JRE :	IN THE
FI	NANCIAL STATEMENTS. PERIODS ENDING SEP	TEMBER 30	), 2011 AND	) SUI	BSEQUENT
_					
RE	MAIN SUBJECT TO EXAMINATION BY APPLICAB	LE TAXING	AUTHORITI	ES.	
<b>.</b>	OH WI I THE OR OHIVE TO THE ORIGINAL THE ORI				
PA.	RT XI, LINE 2D - OTHER ADJUSTMENTS:				

### GIRL SCOUT COUNCIL OF GREATER

GIRL SCOUT COUNCIL OF GREATER	12 1624014
Schedule D (Form 990) 2013 NEW YORK, INC  Part XIII   Supplemental Information (continued)	13-1624014 Page 5
CHANGE IN VALUE OF BENEFICIAL INTEREST IN PERPETUAL TRUSTS	11,422.
RENTAL EXPENSES	290,308.
ACTUARIAL LOSSES ON ANNUITY OBLIGATIONS	-1,998.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	299,732.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
FINANCIAL ASSISTANCE	175,815.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
RENTAL EXPENSES	290,308.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
FINANCIAL ASSISTANCE	175,815.
-	

Schedule D (Form 990) 2013

#### **SCHEDULE G**

(Form 990 or 990-EZ)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to 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.

Open To Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

NEW YOR	RK, INC	ATE	ĸ		13-1624	014
Part I Fundraising Activities required to complete this part	Gomplete if the organization answert.	ered "Y	'es" to	Form 990, Part IV, li	ne 17. Form 990-EZ	filers are not
<ul> <li>1 Indicate whether the organization raise</li> <li>a X Mail solicitations</li> <li>b X Internet and email solicitations</li> <li>c Phone solicitations</li> <li>d X In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, F</li> <li>b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the</li> </ul>	e X Solicitating S	tion of tion of fundra (incluence)	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, trus fundraising services?	stees or X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundi have c or cor contrib	Did raiser ustody itrol of utions?	(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
KOSZYN & CO 41 EAST 11TH	5 YEAR CAMPAIGN STRATEGY &	Yes	No X		95,375.	890,984.
STREET, NEW YORK, NY 10003	PLANNING			986,359.	30,000	330,303.
Total  3 List all states in which the organization or licensing.		contrib	bution:	986,359. s or has been notified	95,375. d it is exempt from re	890,984. egistration
NY						

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

Schedule G (Form 990 or 990-EZ) 2013

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

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
				WOMEN OF	NONE	(add col. (a) through
				DISTINCTION		col. <b>(c)</b> )
e			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	768,631.	374,328.		1,142,959.
	2	Less: Contributions	665,131.	332,628.		997,759.
	3	Gross income (line 1 minus line 2)	103,500.	41,700.		145,200.
	4	Cash prizes				
Se	5	Noncash prizes				
xpens	6	Rent/facility costs	40,000.	20,000.		60,000.
Direct Expenses	7	Food and beverages	91,884.	32,173.		124,057.
	8	Entertainment	23,300.	14,963. 1,290.		38,263.
	9	Other direct expenses	345.	1,290.		1,635.
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)		<b>&gt;</b>	223,955.
Do	11 	Net income summary. Subtract line 10 from li		. 000 Dest IV line 10 even		-78,755.
Г	ar t i	<b>Gaming.</b> Complete if the organization a \$15,000 on Form 990-EZ, line 6a.	answered "Yes" to Form	1990, Part IV, line 19, or re	aported more than	
anu		\$13,000 0111 01111 930-LZ, ilile 0a.	(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue						
	-	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5					
		Other direct expenses			i i	
	Ť	Other direct expenses	Yes %	Yes %	Yes %	
		Other direct expenses  Volunteer labor	Yes % No	Yes% No	Yes % No	
			No No	No No	No No	
	6 7	Volunteer labor	h 5 in column (d)	No No	No <b>▶</b>	
	6 7 8	Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7	n 5 in column (d)	No No	No	
	6 7 8 Ent	Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7  ter the state(s) in which the organization opera	n 5 in column (d)  from line 1, column (d)  ttes gaming activities:	No No	No No	
а	6 7 8 Ent	Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7  ter the state(s) in which the organization operathe organization licensed to operate gaming act	No h 5 in column (d) from line 1, column (d) ttes gaming activities: ctivities in each of these	states?	No P	Yes No
а	6 7 8 Ent	Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7  ter the state(s) in which the organization opera	No h 5 in column (d) from line 1, column (d) ttes gaming activities: ctivities in each of these	states?	No P	Yes No
а	6 7 8 Ent	Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7  ter the state(s) in which the organization operathe organization licensed to operate gaming act	No h 5 in column (d) from line 1, column (d) ttes gaming activities: ctivities in each of these	states?	No P	Yes No
a b 10a	6 7 8 Entire Is to If "	Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7  ter the state(s) in which the organization operate organization licensed to operate gaming act No," explain:  ere any of the organization's gaming licenses re	No h 5 in column (d) from line 1, column (d) ttes gaming activities: ctivities in each of these services	states?	No b	
a b 10a	6 7 8 Entire Is to If "	Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7  ter the state(s) in which the organization operathe organization licensed to operate gaming action," explain:	No h 5 in column (d) from line 1, column (d) ttes gaming activities: ctivities in each of these services	states?	No b	
a b 10a	6 7 8 Entire Is to If "	Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7  ter the state(s) in which the organization operate organization licensed to operate gaming act No," explain:  ere any of the organization's gaming licenses re	No h 5 in column (d) from line 1, column (d) ttes gaming activities: ctivities in each of these services	states?	No P	

332082 09-12-13

Schedule G (Form 990 or 990-EZ) 2013

### GIRL SCOUT COUNCIL OF GREATER

Sch	edule G (Form 990 or 990-EZ) 2013 NEW YORK, INC	1624	014	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
12	Indicate the percentage of gaming activity operated in:	1		
		100		0.4
	ı The organization's facility			<u>%</u>
	An outside facility	13b		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party > \$			
_	: If "Yes," enter name and address of the third party:			
٠	on Tes, enternance and address of the tillid party.			
	Name			
	Address ►			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
	s the organization required under state law to make charitable distributions from the gaming proceeds to			
_	retain the state gaming license?		Yes	☐ No
	-	—		
K.	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
<b>D</b> -	organization's own exempt activities during the tax year > \$			
Ра	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	lines 9,	9b, 10	b, 15b,
PA	RT I, LINE 2B, COLUMN (V):			
KO	SZYN & CO WAS HIRED AS FUNDRAISING & CAMPAIGN COUNSEL TO			
100	DEIN & CO WAS HIKED AS FUNDATISING & CAMPAIGN COUNSES TO			
DE	VELOP AND GUIDE IMPLEMENTATION OF AN ANNUAL FUNDRAISING PLAN	&		
ST	RATEGY; BUILD INTERNAL DEVELOPMENT STAFF CAPACITY; DEVELOP IN	TERN	AL	
FU	NDRAISING TOOLS; DESIGN, CONDUCT, ANALYZE AND REPORT OUT ON A	CAM	PAI	GN
FE	ASIBILITY STUDY; AND DEVELOP AND EXECUTE A 5-YEAR MAJOR CAMPA	IGN		
ST	RATEGY & PLAN.			

#### **SCHEDULE I** (Form 990)

Department of the Treasury Internal Revenue Service

#### **Grants and Other Assistance to Organizations,** Governments, and Individuals in the United States

Complete if the organization answered "Yes" to 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

Schedule I (Form 990) (2013)

Name of the organization GIRL SCO NEW YORK	UT COUNCII . INC	J OF GREATER	{		-		$\begin{array}{c} \text{Employer identification number} \\ 13-1624014 \end{array}$
Part I General Information on Grants							
<ol> <li>Does the organization maintain record criteria used to award the grants or as</li> <li>Describe in Part IV the organization's presented.</li> </ol>	sistance?				•	sistance, and the selec	
Part II Grants and Other Assistance t	o Governments an	d Organizations in th	e United States.	Complete if the org	anization answered "	Yes" to Form 990, Part	IV, line 21, for any
recipient that received more that			1		(f) Method of	T	1
(a) 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
2 Enter total number of section 501(c)(3)	and government o		ne line 1 table	1	I	ı	<b>&gt;</b>
3 Enter total number of other organization							

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

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

(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	11721	0.	175,815.	FMV	WAIVER OF PROGRAM FEES
ROGRAMMATIC SCHOLARSHIPS FOR STUDENTS	1096	25,602.	19,074.	FMV	WAIVER OF PROGRAM FEES

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 OUR MEMBERSHIP (\$15) FINANCIAL ASSISTANCE, WE ASK 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, WE AUTOMATICALLY COVER THE \$15 FEE. THE MEMBERSHIP SPECIALIST

OR MANAGER PROCESS THESE REQUESTS. ALSO, IF A GIRL JOINS A PROGRAM SUCH AS

SCHOLARS OR CAMP, HER FAMILY CAN DIRECTLY REQUEST FINANCIAL ASSISTANCE IN

#### Part IV | Supplemental Information

THE CONTEXT OF THE OVERALL PROGRAM COST. THERE IS A FINANCIAL ASSISTANCE
FORM FOR SCHOLARS, CAMP AND OUR 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 WE DO 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, WE MAKE 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

OUR 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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

➤ Attach to Form 990. ➤ See separate instructions.

GIRL SCOUT COUNCIL OF GREATER

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

NEW YORK, INC

Part I Questions Regarding Compensation

Employer identification number 13-1624014

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in 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		<u> </u>
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 Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
	Receive a severance payment or change-of-control payment?	4a		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 2014 (200) and 504(204) annualizations must assume the lines 5.0			
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
-	contingent on the revenues of:  The organization?	5a		х
	The organization? Any related organization?	5b		X
b	If "Yes" to line 5a or 5b, describe in Part III.	35		
6				
U	contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
•	not described in lines 5 and 6? If "Yes," describe in Part III	7	х	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
-	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
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) 2013

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 in 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 reported as deferred
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	in prior Form 990
(1) BARBARA MURPHY-WARRINGTON (i)	170,286.	15,000.	0.	0.	10,147.	195,433.	0.
CEO (iii		0.	0.	0.	0.		0.
(i)							
(ii							
(ii							
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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

Name of the organization

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2013
Open to Public

Inspection

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:

GIRL SCOUTING BUILDS GIRLS OF COURAGE, CONFIDENCE AND CHARACTER, 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 9,000 VOLUNTEERS HELP THEM ALONG THEIR JOURNEY. WE
OFFER A WIDE RANGE OF GIRL SCOUT ACTIVITIES IN PUBLIC AND PRIVATE
SCHOOLS, PUBLIC HOUSING, AND COMMUNITY-BASED ORGANIZATIONS. AND THROUGH
OUR PROGRAMS, WE OFFER MANY PATHWAYS TO HELP GIRLS GROW INTO LEADERS.

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

11,721 GIRLS PARTICIPATED IN SUMMER ENGAGEMENTS FOCUSED ON

ENVIRONMENTAL LEADERSHIP.

NEARLY 11,000 MANAGED THEIR OWN GIRL SCOUT COOKIE BUSINESSES, SELLING OVER 1 MILLION BOXES OF COOKIES.

528 PARTICIPATED IN OUR SCIENCE, TECHNOLOGY, ENGINEERING, AND MATH

(STEM) EXPERIENCES IN 2014. THIS INCLUDES PROGRAMS THROUGH ONE-DAY

TECHBRIDGE PROGRAMS-IN-A-BOX OFFERED AT TROOP MEETINGS; AND FUNDED

EVENTS AT THE MUSESUM OF MATH AND THE NEW YORK HALL OF SCIENCE;

INITATIVES INCLUDING AN AIR CASTING PROGRAM IN COLLABORATION WITH THE

NEW YORK HALL OF SCIENCE, A COMPUTATIONAL DESIGN PROGRAM OFFERED BY THE

NEW YORK HALL OF SCIENCE, AND ROBOTICS VIA THE JUNIOR FIRST AND FIRST

LEGO LEAGUES.

316 GIRLS PARTICIPATED IN FINANCIAL LITERACY PROGRAMS THROUGH ONE-DAY

EVENTS.

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

Schedule O (Form 990 or 990-EZ) (2013)

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.

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

Employer identification number 13-1624014

#### MEMBERSHIP

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 DIRECTORS MEMBERS OF THE BOARD OF 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.

Schedule O (Form 990 or 990-EZ) (2013) Page 2 Name of the organization GIRL SCOUT COUNCIL OF GREATER **Employer identification number** NEW YORK, INC 13-1624014 AMEND THE ARTICLES OF INCORPORATION AND BYLAWS. TAKE ALL OTHER ACTION REQUIRING MEMBERSHIP VOTE. D) 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 IS DISTRIBUTED TO THE FULL BOARD PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST FORMS ARE DISTRIBUTED ANNUALLY. STAFF MEMBERS FOLLOW UP WITH BOARD MEMBERS TO ENSURE THAT ALL FORMS ARE RECEIVED. IF ANY FORMS ARE MISSING THE BOARD PRESIDENT IS INFORMED FOR APPROPRIATE FOLLOW UP. ANY CONFLICTS THAT WERE TO OCCUR WOULD BE PRESENTED TO THE AUDIT 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/IMPLEMENTATION OF COMPENSATION PROGRAM FOR THE CEO TO ENSURE THAT IT IS REASONABLE AND NOT EXCESSIVE IN LIGHT OF THE ORGANIZATION'S REVENUES, PERFORMANCE, 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

Schedule O (Form 990 or 990-EZ) (2013)

40

Name of the organization GIRL SCOUT COUNCIL OF GREATER NEW YORK, INC	Employer identification number 13-1624014
APPROPRIATE. DETERMINATION OF COMPENSATION FOR OFFICERS	OTHER THAN THE CEO
IS ESTABLISHED VIA COMPARABILITY TO EXTERNAL MARKET DATA	AND THEREAFTER
APPROVED BY THE CEO AND FINANCE COMMITTEE OF THE BOARD. T	THESE PROCESSES
WERE LAST PERFORMED DURING THE FISCAL YEAR ENDED SEPTEMBE	ER 30, 2013.
FORM 990, PART VI, SECTION C, LINE 19:	
COUNCIL'S AUDITED FINANCIALS AND FORM 990 ARE POSTED ON T	НЕ
COUNCIL'S WEBSITE, AND OTHER GOVERNING DOCUMENTS AND CONE	FLICT OF INTEREST
POLICIES ARE MADE AVAILABLE UPON REQUEST	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN BENEFICIAL INTEREST IN PERPETUAL TRUST	11,422.
ACTUARIAL LOSSES ON ANNUITY OBLIGATIONS	-1,998.
TOTAL TO FORM 990, PART XI, LINE 9	9,424.
FORM 990 PART XII LINE 2C	
THE AUDIT OVERSIGHT PROCESS HAS NOT CHANGED FROM THE PRICE	DR
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. ➤ See separate instructions.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization GIRL SCOUT CO	C CONCIL OF GREATER				En	nployer identific 13-16240		umber
Part I Identification of Disregarded Entities Comp	lete if the organization answered "Yes"	on Form 990, Part IV, line 33	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state of foreign country)	(d) or Total inco	me End-of-year		Direct co	<b>f)</b> ontrolling tity	)
Part II Identification of Related Tax-Exempt Organ organizations during the tax year.	izations Complete if the organization a	answered "Yes" on Form 990	, Part IV, line 34 bo	ecause it had one o	or more	related tax-exem	npt	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	Dire	(f) ect controlling entity	Section 5 contr enti	olled ity?
GIRL SCOUTS OF THE USA - 13-1624016	TO BUILD GIRLS' CHARACTER			( // //			res	No
420 5TH AVENUE	AND SKILLS FOR SUCCESS IN							
NEW YORK, NY 10018	THE REAL WORLD	NEW YORK	501(C)(3)	7	N/A			Х
				+			$\vdash$	

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

Schedule R (Form 990) 2013

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	l .	ortionate tions?	Code V-UBI amount in box 20 of Schedule	manag partn	Percentage ownership
		country)		sections 512-514)			Yes	No		Yes	lo
	1										
	1										
										H	
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	1										
Identification of Polated Or							I		<u> </u>		

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(t conti ent	(i) ction (b)(13) trolled tity?
		country)		or truety		400010		Yes	No
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Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No				
1	During the tax year, did the organization engage in any of the following transaction		•								
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		_X_				
b	Gift, grant, or capital contribution to related organization(s)				1b		X				
					1c	Х					
d	Loans or loan guarantees to or for related organization(s)				1d		<u>X</u>				
					1e		X				
f	Dividends from related organization(s)				1f		<u>X</u>				
g	Sale of assets to related organization(s)				1g		X				
h	Purchase of assets from related organization(s)				1h		X				
i	Exchange of assets with related organization(s)				1i		X				
j	c Gift, grant, or capital contribution from related organization(s) d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) f Dividends from related organization(s)  g Sale of assets to related organization(s) h Purchase of assets to related organization(s) p Purchase of assets from related organization(s) t Lease of facilities, equipment, or other assets to related organization(s) t Lease of facilities, equipment, or other assets from related organization(s) t Performance of services or membership or fundraising solicitations for related organization(s) t Performance of services or membership or fundraising solicitations by related organization(s) t Performance of services or membership or fundraising solicitations by related organization(s) t Performance of services or membership or fundraising solicitations by related organization(s) t Performance of services or membership or fundraising solicitations by related organization(s) t Performance of services or membership or fundraising solicitations by related organization(s) t Performance of services or membership or fundraising solicitations by related organization(s) t Performance of services or membership or fundraising solicitations by related organization(s) t Performance of services or membership or fundraising solicitations by related organization(s) t Performance of services or membership or fundraising solicitations by related organization(s) t Performance of services or membership or fundraising solicitations by related organization(s) t Performance of services or membership or fundraising solicitations by related organization(s) t Performance of services or membership or fundraising solicitations by related organization(s) t Performance of services or membership or fundraising solicitations by related organization(s) t Performance of services or membership or fundraising solicitations to related organization(s) t Performance of services or membership or fundraising solicitations to related or										
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X				
					11	Х					
	Performance of services or membership or fundraising solicitations for related organization(s)  • Performance of services or membership or fundraising solicitations by related organization(s)										
n	Sharing of facilities, equipment, mailing lists, or other assets with related organizati	on(s)			1n		X				
					10		X				
	3 ( )										
g	Reimbursement paid to related organization(s) for expenses				1p		X				
a	Reimbursement paid by related organization(s) for expenses						X				
·					·						
r	Other transfer of cash or property to related organization(s)				1r	Х					
					1s		X				
	(a)	(b) Transaction	(c)	(d)	olved						
(1)											
(2)											
• /											
(3)											
` '											
(4)											
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(5)											
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(6)											
	2.00.40.40	4.4		Sahadula P	/Earn	2 000)	2012				

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

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

(a)  Name, address, and EIN  of entity	(b) Primary activity	(c)	(e)	(f) Share of total income	(g) Share of end-of-year assets	(h Dispro tion allocati	por- ite ons?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag partne	(k) Percentage ing ownership

332165 09-12-13

FORM 990 PAGE 10

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
		VARIES	5	.000	16	115,654.			115,654.			0.
26	BLDG & BLDG IMPROVEMENTS LEASEHOLD	VARIES	SL	.000	16	1,667,134.			1,667,134.	1,477,975.		41,112.
27		VARIES	SL	.000	16	350,337.			350,337.	192,946.		111,096.
28	EQUIPMENT	VARIES	SL	.000	16	1,064,116.			1,064,116.	752,366.		49,558.
29		VARIES	3	.000	16	233,390.			233,390.			0.
	* TOTAL 990 PAGE 10 DEPR					3,430,631.		0.	3,430,631.	2,423,287.	0.	201,766.
		Ш										