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

Inspection

A F	or the	2023 calendar year, or tax year beginning $OCT 1, 2023$ and en	ding $S$	<u>EP 30, 2024</u>		
	heck if	C Name of organization		D Employer identifie	cation number	
	Addres	GIRL SCOUTS OF COLORADO				
	Name change	Doing business as	84-0410630			
	Initial return Final return/	Number and street (or P.O. box if mail is not delivered to street address)  1485 S COLORADO BLVD STE 210	E Telephone number (303) 60			
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	42,142,393.	
	Ameno return	DENVER, CO 80222		H(a) Is this a group re	eturn	
	Application	F Name and address of principal officer: LEANNA CLARK	for subordinates	? Yes X No		
	pendin	SAME AS C ABOVE		<b>H(b)</b> Are all subordinates in	cluded? Yes No	
<u> </u>	ax-exe	empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or [	527	If "No," attach a	list. See instructions	
	Vebsit			H(c) Group exemptio		
		organization: X Corporation Trust Association Other  Summary	L Year o	of formation: 1937  N	M State of legal domicile; CO	
	1	Briefly describe the organization's mission or most significant activities: $ { t GIRL } { t S}$	COUT	S OF COLORAI	OO PREPARES	
Governance		GIRLS AND ADULTS TO CREATE UNIQUE LEADERSH	IP PA	THS, IGNITE	CHANGE,	
rna	2	Check this box if the organization discontinued its operations or disposed	of more	than 25% of its net ass		
ove				3	22	
& G		Number of independent voting members of the governing body (Part VI, line 1b)			22	
Activities &		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			325	
ivit		Total number of volunteers (estimate if necessary)			6116	
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.	
_	D	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>	7b	Current Year	
	8	Contributions and grants (Part VIII, line 1h)		1,526,849.	1,582,538.	
nιe		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		1,535,872.	1,348,561.	
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		694,227.	718,525.	
R		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		12,876,956.	12,751,347.	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		16,633,904.	16,400,971.	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		376,341.	427,855.	
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.	
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		10,023,097.	10,897,873.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.	
xbe		Total fundraising expenses (Part IX, column (D), line 25) 847,694	_			
Ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,650,649.		
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		16,050,087.	16,865,703.	
	19	Revenue less expenses. Subtract line 18 from line 12		583,817.	-464,732.	
Net Assets or Fund Balances		T. I. (D. I.V.). 40)		ginning of Current Year 40,381,221.	End of Year	
sse. Bala	20	Total assets (Part X, line 16)		3,980,571.	43,456,324. 3,777,047.	
let /	21	Total liabilities (Part X, line 26)  Net assets or fund balances. Subtract line 21 from line 20		36,400,650.	39,679,277.	
Pa	rt II	Signature Block		30,400,030.	33,013,211.	
		lties of perjury, I declare that I have examined this return, including accompanying schedules an	nd stateme	nts, and to the best of my	knowledge and belief, it is	
		t, and complete. Declaration of preparer (other than officer) is based on all information of which			3	
Sigr	1	Signature of officer		Date	_	
Her		DONNELL HEISTAND, COO				
		Type or print name and title				
		Print/Type preparer's name Preparer's signature		Pate Check C	PTIN	
Paid		KIMBERLY A RYAN		self-employ		
Prep		Firm's name RUBINBROWN LLP		Firm's EIN 4	3-0765316	
Use	UNIY	Firm's address 1900 16TH STREET, SUITE 1700		Diam 20	2_600 1002	
N 4	44 - 17	DENVER, CO 80202		Phone no. 3 U	3-698-1883	
way	tne IF	S discuss this return with the preparer shown above? See instructions			X Yes No	

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	GIRL SCOUTS OF COLORADO PREPARES GIRLS AND ADULTS TO CREATE UNIQUE
	LEADERSHIP PATHS, IGNITE CHANGE, AND SHARE A WORLDWIDE SISTERHOOD
	THROUGH TRADITIONS AND NEW EXPERIENCES. GIRL SCOUTS BUILDS GIRLS OF
	COURAGE, CONFIDENCE, AND CHARACTER, WHO MAKE THE WORLD A BETTER PLACE.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$10,209,643. including grants of \$427,855. ) (Revenue \$\$
	AT GIRL SCOUTS, WE ENVISION A WORLD WHERE GIRLS ARE CONFIDENT,
	UNDERSTAND THEIR WORTH, AND HAVE THE SKILLS TO THRIVE. EVERY BADGE OR
	PATCH THEY EARN; EACH OUTDOOR ADVENTURE, ENTREPRENEURIAL EXPERIENCE,
	AND TAKE ACTION PROJECT LEADS THEM TO DISCOVER THEIR INTERESTS, BUILDS
	THEIR SELF-CONFIDENCE, AND BECOME AGENTS OF CHANGE. GIRL SCOUTS ARE
	LIFE-READY - FOR TODAY AND TOMORROW. (CONTINUED ON SCHEDULE O)
	2 102 551
4b	(Code: ) (Expenses \$ 3,183,551. including grants of \$ 0. ) (Revenue \$ 1,348,561.
	PROGRAMS:
	IN ADDITION TO PARTICIPATING IN ACTIVITIES WITH THEIR TROOP, MORE THAN
	6,500 GIRL SCOUTS ATTENDED STAFF-LED OR PARTNER-LED PROGRAMMING AT 87
	EVENTS ACROSS THE STATE. IN ADDITION, GIRL SCOUTS OF COLORADO PARTNERED
	WITH FUNDERS ON 27 IN-PERSON EVENTS AND 18 VIRTUAL EVENTS, REACHING
	MORE THAN 1,550 GIRL SCOUTS. MORE THAN 1,800 SKILL-BUILDING PATCHES
	WERE EARNED BY YOUTH MEMBERS PARTICIPATING IN PARTNER-FUNDED
	PROGRAMMING. (CONTINUED ON SCHEDULE O)
40	(Code:) (Expenses \$ 0 _ including grants of \$ 0 _ ) (Revenue \$ 12 , 847 , 312 .
	ENTREPRENEURSHIP:
	THROUGH PRODUCT PROGRAMS, MORE THAN 10,000 GIRL SCOUTS FLEXED THEIR
	ENTREPRENEURIAL MUSCLES AND RAN THEIR OWN BUSINESSES, BRINGING IN MORE
	THAN \$3.4 MILLION IN TROOP PROCEEDS TO FUND THEIR NEXT GIRL SCOUT
	ADVENTURES AND SERVICE PROJECTS. IN ADDITION, THESE GIRL SCOUTS SOLD
	MORE THAN 140,000 PACKAGES OF COOKIES TO BE DONATED TO THEIR HOMETOWN
	HEROES, ORGANIZATIONS SUCH AS FIRE DEPARTMENTS, FOOD PANTRIES, AND
	ANIMAL SHELTERS. THE FALL PRODUCT PROGRAM ALSO SAW MORE THAN 3,000 GIRL
	SCOUTS PARTICIPATING AND BROUGHT IN MORE THAN \$1.1 MILLION IN TOTAL
	SALES.
_	
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 0 • including grants of \$ 0 •) (Revenue \$ 0 •)
4e	Total program service expenses 13,393,194.
	Total program service expenses

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# Form 990 (2023) GIRL SCOUTS OF COLORADO Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	۳		
Ŭ	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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	<b>-</b>		
0	, ,			х
^	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
	If "Yes," complete Schedule D, Part IV	9_		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		37	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	_X_	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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. See instructions	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,"	"		
.9	·	19		х
20-	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
20a		20a 20b		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21		ا ہے ا		х
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		Λ

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Form 990 (2	2023) Checklist of		SCOUTS		
Part IV	Checklist of	r Keguirea	Scheaules	(cont	tinued)

			V	N.
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
	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
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
,	Schedule L, Part I	25b		<u> </u>
	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			,
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			<sub></sub> -
	entity (including an employee thereof) or family member of any of these persons? If "Yes, " complete Schedule L, Part III	27		X
	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			<sub>v</sub>
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	000		x
	"Yes," complete Schedule L, Part IV	28c 29		X
	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		
	contributions? If "Yes," complete Schedule M	30		x
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
	Did the organization riquidate, terminate, or dissolve and cease operations: If Yes, "complete Schedule N, Part I	"		<del></del>
	Schedule N, Part II	32		X
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	$oxed{oxed}$
Part				
	Check if Schedule O contains a response or note to any line in this Part V			Ш
			Yes	No
4 -	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	_		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	4		
b c	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1c		

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023) GIRL SCOUTS OF COLORADO

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		X					
С	, , , , , , , , , , , , , , , , , , , ,								
6a									
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	OI.							
-	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).	7-	X						
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	- 22						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		x					
d		70		22					
e		7e		Х					
f									
g g									
h									
8									
	sponsoring organization have excess business holdings at any time during the year?								
9									
а									
b									
10									
а	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
_	organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  13b								
с 14а		14a		Х					
		14b							
15	b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O  15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		x					
	If "Yes," see the instructions and file Form 4720, Schedule N.	.0							
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?									
-	If "Yes," complete Form 4720, Schedule O.	16		X					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		L					
	If "Yes," complete Form 6069.								

332005 12-21-23

GIRL SCOUTS OF COLORADO 84-0410630 Form 990 (2023) 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 on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 22 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 22 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors, trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Х 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Х b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Х 14 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

### Section C. Disclosure

exempt status with respect to such arrangements?

17	List the states with which a copy of this Form 990 is required to be filed NONE								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available								
	for public inspection. Indicate how you made these available. Check all that apply.								
	X Own website Another's website X Upon request Other (explain on Schedule O)								
19	Describe on Schedule Q whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial								

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

taxable entity during the year?

**b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's

State the name, address, and telephone number of the person who possesses the organization's books and records DONNELL HEISTAND - 303-607-4888

1485 S COLORADO BLVD STE 210, DENVER, CO 80222

Form **990** (2023)

X

16a

16h

# 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 the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	box	not cl	Posi heck i ss per	ition more rson is	than o	n 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/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) LEANNA CLARK	40.00			37				220 414	0	26 620
CHIEF EXECUTIVE OFFICER (2) DONNELL HEISTAND	40.00			Х				230,414.	0.	26,630.
(2) DONNELL HEISTAND CHIEF OPERATING OFFICER	40.00			х				172 000	0.	12 /62
(3) ROSEMARIE T. ADAMS-GROTE	40.00			Λ				172,800.	0.	13,463.
CONTROLLER	40.00					x		119,553.	0.	13,219.
(4) MICHELLE BLACKWELL BOOT	40.00					^		117,555.	0.	15,215.
CHIEF HR OFFICER (THRU 8/24)	40.00			х				93,291.	0.	34,763.
(5) MARTHA S. JOHNSON	40.00							33,231.		3177031
CHIEF DEVEL. OFFICER (THRU 7/24)				х				90,691.	0.	37,174.
(6) LINDSAY C. STANDISH	40.00							50,00=1		. , ,
CHIEF RISK MANAGEMENT OFFICER						x		102,724.	0.	24,908.
(7) KRISTIN HAMM	40.00									-
CHIEF MARKETING OFFICER				Х				101,967.	0.	24,193.
(8) RYCHELLE T. ARNOLD	40.00									
CHIEF PRODUCT PROGRAM OFFICER						X		104,850.	0.	16,526.
(9) HEIDI R. VIELHABER	40.00									
CHIEF OUTDOOR PROG. & PROP. OFFICER						X		103,192.	0.	12,924.
(10) KATHRYN SINGLETON	40.00								_	
CHIEF MEMBERSHIP AND PROGRAM OFFICER						X		101,077.	0.	2,081.
(11) MELISSA SISNEROS	40.00							22.25		
CHIEF PEOPLE AND CULTURE OFFICER	40.00			Х				33,265.	0.	0.
(12) JANET MCFARLAND	40.00			.,					0	0
CHIEF DEVEL. OFFICER (BEG. 8/24)	F 00			Х				0.	0.	0.
(13) CHERIE AXELROD	5.00	37		7.7					0	0
CHAIR OF BOARD GOV. (BEG. 10/24)	5.00	Х		Х				0.	0.	0.
(14) CHRISTY BELZ CO-CHAIR OF PHILANTHROPY COMMITTEE	3.00	Х		х				0.	0.	0
(15) CAROLINE CORNELL	10.00	Λ		Δ				0.	0.	0.
CHAIRPERSON OF THE BOARD	10.00	Х		х				0.	0.	0.
(16) CRYSTAL EUSTIS	5.00								<b>.</b> .	•
CHAIRPERSON OF AUDIT	3.00	х		х				0.	0.	0.
(17) VICTORIA GIGOUX	5.00	<del></del>		<u> </u>					J •	<u>·</u>
CHAIRPERSON OF MCC		Х		х				0.	0.	0.
332007 12-21-23	1				-				•	Form <b>990</b> (2023)

332007 12-21-23

Form 990 (2023) GIRL SCO	UTS OF C	OL	OR	AD	0				84-0410	630 Page <b>8</b>
Part VII Section A. Officers, Directors, Trus	stees, Key Em	oloye	ees,	and	Hiç	ghes	t Co	ompensated Employee	s (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Posi		l than d	one	Reportable	Reportable	Estimated
	hours per	box,	, unles	ss per	son i	s both	an	compensation	compensation	amount of
	week (list any		Jei ali	u a u	recto	i / ii us	(66)	from	from related	other 
	hours for	irecto						the	organizations (W-2/1099-MISC/	compensation from the
	related	e or d	tee			sated		organization (W-2/1099-MISC/	1099-NEC)	organization
	organizations	ndividual trustee or director	nstitutional trustee		99	npen		1099-NEC)	1099-1420)	and related
	below	dual t	rtio na	L	nploy	st col	<b>.</b>	10001120)		organizations
	line)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Former			3
(18) CHRISTINA GUNN	5.00									
CHAIR OF BOARD GOV. (THRU 7/24)		Х		Х				0.	0.	0.
(19) HAYLEY HARRIS	5.00									
CO-CHAIR OF IDEATION COMMITTEE		X		Х				0.	0.	0.
(20) GENIA HERNDON	5.00									
CHAIRPERSON OF YPC		Х		Х				0.	0.	0.
(21) MAUREEN MCDONALD	5.00									
CO-CHAIR OF PHILANTHROPY COMMITTEE		X		Х				0.	0.	0.
(22) KELLI OGUNSANYA	5.00									
CO-CHAIR OF IDEATION COMMITTEE		Х		Х				0.	0.	0.
(23) ANGELA ROBERTS, CPA	5.00									
TREASURER		Х		Х				0.	0.	0.
(24) DIANE SCOTT	5.00									
SECRETARY		X		Х				0.	0.	0.
(25) CARRIE WALTERS	5.00									
VICE CHAIRPERSON		Х		Х				0.	0.	0.
(26) JEFF DETRA	3.00									
DIRECTOR (THRU 7/24)		Х						0.	0.	0.
1b Subtotal							-	1,253,824.	0.	205,881.
c Total from continuation sheets to Part V								0.	0.	0.
d Total (add lines 1b and 1c)								1,253,824.	0.	205,881.
2 Total number of individuals (including but r	act limited to th	000	licto	dah	01/0	\ wh	0 10	caived more than \$100	000 of roportable	

compensation from the organization

Yes Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X rendered to the organization? If "Yes." complete Schedule J for such person

#### **Section B. Independent Contractors**

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

(A) Name and business address  Z POE HOME IMPROVEMENTS 19484 SILVER RANCH ROAD, CONIFER, CO 80433 CONSTRUCTION  585,775.			
		33 CONSTRUCTION	585,775.

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

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2023)

10

00			84-041	0630
nd Highe	est (	Compensated Employe	ees (continued)	
(C)		(D)	(E)	(F)
sition		Reportable	Reportable	Estimated
that apply	y)	compensation	compensation	amount of
ПП		from	from related	other
) yee		the	organizations	compensation
em pl		organization	(W-2/1099-MISC)	from the
sated		(W-2/1099-MISC)		organization
n pen:				and related organizations
mplo,	<u>_</u>			Organizations
Key employee Highest compensated employee	Former			
		0.	0.	0.
		0.	0.	0.
		0.	0.	0.
			_	_
$\sqcup \sqcup$		0.	0.	0.
+++		0.	0.	0.
			0.	_
+++		0.	0.	0.
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+ + +	—	0.	0.	· ·
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	_			

Part VIII	Statement of Rever	าน
Form 990 (2023)	GIRL	S

		Check if Schedule O contains a res	sponse (	or note to any line	e in this Part VIII			
					(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
						function revenue	business revenue	sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	a Federated campaigns1	<u>a</u>	14,544.				
ant		b Membership dues1		,				
S S		c Fundraising events1	_	416,607.				
fts,		d Related organizations1		120,007.				
ij gi			1	75,108.				
ons,		e Government grants (contributions)	e	73,100.				
utio er (		f All other contributions, gifts, grants, and	_	1 076 270				
Ĕ		similar amounts not included above 1		1,076,279.				
ont		<del>-</del>	g  \$	15,604.	1 500 530			
O g		h Total. Add lines 1a-1f		B	1,582,538.			
		ave ve program arrivar arr		Business Code	1 240 561	1 240 561		
ce	2	a CAMP AND PROGRAM SERVICE FEE		900099	1,348,561.	1,348,561.		
ervi	ı	b						
S		c						
ran Sev		d						
Program Service Revenue	(	e						
<u>a</u>	1	f All other program service revenue						
		g Total. Add lines 2a-2f			1,348,561.			
	3	Investment income (including dividend	s, intere	st, and				
		other similar amounts)			698,279.			698,279.
	4	Income from investment of tax-exempt						
	5	Royalties						
		(i) F	leal	(ii) Personal				
	6	a Gross rents 6a	7,400.					
		b Less: rental expenses 6b	0.					
			7,400.					
		d Net rental income or (loss)			7,400.			7,400.
		a Gross amount from sales of (i) Sec		(ii) Other				
		assets other than inventory <b>7a</b> 15,809	5,522.	20,089.				
		b Less: cost or other basis						
<u>e</u>		and sales expenses 7b 15,80	5,365.	0.				
en.		c Gain or (loss) 7c	157.	20,089.				
ev		d Net gain or (loss)		,	20,246.			20,246.
her Revenue		a Gross income from fundraising events (not			,			,
Ğ.		including \$ 416,607.	- 1					
		contributions reported on line 1c). See	- 1					
		Part IV, line 18	- 1	80,460.				
		b Less: direct expenses						
		c Net income or (loss) from fundraising e		'	-103,365.			-103,365.
		a Gross income from gaming activities. S						
	9	Part IV, line 19	- 1					
		b Less: direct expenses						
		c Net income or (loss) from gaming activ						
	10	a Gross sales of inventory, less returns	40-	22 500 544				
		and allowances	···	22,599,544. 9,752,232.				
		b Less: cost of goods sold			10 047 210	12047212		
$\overline{}$	- 1	Net income or (loss) from sales of inver	ntory		12,847,312.	12847312.		
જ				Business Code				
eor re	11							
Miscellaneous Revenue		b						
Se.		C						
Ξ		d All other revenue						
		e Total. Add lines 11a-11d			16 100 07:	44405055		600 550
	12	Total revenue. See instructions			16,400,971.	14195873.	0.	622,560.

332009 12-21-23

# Form 990 (2023) GIRL SCOUTS OF COLORADO Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4	l) organizations must com	iplete all columns. All other oi	ganizations must complete column (A).

_	Check if Schedule O contains a respon	(A)		(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	427,855.	427,855.		
3	Grants and other assistance to foreign	,	,		
_	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees	933,792.	118,857.	698,915.	116,020
6	Compensation not included above to disqualified	•	,	•	•
_	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	7,827,587.	7,099,771.	291,888.	435,928
8	Pension plan accruals and contributions (include	, , , , , ,	, ,	- ,	,
-	section 401(k) and 403(b) employer contributions)	75,043.	64,431.	6,774.	3,838
9	Other employee benefits	1,346,429.	64,431. 1,096,875.	6,774.	3,838 62,494
10	Payroll taxes	715,022.	571,910.	103,707.	39,405
11	Fees for services (nonemployees):	,	,		
 а	Management				
b	Legal	1,239.		1,239.	
c	Accounting	79,283.	75.	79,208.	
d	Lobbying	,	, , ,	,=001	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	61,281.		61,281.	
	Other. (If line 11g amount exceeds 10% of line 25,	V= / = V = V		0=7=0=1	
9	column (A), amount, list line 11g expenses on Sch 0.)	368,264.	203,190.	115,149.	49,925
12	Advertising and promotion	91,171.	59,090.	18,997.	13,084
13	Office expenses	1,255,559.	1,085,560.	145,106.	24,893
14	Information technology	155,607.	97,291.	52,643.	5,673
15	Royalties		. , ,	0=/0=00	- 7
16	Occupancy	886,652.	840,943.	45,709.	
17	Travel	320,547.	284,588.	16,155.	19,804
17 18	Payments of travel or entertainment expenses	020,027			
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,224.	137.	5,863.	224
19 20		· , 22 ·		3,303.	221
20 21	Payments to affiliates				
21 22	Depreciation, depletion, and amortization	583,190.	501,859.	57,484.	23,847
23	I	381,459.	328,262.	37,598.	15,599
24	Other expenses. Itemize expenses not covered		,=	, , , , ,	-,
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	GSUSA PENSION OBLIGATIO	519,499.		519,499.	
b	BANKING / CREDIT CARD	370,233.	307,148.	32,011.	31,074
c	EMPLOYEE EXPENSES	255,965.	143,179.	110,563.	2,223
d	DUES / FEES	115,603.	85,377.	26,563.	3,663
	All other expenses	88,199.	76,796.	11,403.	2,200
25	Total functional expenses. Add lines 1 through 24e	16,865,703.	13,393,194.	2,624,815.	847,694
<u>26</u>	Joint costs. Complete this line only if the organization	.,,	-,,	-,,	,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Sassanonai sampaign and randraising sonoitation.				

Form 990 (2023)

Part X | Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or note	to any	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	2,592,509.	1	4,646,439.		
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net			110,500.	3	152,568.
	4	Accounts receivable, net			97,685.	4	0.
	5	Loans and other receivables from any current or f					
		trustee, key employee, creator or founder, substa	ntial c	ontributor, or 35%			
		controlled entity or family member of any of these	perso	ons		5	
	6	Loans and other receivables from other disqualified	ed per	sons (as defined			
		under section 4958(f)(1)), and persons described	in sect	tion 4958(c)(3)(B)		6	
ι	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			251,836.	8	290,808.
ğ	9	B			256,040.	9	338,631.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D  Less: accumulated depreciation	10a	12,926,306.			
	b				5,576,189.	10c	5,823,711. 7,704,120.
	11	Investments - publicly traded securities			10,392,909.	11	7,704,120.
	12	Investments - other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 1				13	
	14	Intangible assets			04 400 550	14	04 500 045
	15	Other assets. See Part IV, line 11			21,103,553.	15	24,500,047.
	16	Total assets. Add lines 1 through 15 (must equal			40,381,221.	16	43,456,324.
	17	Accounts payable and accrued expenses			2,004,040.	17	1,804,034.
	18	Grants payable			200 010	18	(27 7(2
	19	Deferred revenue			380,019.	19	637,763.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete P				21	
es	22	Loans and other payables to any current or forme					
Liabilities		trustee, key employee, creator or founder, substa				00	
E.		controlled entity or family member of any of these		22			
	23 24	Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay				24	
	23	parties, and other liabilities not included on lines					
		of Schedule D			1,596,512.	25	1,335,250.
	26	T. 12. 12. 1.05			3,980,571.	26	3,777,047.
		Organizations that follow FASB ASC 958, chec			7,20,70,10,10		
es		and complete lines 27, 28, 32, and 33.					
anc	27	, , ,			34,911,988.	27	37,830,848.
Bala	28				1,488,662.	28	1,848,429.
pu		Organizations that do not follow FASB ASC 95					
Ψ		and complete lines 29 through 33.					
, o	29	Capital stock or trust principal, or current funds				29	
sets	30	Paid-in or capital surplus, or land, building, or equ				30	
As	31	Retained earnings, endowment, accumulated inc				31	
Net Assets or Fund Balances	32				36,400,650.	32	39,679,277.
_	33				40,381,221.	33	43,456,324.

Par	t 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	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 32, 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 on Schedule O)	1 2 3 4 5 6 7 8	16,40 16,86 -46 36,40	0,9 5,7 4,7 0,6 6,3	03. 32. 50. 42.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		20 67	0 0	77
Dai	column (B)) rt XIII Financial Statements and Reporting	10	39,67	9,2	//•
Гаі					X
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.	-		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis	on a	2a	X	Х
b	b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain on Sche		2c	Х	
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?  If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required.		3a		X
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	<b>990</b>	(2023)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

# **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.

Open to Public

**Employer identification number** 

OMB No. 1545-0047

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

Inspection

GIRL SCOUTS OF COLORADO 84-0410630 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 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.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

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

Sec	ction A. Public Support		•	-			
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ,	,,	. ,	,,	7,
	membership fees received. (Do not						
	include any "unusual grants.")	852,980.	3320282.	6088293.	1526849.	1582538.	13370942.
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	852,980.	3320282.	6088293.	1526849.	1582538.	13370942.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						13370942.
	ction B. Total Support	T T			<u> </u>		T
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	852,980.	3320282.	6088293.	1526849.	1582538.	13370942.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	44 104	14 007	20 700	446 360	705 670	1040170
	and income from similar sources	44,124.	14,227.	38,780.	446,360.	705,679.	1249170.
9	Net income from unrelated business						
	activities, whether or not the			10 15/			10 154
	business is regularly carried on			10,154.			10,154.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						14630266.
	<b>Total support.</b> Add lines 7 through 10						,272,716.
	Gross receipts from related activities, First 5 years. If the Form 990 is for the			iourth or fifth toy v			, 2 / 2 , / 1 0 •
13	organization, check this box and stop	-		· · · · · · · · · · · · · · · · · · ·			
Sec	ction C. Computation of Publi			• • • • • • • • • • • • • • • • • • • •			
	Public support percentage for 2023 (I			column (f))		14	91.39 %
	Public support percentage from 2022	, ,,,	•	.,,		15	95.64 %
	6a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b	b 33 1/3% support test - 2022. 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 <b>stop here.</b> The organization qual	•		•		•	
17a							
	7a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization						
	meets the facts-and-circumstances te					3	
b	10% -facts-and-circumstances test	-	•	*	-	7a, and line 15 is	10% or
	more, and if the organization meets the	•				•	
	organization meets the facts-and-circu				-		
18	<b>.</b>		-		• • •		s
						Schedule A	(Form 990) 2023

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	ļ					
	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	ļ					
	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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6 Gross income from interest,						
IUa	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired ofter June 20, 1075						
,	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part VI.)  Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the	ne organization's fir	rst. second. third. 1	ourth, or fifth tax	vear as a section 5	01(c)(3) organizatio	on.
	check this box and stop here			· · · · · · · · · · · · · · · · · · ·			
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2023 (I	ine 8, column (f), d	ivided by line 13, o	column (f))		15	%
	Public support percentage from 2022					16	%
Se	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20	<b>)23</b> (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2023. If the	organization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	organization qualit	fies as a publicly s	upported organiza	tion	
b	33 1/3% support tests - 2022. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%, a	nd
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	is box and see ins	tructions	

332023 12-21-23 Schedule A (Form 990) 2023

## Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

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

  If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Par	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has t	the organization accepted a gift or contribution from any of the following persons?			
а	A per	rson who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c k	below, the governing body of a supported organization?	11a		
b	A fan	nily member of a person described on line 11a above?	11b		
С	A 359	% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detai	il in Part VI.	11c		
Sect	ion	B. Type I Supporting Organizations			
				Yes	No
1	Did tl	he governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
		e supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		etors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) etively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		nization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
		orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did tl	he organization operate for the benefit of any supported organization other than the supported			
	orgar	nization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
_	supe	rvised, or controlled the supporting organization.	2		
Sect	ion	C. Type II Supporting Organizations			
				Yes	No
1	Were	e a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or tru	ustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or ma	anagement of the supporting organization was vested in the same persons that controlled or managed			
	the s	upported organization(s).	1		
Sect	ion	D. All Type III Supporting Organizations			
				Yes	No
1	Did tl	he organization provide to each of its supported organizations, by the last day of the fifth month of the			
	orgar	nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year,	(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	orgar	nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
		e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	orgar	nization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By re	eason of the relationship described on line 2, above, did the organization's supported organizations have a			
	-	ficant voice in the organization's investment policies and in directing the use of the organization's			
	incor	me or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
C1		orted organizations played in this regard. E. Type III Functionally Integrated Supporting Organizations	3		
Seci		7			
1	Chec	ck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	A - 4:	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	truction		NI -
2		rities Test. Answer lines 2a and 2b below.		Yes	No
		substantially all of the organization's activities during the tax year directly further the exempt purposes of			
		supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
		e supported organizations and explain how these activities directly furthered their exempt purposes,			
		the organization was responsive to those supported organizations, and how the organization determined	2a		
h		these activities constituted substantially all of its activities.  he activities described on line 2a, above, constitute activities that, but for the organization's involvement,	<u> </u>		
		or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	_	VI the reasons for the organization's position that its supported organization(s) would have engaged in			
		e activities but for the organization's involvement.	2b		
		nt of Supported Organizations. <b>Answer lines 3a and 3b below.</b>			
		he organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		ees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	За		
		he organization exercise a substantial degree of direction over the policies, programs, and activities of each			
_		supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		
_			_		_

	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orgar	nizations	1 0110000 rage 0
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on	Nov. 20, 1970 ( explain in 1	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus		·	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7_	Other expenses (see instructions)	7		
_8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3_	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5_	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 0.035.	6		
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
_4_	Enter greater of line 2 or line 3.	4		
_5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrat	ed Type III supporting orga	nization (see
	instructions).			

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

e Excess from 2023

332028 12-21-23 Schedule A (Form 990) 2023

# Schedule B

(Form 990)

Attach to Form 990, 990-EZ, or 990-PF. Department of the Treasury Internal Revenue Service

OMB No. 1545-0047

Name of the organization

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

**Schedule of Contributors** 

Employer identification number

G	IRL SCOUTS OF COLORADO	84-0410630					
Organization type (check	one):						
Filers of:	Section:						
Form 990 or 990-EZ	$\overline{X}$ 501(c)( $\overline{3}$ ) (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						
Note: Only a section 501(c	is covered by the <b>General Rule</b> or a <b>Special Rule.</b> )(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.					
General Rule							
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling y one contributor. Complete Parts I and II. See instructions for determining a contributor's						
Special Rules							
sections 509(a)(1) contributor, during	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and g the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) FZ, line 1. Complete Parts I and II.	d that received from any one					
contributor, during literary, or educat	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
year, contribution is checked, enter purpose. Don't co	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year\$						
answer "No" on Part IV, line	hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For e 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, ag requirements of Schedule B (Form 990).	• •					

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

# GIRL SCOUTS OF COLORADO

84-0410630

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$50,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 45,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Name, address, and Zir + +	\$34,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	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.)

Schedule B (Form 990) (2023)

Name of organization Employer identification number

# GIRL SCOUTS OF COLORADO

84-0410630

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional additional copies of Part I if additional copi	itional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$50,000 <b>.</b>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupate Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash 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 Oncash Complete Part II for noncash contributions.)

Page 3

Name of organization Employer identification number

# GIRL SCOUTS OF COLORADO

84-0410630

Part II	Noncash Property (see instructions). Use duplicate copies of Part I	I 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
323453 12-26	00		Schedule B (Form 990) (2023)

Page 4

Schedule B (Form 990) (2023) Name of organization **Employer identification number** GIRL SCOUTS OF COLORADO 84-0410630 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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 info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 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" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

GIRL SCOUTS OF COLORADO

**Employer identification number** 84-0410630

Pai			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at and of year	(a) Bonor advised funds	(b) i dilas ana otner accounts
2	Total number at end of year		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
_	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation of	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included on line 2c acqu		
_	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	e organization during the tax
	year	and the land of	
4	Number of states where property subject to conservation eas	•	
5	Does the organization have a written policy regarding the per violations, and enforcement of the conservation easements in		
6	Staff and volunteer hours devoted to monitoring, inspecting,		
Ū	ctan and relations made develop to memoring, inspecting,	Thanking or violations, and officioning con-	oor valien eacomonic daring the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easements during the year
	3, 1, 3,	3	3
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170(l	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense	e statement and
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statem	ents that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections of		ther Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in f	urtherance of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these iter	ns.
b	If the organization elected, as permitted under FASB ASC 95	•	
	art, historical treasures, or other similar assets held for public	e exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre		al gain, provide
	the following amounts required to be reported under FASB A		•
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instructions	5 IUI FUIIII 99U.	Schedule D (Form 990) 2023

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

Par	rt III Organizations Maintaining (	Collections of Art	, Historical Tre	asures, or Oth	er Sim	ilar Asset	s (conti	nued)	
3	Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its								
	collection items (check all that apply).								
а	Public exhibition	d	Loan or exch	nange program					
b									
С	Preservation for future generations								
4	Provide a description of the organization's of	collections and explain	how they further th	e organization's exe	empt pu	rpose in Part	XIII.		
5	During the year, did the organization solicit	or receive donations of	f art, historical treas	ures, or other simila	ar assets	6			
	to be sold to raise funds rather than to be n						Yes		No
Par	rt IV Escrow and Custodial Arrar	ngements Complet	e if the organization	answered "Yes" or	n Form 9	90, Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa	art X, line 21.							
1a	Is the organization an agent, trustee, custoo	dian, or other intermed	iary for contribution	s or other assets no	t includ	ed	_		_
	on Form 990, Part X?					L	Yes		No
b	If "Yes," explain the arrangement in Part XII	I and complete the foll	owing table:		_				
							Amoun	nt	
С	Beginning balance				1	С			
d	Additions during the year					d			
е	<b>3</b> ,				_1	е			
f	Ending balance					lf			
	Did the organization include an amount on				oility?	L	Yes		_ No
	If "Yes," explain the arrangement in Part XII								
Par	rt V Endowment Funds Complete						1,,,,		<del></del>
		(a) Current year	(b) Prior year	(c) Two years back	+	ree years back			
1a	0 0 ,	887,653.	848,244.	1,007,664.	+	873,990.			746.
b									
С	Net investment earnings, gains, and losses	164,400.	68,469.	-139,800.		138,954.		54,	297.
d	1						-		
е	Other expenditures for facilities	1,,,,,,	22.224			10 150			
	and programs		30,834.	49,149.		19,450.	-	27,	541.
f			005 653	040 044	1	1 005 664		0.7.2	
g		1,045,269.	887,653.	848,244.		1,007,664.		8/3,	990.
2	Provide the estimated percentage of the cu			) held as:					
а	<u> </u>	.0000	_%						
b	00 0000	%							
С	-								
0 -	The percentages on lines 2a, 2b, and 2c sh	•	Para dia akama in alah ara	al a destatata a de la constata del constata del constata de la constata del constata del constata de la constata de la constata del constata del constata del constata del constata del constata de la constata del constata del constata del constat	u				
Зa	Are there endowment funds not in the poss	ession of the organiza	tion that are neid an	a administered for	ine			Yes	No
	organization by:						3a(i)	X	110
	<ul><li>(i) Unrelated organizations?</li><li>(ii) Related organizations?</li></ul>							21	Х
h	If "Yes" on line 3a(ii), are the related organiz	rations listed as requir							
4	Describe in Part XIII the intended uses of th						. 30		
	rt VI Land, Buildings, and Equipr		villent lunus.						
	Complete if the organization answer		. Part IV. line 11a. Se	ee Form 990. Part >	(. line 10	).			
	Description of property	(a) Cost or o		<u> </u>	Accumu		(d) Boo	ık valıı	
	Description of property	basis (investm	` ' '	1 , ,	epreciat	<b>I</b>	( <b>u</b> ) 500	n valu	
1a	Land	,		5,972.			3.3	5,9	72.
b					081	232.	2,68		
						415.	1,31		
d						179.		7,3	
	Other			5,388.		769.		8,6	
	il. Add lines 1a through 1e. (Column (d) must						5,82		
	<u> </u>							_	

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 GIRL SCOUTS Part VII Investments - Other Securities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1) Financial derivatives			•
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Fotal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))  Part VIII Investments - Program Related.			
	on Form 000 Dort IV line	11a Can Form 000 Part V line 12	
Complete if the organization answered "Yes"  (a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d of year market value
· · · · · · · · · · · · · · · · · · ·	(b) Book value	(c) Wethod of Valuation. Cost of en	u-or-year market value
(1)			
(2)			
(3)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1) BENEFICIAL INTERESTS IN AS			23,180,323.
(2) BENEFICIAL INTEREST IN PER		S	239,777.
(3) RIGHT OF USE ASSETS - OPER	RATING LEASES		1,079,947.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	. (5))		24 500 047
Total. (Column (b) must equal Form 990, Part X, line 15, col Part X Other Liabilities	<u>l. (B))   </u>		24,500,047.
Complete if the organization answered "Yes"	on Form 990 Part IV line	11e or 11f See Form 990 Part X line 25	
. (a) Description of liability	0111 01111 000, 1 art 17, 11110	The or Th. Oce Form 550, Fart X, line 20	(b) Book value
(1) Federal income taxes			(b) Book value
(2) OPERATING LEASE LIABILITIE			1,335,250.
(3)			1,555,250
(4)			
• •			
(5)			

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))

1,335,250.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2023

(6) (7) (8)

Pai	rt XI F	Reconciliation of Revenue per Audited Financial Statement	ts With	n Revenue per Re	turn	
	С	complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total rev	renue, gains, and other support per audited financial statements			1	20,232,125.
2		s included on line 1 but not on Form 990, Part VIII, line 12:				
а		alized gains (losses) on investments	2a	56,342.		
b		services and use of facilities	2b	149,076.		
С	Recover	ies of prior year grants	2c			
d	Other (D	escribe in Part XIII.)	2d	3,687,017.		
е		s <b>2a</b> through <b>2d</b>			2e	3,892,435.
3		line 2e from line 1			3	16,339,690.
4		s included on Form 990, Part VIII, line 12, but not on line 1:		64 004		
а		ent expenses not included on Form 990, Part VIII, line 7b	4a	61,281.		
b		escribe in Part XIII.)	4b			61 001
		s <b>4a</b> and <b>4b</b>			4c	61,281.
5 Do:	Total rev	enue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  Reconciliation of Expenses per Audited Financial Statemer	>+o \\/i+	th Evnance par F	5	16,400,971.
Pa			ils wii	ın Expenses per F	etur	n
		complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				16 052 400
1		penses and losses per audited financial statements			1	16,953,498.
2		s included on line 1 but not on Form 990, Part IX, line 25:	1 . 1	140 076		
а		services and use of facilities	2a	149,076.		
b		ar adjustments	2b			
С		sses	2c			
d		escribe in Part XIII.)	•			140 076
		s 2a through 2d			2e	149,076. 16,804,422.
3		line 2e from line 1			3	10,004,422.
4		s included on Form 990, Part IX, line 25, but not on line 1:		61 201		
a		ent expenses not included on Form 990, Part VIII, line 7b		61,281.		
b		escribe in Part XIII.)	4b		4.	61 291
		s 4a and 4b			4c 5	61,281.
Pai	rt XIII S	penses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Supplemental Information			5	10,005,705.
		scriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV	/ lines 1	b and Ob: Dort V line 4	. Dort	V line 0: Dort VI
					, Part	A, IIIIe 2, Part AI,
ines	20 and 41	o; and Part XII, lines 2d and 4b. Also complete this part to provide any addition	onai inio	ormation.		
PΔI	ут <i>т</i> у	LINE 4:				
LAI	XI V,	TIME 4.				
тні	c GTR	L SCOUTS OF COLORADO ENDOWMENT FUNDS PF	OVIT	DE RESOURCES	FΟ	R
	<u> </u>	B BCOOLD OF COHORADO EMPONIEM FOMED IT		DE REDOURCED		11
SCF	IOT, AR	SHIPS, OUTDOOR PROGRAMS, CAPITAL REPLAC	TEMEN	JT AND OPERA	тτо	NS.
	ТОШТИ	onitio, corpoon incoming, chiling north		TI IIID OLDIUI		
PAF	RT XI	, LINE 2D - OTHER ADJUSTMENTS:				
		,				
CHA	ANGE :	IN VALUE OF BENEFICIAL INTEREST IN ASSE	ETS E	HELD BY		
ОТЕ	HERS					3,687,017.
						.,,

# SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization  CTRT. SC	OUTS OF COLORADO					Employer ide $84-0410$	ntification number らるの
	- Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, I	ine 17		
Indicate whether the organization rais     a	sed funds through any of the following  e Solicitat  f Solicitat  g Special  or oral agreement with any individual cart VII) or entity in connection with providuals or entities (fundraisers) pursua	tion of tion of fundra (includ	non-g gover aising of ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	itees,	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	ustody itrol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total							
3 List all states in which the organization or licensing.			utions	or has been notified	it is e	exempt from re	gistration

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

Schedule G (Form 990) 2023

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

		of fundraising event contributions and gro	oss income on Form 990	-EZ, lines 1 and 6b. List e	vents with gross receipt	s greater than \$5,000.
				(b) Event #2 GIVE A CHEF	(c) Other events NONE	(d) Total events (add col. (a) through
				A COOKIE	(4-4-1	col. <b>(c)</b> )
ine			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	488,487.	8,580.		497,067.
	2	Less: Contributions	414,867.	1,740.		416,607.
	3	Gross income (line 1 minus line 2)	73,620.	6,840.		80,460.
	4	Cash prizes				
S	5	Noncash prizes				
shense	6	Rent/facility costs	24,054.			24,054.
Direct Expenses	7	Food and beverages	90,251.			90,251.
_	8	Entertainment				
	9	Other direct expenses	69,520.			69,520.
		Direct expense summary. Add lines 4 through				183,825.
Do	11 rt I	Net income summary. Subtract line 10 from li				-103,365.
Га	ונו	<b>Gaming.</b> Complete if the organization a \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	1990, Part IV, line 19, or r	reported more than	
		ψ13,000 0111 01111 990-L2, linie 0a.		(b) Pull tabs/instant		(d) Total gaming (add
ine			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						( ) ( )
æ	1	Gross revenue				
S	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Jirect E	4	Rent/facility costs				
	_	Other aline of a consequence				
	5	Other direct expenses	V <sub>2</sub> 0/	V 0/		
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	En	ter the state(s) in which the organization condu	cts gaming activities: _			
		the organization licensed to conduct gaming ac				Yes No
b	If "	No," explain:				
		ere any of the organization's gaming licenses re				Yes No
b	If "	Yes," explain:				
	_					

332082 09-13-23 Schedule G (Form 990) 2023

Sch	nedule G (Form 990) 2023 GIRL SCOUTS OF COLORADO 84	<u>4-0410630</u>	Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
12	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
13	Indicate the percentage of gaming activity conducted in:		
;	a The organization's facility	13a	%
	<b>b</b> An outside facility		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	•	
	Name		
	Address		
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
-	<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization \$ and the amoun	nt	
	of gaming revenue retained by the third party \$		
	c If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	daning manager information.		
	Name		
	- Traine		
	Gaming manager compensation \$		
	Carring manager compensation		
	Description of services provided		
	Description of services provided		
	Director/officer Employee Independent contractor		
	birector/officer Employee independent contractor		
17	Mandatory distributions:		
	·		
•	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes	☐ No
	retain the state gaming license?		
	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	е	
P	organization's own exempt activities during the tax year \$ art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	d Dort III. lings 0	0h 10h
		J Part III, IIIIes 9,	90, 100,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
_			
_			

Schedule G (Form 990)	GIRL SCOUTS OF COLORADO	84-0410630 Page 4
Part IV Supplem	GIRL SCOUTS OF COLORADO rental Information (continued)	
		_

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

GIRL SCOU	ITS OF COL	ORADO					84-0410630
Part I General Information on Grants a	and Assistance					•	
1 Does the organization maintain records							
criteria used to award the grants or assi	stance?						X Yes No
2 Describe in Part IV the organization's pr	ocedures for monit	toring the use of grant	funds in the United	d States.			
Part II Grants and Other Assistance to recipient that received more than	-				anization answered "\	es" on Form 990, Part I'	/, line 21, for any
Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
<ul> <li>2 Enter total number of section 501(c)(3) a</li> <li>3 Enter total number of other organization</li> </ul>	-	<del>-</del>	e line 1 table		<u> </u>		

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance			
NATIONAL DUES ASSISTANCE	18352	278,824.	0.					
MEMBERS ASSISTANCE	304	37,805.	0.					
CAMP ASSISTANCE	493	104,805.	0.					
EVENT ASSISTANCE	428	6,419.	0.					
Part IV Supplemental Information. Provide the information requ	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.				
PART I, LINE 2								
ORGANIZATION'S PROCEDURES FOR MONIT	ORING TH	E USE OF G	RANT FUNDS	:				
ALL GRANTS ARE MANAGED IN A FUNDRAL	SING DAT	ABASE.						
THE ASSIGNED FUNDRAISER IS RESPONSE	BLE FOR	ALL COMMUN	ICATION,					
REPORTING, AND FOLLOW UP.								
INFORMATION REGARDING THE SPECIFIC	GRANT IN	CLUDES:						
- DATE RECEIVED, AMOUNT AND PURPO	SE RECOR	DED AND AC	CKNOWLEDGED					
- AWARD LETTER AND ANCILLARY DOCU	JMENTATIO	N						

- ACTIONS ADDED FOR INTERIM REPORTS, FINAL REPORTS, SITE VISITS

Part IV Supplemental Information
GRANTS WHICH ARE RESTRICTED FOR A SPECIFIC PURPOSE AND WILL BE EXPENDED
ON AN ONGOING BASIS FOR THAT PURPOSE ARE APPROPRIATELY RESTRICTED.
REPORTING TO FUNDERS ENSURES FUNDS WERE STEWARDED AND EXPENDED
PROPERLY.

Schedule I (Form 990)

## SCHEDULE J (Form 990)

Department of the Treasury

**Compensation Information** 

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

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

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

2023

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

GIRL SCOUTS OF COLORADO

Employer identification number 84-0410630

Pa	rt I Questions Regarding Compensation			
			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as 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 on line 1a?	2		
3	Indicate which, if any, of the following the 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			
	Independent compensation consultant  X Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:	4 -		v
a	Receive a severance payment or change-of-control payment?	4a		X
D	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b 4c		X
С	Participate in or receive payment from an equity-based compensation arrangement?  If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	40		25
	The storage of lines 44°C, list the persons and provide the applicable amounts for each item in Fart III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	l	l

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

Schedule J (Form 990) 2023

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

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

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

		(B) Breakdown of W	I-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) LEANNA CLARK	(i)	228,964.	1,450.	0.	0.	26,630.	257,044.	0.
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DONNELL HEISTAND	(i)	171,350.	1,450.	0.	0.	13,463.	186,263.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)						l	<u> </u>

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.

### SCHEDULE O (Form 990)

Department of the Treasury

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

GIRL SCOUTS OF COLORADO

Employer identification number 84-0410630

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AND SHARE A WORLDWIDE SISTERHOOD THROUGH TRADITIONS AND NEW
EXPERIENCES. GIRL SCOUTS BUILDS GIRLS OF COURAGE, CONFIDENCE, AND
CHARACTER, WHO MAKE THE WORLD A BETTER PLACE.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
THE PEOPLE AND PROGRAMS MAKE A DIFFERENCE IN THE LIVES OF GIRLS. SOME
HIGHLIGHTS FROM 2024:
- OPENED THE FIRST FULLY ACCESSIBLE ZIPLINE AT OUR MEADOW MOUNTAIN
RANCH PROPERTY. MORE THAN 10 YEARS IN THE MAKING, THIS EFFORT WAS
INITIATED BY THE GECCCOS TROOP IN NORTHERN COLORADO TO HONOR THEIR
TROOP MEMBER WHO PASSED AWAY.
- THE GIRL SCOUTS OF COLORADO COOKIE PROGRAM RANKED NO. 3 IN THE
NATION.
- SECURED OUR FIRST FUNDED PARTNER FOR THE HIGHEST AWARDS PROGRAM.
- HELD THE MOST SUCCESSFUL WOMEN OF DISTINCTION SERIES OF FUNDRAISING
EVENTS IN TERMS OF ATTENDANCE AND DOLLARS RAISED.
- LAUNCHED A NEW ECOMMERCE SITE TO IMPROVE CUSTOMER SERVICE AND
RETAIN PROCEEDS FOR GIRL SCOUTS IN COLORADO.
- INITIATED A TEACHER-LED TROOP MODEL IN AURORA WITH A PRIVATE DONOR
AND ARE NOW ABLE TO CONTINUE EXPANDING THIS MODEL THANKS TO ADDITIONAL
FUNDING RECEIVED AS PART OF A NATIONAL PILOT PROGRAM HOSTED THROUGH
GSUSA.
- DEVELOPED CERT-A-THONS, OUTDOOR SKILLS FOCUSED TRAININGS FOR ADULT
·

LHA 332211 11-14-23

CONTINUED EFFORTS TO DIVERSITY FUNDING AND RAISED \$1.6 MILLION FROM

VOLUNTEERS, MEETING A GREAT NEED AND WELL-RECEIVED BY VOLUNTEERS.

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

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2 **Employer identification number** Name of the organization GIRL SCOUTS OF COLORADO 84-0410630 DONORS, FOUNDATIONS, AND PARTNERSHIPS. THESE ARE JUST A FEW OF THE SUCCESSES BECAUSE THE REAL ACHIEVEMENTS LIE IN THE LEADERSHIP GROWTH AND ACCOMPLISHMENTS OF THE 15,204 YOUTH MEMBERS AND THE 6,116 ADULT VOLUNTEERS WHO GUIDE THEM ON THEIR LEADERSHIP JOURNEY. THE GIRL SCOUT PROGRAM IS A GIRL-LED LEADERSHIP EXPERIENCE WHERE GIRLS DISCOVER, CONNECT, AND TAKE ACTION THROUGH BADGE-EARNING, CIVIC ENGAGEMENT, OUTDOOR EXPERIENCES, AND TRAVEL. IT'S A LIFE-LONG LEADERSHIP JOURNEY THAT PROGRESSES AS GIRLS GROW. THROUGH THE GIRL SCOUT LEADERSHIP EXPERIENCE, WE KNOW THAT GIRLS ARE DEVELOPING LEADERSHIP SKILLS THROUGH EVERYDAY ACTIONS BIG AND SMALL, AND INCORPORATING OUR FOUR PROGRAM PILLARS (STEM, OUTDOORS, LIFE SKILLS, AND ENTREPRENEURSHIP) INTO EVERYTHING THEY DO AS GIRL SCOUTS. PARTICIPATING IN GIRL SCOUTS IS PROVEN TO HELP GIRLS THRIVE IN FIVE WAYS AS THEY: - DEVELOP A STRONG SENSE OF SELF. - DISPLAY POSITIVE VALUES. - SEEK CHALLENGES AND LEARN FROM SETBACKS. - FORM AND MAINTAIN HEALTHY RELATIONSHIPS.

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

- AND IDENTIFY AND SOLVE PROBLEMS IN THE COMMUNITY.

THE OUTDOOR EXPERIENCE IS INTEGRAL IN BEING A GIRL SCOUT AND CAN BE

PIVOTAL IN A GIRL'S LIFE. MORE THAN 2,700 GIRLS ATTENDED STAFF-LED AND

VOLUNTEER-LED OUTDOOR PROGRAMS THIS YEAR. MORE THAN 1,000 GIRLS

Schedule O (Form 990) 2023 Page 2

**Employer identification number** Name of the organization GIRL SCOUTS OF COLORADO 84-0410630 PARTICIPATED IN OVERNIGHT SUMMER CAMP AT GIRL SCOUTS OF COLORADO'S RANCH PROPERTIES. NEARLY 500 GIRL SCOUTS EXPERIENCED TROOP AND FAMILY CAMP OPPORTUNITIES. STAFF-LED DAY CAMPS SERVED 149 GIRL SCOUTS, AND ALL VOLUNTEER-LED CAMP SESSIONS SERVED 717 GIRL SCOUTS. ALMOST 250 GIRL SCOUTS PARTICIPATED IN OUTDOOR ADVENTURE CLUB, AN INDIVIDUAL YOUTH MEMBER EXPERIENCE FOR OLDER GIRL SCOUTS. IN AN EFFORT TO ENGAGE MORE YOUTH AND THEIR FAMILIES FROM UNDERSERVED GROUPS AND MARGINALIZED COMMUNITIES, GIRL SCOUTS OF COLORADO OFFERED AFFINITY CAMP SESSIONS, INCLUDING PRIDE OUTSIDE FOR LGBTQ+ IDENTIFYING GIRL SCOUTS AND THEIR ALLIES AND PROTECTED PEAKS FOR IMMUNOCOMPROMISED GIRL SCOUTS AND THEIR FAMILIES. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: LIFE SKILLS: GIRL SCOUTS LOVE TO HELP THEIR COMMUNITIES AND THROUGH THE HIGHEST AWARDS PROGRAM THEY DEVELOP LIFELONG PROBLEM-SOLVING AND LEADERSHIP SKILLS, AND THEY MAKE A SUSTAINABLE IMPACT ON OUR WORLD. THIS YEAR, 483 JUNIOR GIRL SCOUTS EARNED THE BRONZE AWARD, 277 CADETTE GIRL SCOUTS EARNED SILVER, AND 29 SENIOR AND AMBASSADOR GIRL SCOUTS EARNED THE GOLD AWARD. THE GOLD AWARD GIRL SCOUTS ARE PRIME EXAMPLES OF THE GIRL SCOUT LEADERSHIP EXPERIENCE IN ACTION. THEY EARNED THE HIGHEST AWARD A HIGH

GOLD AWARD GIRL SCOUT AS A PERSON. A FEW BIG IDEAS ADDRESSED BY THIS Schedule O (Form 990) 2023

SCHOOL-AGE GIRL SCOUT CAN EARN BY LEADING PROJECTS THAT MAKE A LASTING

IMPACT ON OUR WORLD. IT'S A HUGE ACCOMPLISHMENT THAT ALSO IMPACTS THE

Schedule O (Form 990) 2023 Page 2

Name of the organization

GIRL SCOUTS OF COLORADO

SEMPLOYER INCLUDE IMPROVING POLICE RESPONSE TO MENTAL

HEALTH SITUATIONS, BUILDING A BAREFOOT SENSORY PATH FOR STUDENTS WITH

SPECIAL NEEDS, TEACHING MIDDLE SCHOOL GIRLS SELF-DEFENSE TECHNIQUES,

SUPPORTING PEOPLE LIVING WITH ALZHEIMER'S DISEASE WITH A VARIETY OF

SENSORY TOOLS, AND PREVENTING GUN VIOLENCE IN SCHOOLS. GOLD AWARD GIRL

DENVER BUSINESS JOURNAL'S FUTURE OUTSTANDING WOMAN IN BUSINESS AND

NAMED AS ONE OF 10 GIRLS LEADING CHANGE ACROSS THE NATION AND WAS

SCOUT MORGAINE W. FROM DENVER'S EAST HIGH SCHOOL WAS ALSO HONORED AS A

HONORED AT THE WHITE HOUSE FOR HER PROJECT CREATING POLICY AIMED AT

PREVENTING GUN VIOLENCE IN SCHOOLS.

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

### VOLUNTEER TRAINING AND SUPPORT:

THE CONNECTIONS GIRL SCOUTS BUILD WITH EACH OTHER AND THEIR TROOP

VOLUNTEERS ARE KEYS TO THEIR SUCCESS. THE LONGER A GIRL STAYS IN GIRL

SCOUTS, THE MORE SHE GETS OUT OF IT AND THE MORE SHE GIVES BACK TO THE

COMMUNITY. THE TROOP LEADER IS OFTEN THE REASON A GIRL WILL STICK WITH

GIRL SCOUTS THROUGHOUT THEIR SCHOOL YEARS. TRAINING AND SUPPORTING

THESE AMAZING VOLUNTEERS WHO GIVE THEIR TIME AND TALENTS TO BUILD GIRLS

OF COURAGE, CONFIDENCE, AND CHARACTER ARE TOP PRIORITIES AT GIRL SCOUTS

OF COLORADO.

NEARLY 200 TRAINING SESSIONS WERE HELD THIS YEAR, INCLUDING LEADERSHIP

SUMMITS, CERT-A-THONS, AND ONLINE TRAINING SESSIONS. MORE THAN 1,140

VOLUNTEERS ATTENDED THOSE SESSIONS.

GIRL SCOUT VOLUNTEERS ALSO GAIN RESUME-BUILDING SKILLS WHEN THEY TAKE

<u>Schedule O (Form 990) 2023</u> Page **2** 

Name of the organization

GIRL SCOUTS OF COLORADO

Employer identification number 84-0410630

TRAINING IN AREAS RELEVANT ACROSS MANY ASPECTS OF THEIR LIVES, SUCH AS MENTAL HEALTH FIRST AID TRAINING AND STEM FOR ALL.

WHEN A TROOP LEADER HELPS A GIRL TO FEEL SEEN, HEARD, AND SAFE, A GIRL
SCOUT'S CONFIDENCE GROWS. WHEN THAT GIRL SCOUT SEES THAT THEY CAN MAKE
A DIFFERENCE IN THE WORLD, THEY BEGIN TO KNOW THEIR OWN POWER. THAT'S
WHEN THE MAGIC HAPPENS WHEN THE GIRL AND THE WORLD ARE FOREVER
CHANGED!

OUR COMMUNITIES, OUR NATION, AND OUR WORLD NEEDS GIRLS WHO HAVE THE

SKILLS TO NAVIGATE LIFE WITH PURPOSE AND JOY GIRLS WHO AREN'T AFRAID

TO RAISE THEIR HAND AND SPEAK UP. THEY SEE SOMETHING THAT NEEDS FIXING

AND THEY FIX IT. THEY'RE LIFE-READY FOR TODAY AND TOMORROW.

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

THE FORM 990 IS PRESENTED TO THE AUDIT COMMITTEE BY GSCO'S AUDITORS; AFTER
THIS REVIEW, THE AUDIT COMMITTEE RECOMMENDS THE 990 TO THE BOARD. THE
AUDITORS THEN ALSO REVIEW THE 990 WITH THE BOARD OF DIRECTORS AND THE BOARD
OF DIRECTORS APPROVES THE 990. ALL APPROVALS OCCUR PRIOR TO THE FORM 990
BEING FILED WITH THE IRS.

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

GIRL SCOUTS OF COLORADO HAS A CONFLICTS OF INTEREST AND CONFIDENTIALITY

POLICY, MOST RECENTLY UPDATED NOVEMBER 2021. THE PURPOSE OF THE POLICY

ENSURES THAT ALL BOARD/COMMITTEE AND OFFICER DECISIONS OF GIRL SCOUTS OF

COLORADO ARE IMPARTIAL AND DO NOT COMPETE OR GIVE THE APPEARANCE OF

COMPETING WITH THE INTERESTS OR CONCERNS OF THE COUNCIL. WITH RESPECT TO A

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2

Name of the organization

GIRL SCOUTS OF COLORADO

Employer identification number 84-0410630

CONFLICT OF INTEREST, THE POLICY ADDRESSES WHETHER A BOARD/COMMITTEE OR

OFFICER HAS AN EXISTING OR POTENTIAL FINANCIAL INTEREST OR ANY OTHER

INTEREST THAT IMPAIRS, OR MIGHT APPEAR TO IMPAIR, THEIR INDEPENDENCE OR

OBJECTIVITY IN THE DISCHARGE OF RESPONSIBILITIES AND DUTIES OF THE COUNCIL.

ANNUALLY, ALL OFFICERS, BOARD/COMMITTEE MEMBERS, AND KEY EMPLOYEES ARE
REQUIRED TO DISCLOSE ANY CONFLICT OF INTEREST THAT MAY OCCUR WITH THEIR
RELATIONSHIP WITH COUNCIL. THE BOARD CHAIR REVIEWS ALL ANNUAL DISCLOSURE
STATEMENTS AND MAY REFER TO THE FULL BOARD OR LEGAL COUNSEL FOR FURTHER
ADVICE. ANY MEMBER WITH A POTENTIAL CONFLICT OF INTEREST RECUSES THEMSELVES
FROM VOTING ON SUCH MATTERS. PRIOR TO EACH BOARD MEETING, THE BOARD CHAIR
REQUESTS DISCLOSURE OF ANY CONFLICTS OF INTEREST.

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

THE PROCESS FOR DETERMINING COMPENSATION FOR CHIEF OFFICERS AND KEY

EMPLOYEES OF THE COUNCIL INVOLVES THE CEO, COO AND HUMAN RESOURCES

REVIEWING NATIONAL AND LOCAL SURVEYS AND EVALUATING THE LOCAL MARKET WITH

COMPARABLE POSITIONS. DURING 2024, A FORMAL PERFORMANCE MANAGEMENT PROCESS

WAS IMPLEMENTED. COMPENSATION DECISIONS ARE UPDATED AND DOCUMENTED IN THEIR

RESPECTIVE FILES. THE GSCO BOARD OF DIRECTORS WILL CONDUCT AN ANNUAL

PERFORMANCE REVIEW OF THE CEO INCLUDING A REVIEW OF COMPENSATION. THE MOST

RECENT EVALUATION OF THE CEO WAS MARCH 2024.

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

GOVERNING DOCUMENTS AND THE ANNUAL REPORT ARE POSTED TO THE GIRL SCOUTS OF COLORADO WEBSITE.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

33221.01

Name of the organization	Employer identification number
GIRL SCOUTS OF COLORADO	84-0410630
CHANGE IN VALUE OF BENEFICIAL INTEREST IN ASSETS HELD BY	
OTHERS	3,687,017.
PART XII, LINE 2C	
THIS PROCESS HAS NOT CHANGED FROM PRIOR YEAR.	