** 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)

Open to Public Inspection

Form **990** (Rev. January 2020) 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.

A F	or the 2	2019 calendar year, or tax year beginning OCT 1, 2019 and 6	ending 5	EF 30, 2020	-ti number			
B 0	heck if	C Name of organization		D Employer identification	ation number			
2	pplicable:							
	Address change	GIRL SCOUTS OF UTAH						
F	Name change	Doing business as		87-022161	.4			
-	Initial	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite					
=	Final	445 EAST 4500 SOUTH, STE. 125		(801) 265-8472				
_	return/ termin-	City or town, state or province, country, and ZIP or foreign postal code	 -	G Gross receipts \$	8,190,293.			
_	ated □Amende			H(a) Is this a group ret	turn			
누	return Applica- tion	F Name and address of principal officer: LESLIE EGAN		for subordinates?	Yes X No			
	tion pending	SAME AS C ABOVE		H(b) Are all subordinates ind	luded? Yes No			
_			or 527		list. (see instructions)			
<u> </u>	Tax-exer	TIPL Status. 22 30 No/O)	· · · · · · · · · · · · · · · · · · ·	H(c) Group exemption				
J,	<u>Website</u>	: WWW.GSUTAH.ORG regarization: X Corporation Trust Association Other	1 Year	of formation: 1920 M	State of legal domicile: UT			
		rganization: A corporation 17000						
	art I	Summary iriefly describe the organization's mission or most significant activities: GIRL	SCOUT	ING BUILDS G	IRLS OF			
ď	1 B	riefly describe the organization's mission of most significant activities. Serial COURAGE, CONFIDENCE AND CHARACTER WHO MAK	<u>-2000-</u>	WORLD A BET	rer PLACE.			
Governance	<u> </u>	OURAGE, CONFIDENCE AND CHARACIER WITE PRINCE	and of more	than 25% of its net ass	ets			
ž.	2 (check this box if the organization discontinued its operations or dispose	seu oi more	3	19			
e Ve	3 1				19			
Č	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)			171			
Q.	5 7	otal number of individuals employed in calendar year 2019 (Part V, line 2a)			2744			
ij.	6 7	otal number of volunteers (estimate if necessary)		6	0.			
Activities &	7a ⊺	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0.			
4	1 d	Net unrelated business taxable income from Form 990-T, line 39	······································	7b				
		•	<u> </u>	Prior Year	302,126.			
	8 (Contributions and grants (Part VIII, line 1h)		420,441.	49,681.			
Domonio	9 F	Program service revenue (Part VIII, line 2g)		751,934.	193,075.			
9	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		225,797.	5,080,480.			
à	177 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		4,148,575.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,546,747.	5,625,362.			
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.				
	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,499,656.	2,573,969.			
Š	ຶ່ງ 2. 16a l	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
1		Total fundraising expenses (Part IX, column (D), line 25) 380,1	<u>53.</u>	Gregoria de la composição	2 242 425			
Ĺ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,545,279.	1,940,135.			
	12	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,044,935.	4,514,104.			
		Revenue less expenses. Subtract line 18 from line 12		501,812.	1,111,258.			
-		Nevol ido 1000 organisasi odna da	В	eginning of Current Year	End of Year			
is o	8alances 20 21	Total assets (Part X, line 16)		17,819,670.	19,387,470.			
ess		Total liabilities (Part X, line 26)		4,162,554.	4,412,521.			
et 7	21	Net assets or fund balances. Subtract line 21 from line 20		13,657,116.	14,974,949.			
	∄ 22 Part II							
<u> </u>	CIPC BI	Ities of perjury, I declare that I have examined this return, including accompanying schedule	es and staten	nents, and to the best of m	y knowledge and belief, it is			
Ul Lui	ider pena	t, and complete, Declaration of preparer (other than officer) is based on all information of w	hich prepare	r has any knowledge.				
tri	ie, correc	t, and continuence, bectaration of preparer (office them them them)	, ,	02/0	5/202			
۰.		Signature of officer		Date /	7			
	gn	LESLIE EGAN, BOARD CHAIR						
H	ere	Type or print name and title						
				Date Check	PTIN			
В		Print/Type preparer's name CHETT CAMPBELL, CPA Preparer's signature		02/03/21 if self-emplo	P01301037			
	aid			Firm's EIN ▶	45-0250958			
	eparer	OF THE STATE OF TH						
U	se Only	Firm's address 5929 FASHION POINT DR., STE. 30 OGDEN, UT 84403-4684	_	Phone no. 8 C	1-621-1575			
_		RS discuss this return with the preparer shown above? (see instructions)			X Yes No			
M	lay the II	30 discuss this feturn with the preparer shown above: face moreonens)			- 000 0040			

Part	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 SCOUTING BUILDS GIRLS OF COURAGE, CONFIDENCE AND CHARACTER WHO
	MAKE THE WORLD A BETTER PLACE.
	is a studied the year which were not listed on the
2	Did the organization undertake any significant program services during the year which were not listed on the Yes X No
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program control in the conduction of the conduc
	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
4	Describe the organization's program service accomplishments for each of its three largest program services accomplishments for each of its three largest program services. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	AND
	3 469 986 (Revenue \$ 5,035,095.)
4a	THE PROPERTY OF THE PROPERTY O
	GIRL SCOUTS IS THE PREEMINENT LEADERSHIP DEVELOPMENT ORGANIZATION FOR
	GIRL SCOUTS IS THE FREEHINGST BEING A LIFETIME OF LEADERSHIP THROUGH GIRLS. GIRL SCOUTS PREPARE GIRLS FOR A LIFETIME OF LEADERSHIP THROUGH
	ACCESS TO HUNDREDS OF ALL-GIRL, GIRL-LED EXPERIENCES; SKILL BUILDING
	OPPORTUNITIES; AND A CONNECTION TO SUPPORTIVE ADULTS AND AN INCLUSIVE
	COMMUNITY. WITH A WIDE RANGE OF ACTIVITIES AND TOPICS, THE GIRL SCOUT
	PROGRAM GIVES EVERY GIRL A PLACE WHERE THEY CAN PRACTICE DIFFERENT
	SKILLS, EXPLORE THEIR POTENTIAL, AND TAKE ON LEADERSHIP POSITIONS.
	GIRL SCOUTS NOT ONLY CHANGE THE WORLD FOR BETTER, THEY CHANGE IT FOR
	GOOD.
	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4b	(Code:) (Expenses \$
	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$\frac{1}{2}\)
// /	Other program services (Describe on Schedule O.)
4d	(Revenue \$
	7. Tatal program conjug expenses 3, 469, 986.
<u>4e</u>	Form 990 (2019

Form 9	990 (2019) GIRL SCOUTS OF UTAH 87-0221	012	Pa	ge o
Part	IV Checklist of Required Schedules		T	NI-
			Yes	No_
1	s the organization described in secti <mark>on 501(c)(3)</mark> or 4947(<mark>a)(1) (</mark> other than a private foundation)?		37	
	If IVes I complete Schodule A	1	X	
_	to the expenientian required to complete Schodule B. Schodule of Contributors?	2	X	
2	Did the organization required to complete <i>Schedule B</i> , ochledule of constant of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		X_
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
4	Section 501(c)(3) organizations. Did the organization engage in 1999ying detributes, or the control of the organization of the	4		X
	during the tax year? If "Yes," complete Schedule C, Part II			
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5		X
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III			
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		X
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_	х	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			37
0	Cabadula D. Bort III	8		X
•	Did the examination report an amount in Part X. line 21, for escrow or custodial account liability, serve as a custodian for	1 1		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
	If "Yes," complete Schedule D, Part IV			
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10	X	
	or in quasi endowments? If "Yes," complete Schedule D, Part V			7
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	1015-105-1		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		Х	
	D-11//	11a	Λ	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% of more of its total			37
	assets reported in Part X. line 16? If "Yes." complete Schedule D. Part VII	11b		X
	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
	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			
d	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
е	Did the organization report an arrivorit for other habilities in act X, line 25. If Tes, complete considered by a line act X, line 25. If Tes, complete cons			
f	Did the organization's separate or consolidated financial statements for the tax year mode a restrict and a separate Schodulo D. Part X	11f	X	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X			
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a	X	
	Schedule D, Parts XI and XII	124		
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	10h		Х
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	-	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
1/12	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
h	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
b	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		1	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
<i>.</i> -	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
	Did the organization report on Part <mark>IX</mark> , column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
16	Did the organization report on Part IX, column (A), line 3, more than \$45,000 or aggregate graine 3.	16		X
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV			
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		Х
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	(2)(2)	v	
	1c and 8a? If "Ves " complete Schedule G. Part II	18	X	-
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		1	
13	complete Schedule G, Part III	19		X
20-	Did the organization operate one o <mark>r m</mark> ore hos <mark>p</mark> ital facilities? <i>If</i> "Yes," complete Schedule H	20a		X
∠∪a	o If "Yes" to line 20a, did the organiz <mark>ati</mark> on attach a copy <mark>of its a</mark> udited financial statements to this return?	20b		
	Did the organization report more t <mark>ha</mark> n \$5,000 of grants or other assistance to any domestic organization or			
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
-	domestic government on Part IA, Column (A), line 1: III Tes, Complete Schedule I, Parts Fand II III III III III III III III III II		n 990	(2019

_	990 (2019) GIRL SCOUTS OF UTAH 87-022	L612	Pag	ge 4
	990 (2019) GIRL SCOUTS OF UTAH t IV Checklist of Required Schedules (continued)			_
1-1775			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			v
\$ 	Part IV column (A) line 22 If "Voc " complete Schedule I Parts Land III	22	-	<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			X
	Schodula I	23	-	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04=		X
	Schedule K. If "No," go to line 25a	24a	_	27
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
	any tay exempt bonds?	24c 24d	-+	_
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24u		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		1	X
	transaction with a disqualified person during the year? If "Yes." complete Schedule L, Part I	25a	_	
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	25b		X
	Schedule L, Part I	200		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		X
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	20		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27		X
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		TE al	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? f	28a		X
	"Yes," complete Schedule L, Part IV			Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV			
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	28c		X
	"Yes, " complete Schedule L, Part IV	29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
30	Did the organization receive contributions of art, riistorical treasures, or other similar assets, or other similar asset	30		X
	contributions? If "Yes," complete Schedule M	31		X
31	Did the organization liquidate, terminate, or dissolve and cease operations: If Yes, complete serious in the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% or its not assess. Where the property of the not assess.	32		X
12121	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
٠.	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
34	Part V, line 1	34		X
0.5	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
35	b. If "Yes" to line 35a, did the organiz <mark>ati</mark> on receiv <mark>e</mark> any pa <mark>yment f</mark> rom 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		
00	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
36	If "Yes," complete Schedule R, Part V, line 2	. 36		X
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
30	Note: All Form 990 filers are required to complete Schedule O	38	X	
P	art V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	7		
	b. Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	10.45	77	
	(gambling) winnings to prize winners?	1c	X	1001
		Forr	n 990	(2019

Form	990 (2019) GIRL SCOUTS OF UTAH 87-0221	512	Pa	age 5
Par	Other IDC Filings and Tax Compliance			
NEWSTRANS		Vier was	Yes	No
2a	Enter the number of employees repo <mark>rted on Form W-3, Transmittal of Wage and Tax Statements, 1.71</mark>			
	filed for the calendar year ending with or within the year covered by this return	0.5	v	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
h	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	4-		X
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		22
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		X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	- 50		\vdash
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6a		X
	any contributions that were not tax deductible as charitable contributions?	- Ou		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		
	were not tax deductible?	0.5	12 - X	
7	Organizations that may receive deductible contributions under section 170(c).	7a	Х	
а	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?	7b	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7c		X
	to file Form 8282? 7d			
d	If "Yes." Indicate the number of Forms 6262 med during the year.	7e		X
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g	If the organization received a contribution of dualined intellectual property, and the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
h	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
8	sponsoring organizations maintaining donor advised lands. See a serior sponsoring organization have excess business holdings at any time during the year?	8		
^	Sponsoring organizations maintai <mark>n</mark> ing donor advised funds.	100		
9	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
10	Initiation fees and capital contributions included on Part VIII, line 12		1	
h	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	the particle of the services (Do not not amounts due or neid to other sources against			
	amounts due or received from them.)	14.45		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	-	-
b	12h	-	-31%	
13	Section 501(c)(29) qualified nonp <mark>ro</mark> fit health <mark>i</mark> nsuran <mark>c</mark> e issuers.			
a	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.			
k				g
	organization is licensed to issue qualified health plans	-		
c	Enter the amount of reserves on hand	44		Х
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		A
ŀ	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	-	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		х
	excess parachute payment(s) during the year?	15		- 23
	If "Yes," see instructions and file Form 4720, Schedule N.	16		х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	10		1
	If "Yes," complete Form 4720, Sch <mark>e</mark> dule O.	For	m 99	0 (2019

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.

	Check if Schedule O contains a response or note to any line in this Part VI					X
Sect	ion A. Governing Body and Management					
360	ion A. doverning Body and management		3		Yes	No
	Enter the number of voting members of the governing body at the end of the tax year	1a	19			
па	If there are material differences in voting <mark>rights among members</mark> of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
	Enter the number of voting members included on line 1a, above, who are independent	1b	19			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		ner	7		
2	Did any officer, director, trustee, or key employee have a raining relationship of a basiness relationship of			2		X
	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the	e direct supe	vision			
3	of officers, directors, trustees, or key employees to a management company or other person?			3		X
	of officers, directors, trustees, or key employees to a management company of other person.	990 was filed	?	4		X
4	Did the organization make any significant changes to its governing documents since the prior Form S	eets?		5		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass			6	Х	
6	Did the organization have members or stockholders?	anoint one or				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	Spoil it one of		7a	Х	
	more members of the governing body?		or	74		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tocknoiders,	OI .	7b	X	
	persons other than the governing body?			75	22	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by the follow	/irig.	0-	X	
а	The governing body?			8a	X	_
b	Each committee with authority to act on behalf of the governing body?			8b	Λ	_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached at the				v
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue Code	.)			-
					Yes	No X
10a	Did the organization have local chapters, branches, or affiliates?			10a		A
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapters, affilia	ates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	37	-
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy before filin	g the form?	11a	X	-
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				77	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	-
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to conflicts?		12b	X	-
С	and enforce compliance with the policy? If	'Yes," describ	e			
	in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	-
14	Did the organization have a written document retention and destruction policy?			14	X	1
15	Did the process for determining compensation of the following persons include a review and approx	al by indeper	ndent			
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	·				
а	Time in the CEO Executive Director or top management official			15a	X	
	Other officers or key employees of the organization			15b	X	
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					4 mg
160	Did the organization invest in, cont <mark>rib</mark> ute assets to, or participate in a joint venture or similar arrange	ement with a				
104	taxable entity during the year?			16a		X
la la	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its partici	oation			
u	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	anization's				
	exempt status with respect to such arrangements?			16b		
800	exempt status with respect to such arrangements:					
	List the states with which a copy of this Form 990 is required to be filed ▶UT					
17	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990,	and 990-T (Se	ection 501(c)(3	s only	availa	able
18	for public inspection. Indicate how you made these available. Check all that apply.	,				
		in on Schedu	ıle (O)			
2020	X Own website X Another's website Upon request Other (explain Describe on Schedule O whether (and if so, how) the organization made its governing documents, or the control of the control			d finan	cial	
19	Describe on Schedule O whether (and it so, now) the organization made its governing documents, to	Jornation of mice				
	statements available to the public during the tax year.	noks and rec	ords -			
20	State the name, address, and telephone number of the person who possesses the organization's b	John and 180				
	LINDA NEELEY - 801-716-5112	84107				
	445 EAST 4500 SOUTH, STE. 125, SALT LAKE CITY, UT	04107			000	1 10010

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

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

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

Check this box if neither the organi	(B)	(C)						(D)	(E)	(F)
Name and title	Average hours per week	box	not ch , unles cer an	Posi neck i ss per	ition more son is	than o s both	an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) LESLIE EGAN	1.00	х		х				0.	0.	0 .
CHAIR	1.00	Δ		22	-					
(2) JOELLE CREAGER 1ST VICE CHAIR	1.00	х		Х				0.	0.	0
	1.00									
(3) PEECHES CEDERHOLM 2ND VICE CHAIR	1.00	x		Х				0.	0.	0
(4) LOREN MICALIZIO	1.00								0	0
3RD VICE CHAIR		X		X		_	_	0.	0.	0
(5) BABS DE LAY	1.00								0.	0
SECRETARY		X		X				0.	0.	U
(6) SARA BAESE	1.00	١.,						0.	0.	0
TREASURER	4 00	X	-	X	+	-	-	0.	0.	-
(7) SUZIE DRAPER	1.00	x						0.	0.	0
BOARD MEMBER	1.00	1	-	-	+	+	\vdash			
(8) MARTHA ELLIS BOARD MEMBER	1.00	x						0.	0.	0
(9) IVY ESTABROOKE	1.00	1	1							
BOARD MEMBER	1 2 0 0	x						0.	0.	0
(10) ANNIE EVANS	1.00									
BOARD MEMBER		X						0.	0.	0
(11) MARIA FARRINGTON	1.00									
BOARD MEMBER		X						0.	0.	0
(12) HELEN HU	1.00									
BOARD MEMBER		X				_		0.	0.	0
(13) KARIN LOCKOVITCH	1.00									0
BOARD MEMBER		X		_	+	_	_	0.	0.	0
(14) BRANDI MAULL	1.00								0	
BOARD MEMBER	4 00	X	-	+	+	+	+	0.	0.	0
(15) LEAH MURRAY	1.00	_						0.	0.	0
BOARD MEMBER	4 00	X	+	+	+	+	-	0.	0.	
(16) STEVE SMITH	1.00	_						0.	0.	0
BOARD MEMBER	1 00	X	+-	+	+-	+	-	- 0.	0.	+
(17) SARAH STARKEY	1.00	_ X						0.	0.	. 0
BOARD MEMBER		14								Form 990 (20

Part VII Section A. Officers, Directors (A) Name and title		Aver hours we	(do box, offic	F not ch unles	(C) Posit leck m s pers				(D) Reportable compensation from the	(E) Reportable compensation from related organizations		(F) Estimated amount of other compensation		
		(list and the control of the control	s for ted ations ow	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from organiz and re organiz	the ation lated
(18) AMY LUKAS		1	.00		_		_			0.		0.		0.
BOARD MEMBER		1	.00	X				-		0.		-		
(19) JENNIFER PLUMB BOARD MEMBER			. 00	x						0.		0.		0.
(20) LISA HARDIN-REYNOLDS		40	.00			Х				124,108.		0.	6,	062.
CEO														
		10.0												
				-				-				+		
								-	_					
										104 100		0.		062.
1b Subtotal										124,108		0.	0,	0.002
c Total from continuation sheets to	Part V	/II, Secti	on A							124,108		0.	6,	062.
2 Total number of individuals (including)	ng but	not li <mark>mit</mark>	ed to t	those	liste	ed at	oove	e) wł	no re	eceived more than \$10	0,000 of reportable			1
compensation from the organizatio	n 🕨			-									Y	es No
3 Did the organization list any forme	r office	r, directo	or, trus	stee,	key	empl	loye	ee, o	r hig	hest compensated em	ployee on		3	X
line 1a? If "Yes," complete Schedul 4 For any individual listed on line 1a,	e J for	such inc	dividua porta	l	omp	 ensa		 n and	d oth	ner compensation from	the organization		3	
and related organizations greater th	nan \$15	50.000?	If "Ye	S. " C	omp	lete S	Sch	edui	e Ji	for such individual			4	X
5 Did any person listed on line 1a rec	eive or	accrue	comp	ensa	tion 1	from	any	y uni	elat	ed organization or indi	idual for services	100	5	Х
rendered to the organization? f "Y	es." co	mplete S	Sched	ule J	for s	uch	per:	son					5	- 21
Section B. Independent Contractors 1 Complete this table for your five high	hest c	ompens	ated in	ndep	ende	ent c	onti	racto	ors t	hat received more than	\$100,000 of comp	ensati	on from	
the organization. Report compensation	tion fo	r the cal	endar	year	endi	ing w	vith	or w	ithir	the organization's tax	year.			
Name and b	(A) ousines	s addre	ss	N	ЮИ	E				(B) Description o	services	Co	(C) ompens	ation
										1	l.			
Total number of independent cont	ractors	(includii	ng but	not	limite	ed to	the	ose I	isted	above) who received	more than			

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (C) Revenue excluded Related or exempt Unrelated Total revenue from tax under business revenue function revenue sections 512 - 514 1,382. 1a 1 a Federated campaigns Contributions, Gifts, Grants and Other Similar Amounts 1b b Membership dues 1c c Fundraising events d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 300,744 similar amounts not included above ... 1f 1g \$ g Noncash contributions included in lines 1a-1f 302,126 h Total. Add lines 1a-1f **Business Code** 49,681 49,681. 2 a TROOP AND CAMP PROGRAMS 900099 Program Service Revenue b d f All other program service revenue 49,681. Total. Add lines 2a-2f Investment income (including dividends, interest, and 82,188. 82,188 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 73,597. 6a 6 a Gross rents 42,504. b Less: rental expenses ... 31,093. c Rental income or (loss) 31,093 31,093. d Net rental income or (loss) (ii) Other (i) Securities 7 a Gross amount from sales of 111,436. assets other than inventory 7a b Less: cost or other basis 549. and sales expenses Other Revenue -549. 7c c Gain or (loss) 111,436. -549. 110,887. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See 141,726. Part IV, line 18 47,209 8b b Less: direct expenses 94,517. 94,517 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9b b Less: direct expenses c Net income or (loss) from garning activities_ 10 a Gross sales of inventory, less returns 7,404,993. and allowances 2,474,669. b Less: cost of goods sold 4,930,324 4,930,324. c Net income or (loss) from sales of inventory **Business Code** 24,546. 24,546. Miscellaneous Revenue 11 a OTHER INCOME 900099 d All other revenue 24,546. e Total. Add lines 11a-11d 288,141. 5,035,095. 5,625,362. Total revenue. See instructions

Form 990 (2019) GIRL SCOUTS OF UTAH
Part IX Statement of Functional Expenses

Pari	n 501(c)(3) and 501(c)(4) organizations must comple	ate all columns. All other	organizations must com	olete column (A).	
Sectio	on 501(c)(3) and 501(c)(4) organizations must complete the Check if Schedule O contains a respons	e or note to any line in th	is Part IX		
Do no 7b, 8	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16			(1.1.20) PM	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	120 660	105 044	21,118.	11,607.
	trustees, and key employees	138,669.	105,944.	21,110.	11,0070
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 045 202	1,486,211.	296,270.	162,822.
7	Other salaries and wages	1,945,303.	1,400,211.	250,270.	102/022
8	Pension plan accruals and contributions (include	207,766.	158,733.	31,643.	17,390.
	section 401(k) and 403(b) employer contributions)	112,339.	85,828.	17,109.	17,390. 9,402.
9	Other employee benefits		129,797.	25,875.	14,220.
10	Payroll taxes	169,892.	123,131.	2370731	
11	Fees for services (nonemployees):				
	Management	87,380.	66,758.	13,308.	7.314.
	Legal	29,444.	22,496.	4,484.	7,314. 2,464.
С	Accounting	29,444.	22,450.	1/1011	
	Lobbying			57-59a-57-51-51-52-51-51-51-51-51-51-51-51-51-51-51-51-51-	
е	Professional fundraising services. See Part IV, line 17	14,743.	AND THE RESERVE OF THE PARTY OF	14,743.	
f	Investment management fees	14,743.			
g		93,362.	71,329.	14,219.	7,814.
	column (A) amount, list line 11g expenses on Sch 0.)	95,302.	71,525.		•
12	Advertising and promotion	14,571.	11,133.	2,219.	1,219.
13	Office expenses	86,323.	65,951.	13,147.	7,225.
14	Information technology	00,323.	00/2021		
15	Royalties	197,367.	150,788.	30,059.	16,520.
16	Occupancy	58,817.	44,936.	8,958.	4,923.
17	Travel	30,017	22/2001		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	134,141.	102,483.	20,430.	11,228.
20	Interest	131/111		· ·	
21	Payments to affiliates	395,606.	302,243.	60,251.	33,112.
22	Depreciation, depletion, and amortization	117,954.	90,116.	17,965.	9,873.
23	Insurance		Approximately and the second		
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 0.)	523,186.	399,714.	79,681.	43,791.
а		84,926.	64,884.	12,934.	7,108.
b	EQUIPMENT RENTAL, REPAI	57,937.	44,264.	8,824.	4,849.
C		53,827.	41,124.	8,198.	4,505.
C		-9,449.	25,254.	-37,470.	2,767.
e	All other expenses	4,514,104.	3,469,986.	663,965.	380,153.
25	Total functional expenses. Add lines 1 through 24e	4,314,104.	3,403,300.	303,303.	
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined		W.		
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2019)
0220	10 01-20-20				

Form 990 (2019)

Part X | Balance Sheet

Par	tΧ	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X	T	······	
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	2,128,679.	2	3,668,102.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	18,840.	4	37,516.
	5	Loans and other receivables from any current or former officer, director,		4.00	
	-	trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
	8	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net	110 001	7	TO 000
Assets	8	Inventories for sale or use	142,391.	8	78,922.
As	9	Prepaid expenses and deferred charges	22,046.	9	33,786.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 18,602,693.	11 055 061		10 020 070
	b	Less: accumulated depreciation 10b 7,663,823.	11,257,261.	10c	10,938,870.
	11	Investments - publicly traded securities	4,250,453.	11	4,630,274.
	12	Investments - other secur <mark>ities.</mark> See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	10 010 670	15	10 207 470
	16	Total assets. Add lines 1 through 15 (must equal line 33)	17,819,670.	16	19,387,470. 657,936.
	17	Accounts payable and accrued expenses	406,925.	17	037,930.
	18	Grants payable	100 240	18	4,467.
	19	Deferred revenue	109,349.	19	4,407.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			
Ĭ		trustee, key employee, creator or founder, substantial contributor, or 35%		22	
Liabilities		controlled entity or family member of any of these persons	29,449.	23	9,003.
_	23	Secured mortgages and notes payable to unrelated third parties	3,609,999.	24	3,721,866.
	24	Unsecured notes and loans payable to unrelated third parties	3,003,333.	24	3//22/0000
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	6,832.	25	19,249.
		of Schedule D	4,162,554.	26	4,412,521.
8-	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here ► X			
Ŋ		and complete lines 27, 28, 32, and 33.			
nce	07	Net assets without donor restrictions	13,271,665.	27	14,597,398.
ala	27	Net assets with donor restrictions	385,451.	28	14,597,398. 377,551.
В	28	Organizations that do not follow FASB ASC 958, check here			
Fun		and complete lines 29 through 33.			Name of
or	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	13,657,116.	32	14,974,949.
Z	33	Total liabilities and net assets/fund balances	17,819,670.	33	19,387,470.
	1 00				Form 990 (20

	t XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI	·····						
1 2 3 4 5 6 7 8	Check if Schedule O contains a response or note to any line in this Part XI 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 9	5,625 4,514 1,111 13,657	1,10 L,25	04. 58. L6.			
9 10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		44.0=		4.0			
10	column (B))	10	14,97	1,94	<u>49.</u>			
Pa	rt XIII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII			Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.	- 2a		X			
2a	Were the organization's illiancial statements complicator formation of an interpretation	on a						
b	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?							
С	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 C onsolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,							
review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?								
b	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	red audit	3b					
	or audits, explain why on schedule of and describe any steps taken to undergo such addition		Form	990	(2019)			

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

t.
Z. Open to Publ Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number 87-0221612

OMB No. 1545-0047

	GIR	7 2	COUTS	OF	UIAI.			magal concerns			
Part I	Reason for Public								instructions.		
The organ	ization is not a private foun	dation	because it	is: (Fo	or lines	1 through 12, ch	eck only o	ne box.)			
1	A church, convention of c	hurche	s, or assoc	ciation	of chui	ches described	in section	170(b)(1)	(A)(i).		
2 🔲	A school described in sec	tion 1	70(b)(1)(A)	(ii). (A	ttach S	chedule E (Form	990 or 990	0-EZ).)			
3	A beenital or a aconorativ	hoer	ital service	organ	ization	described in se	ction 170(b)(1)(A)(iii)		A 92 807 938	
4	A medical research organ	ization	operated i	n conj	unction	with a hospital	described i	in section	170(b)(1)(A)(iii). Enter t	the hospital's name,	
4	city and state:										
5	An organization operated	for the	benefit of	a colle	ege or u	niversity owned	or operate	d by a gov	ernmental unit describe	d in	
5 L	section 170(b)(1)(A)(iv).										
c [A fodoral state or local of	overnr	nent or gov	/ernme	ental ur	it described in	section 17	0(b)(1)(A)(v).		
6 -	A receptation that parm	ally re	coives a si	ıhstan	tial part	of its support fr	om a gove	rnmental u	nit or from the general p	ublic described in	
7 📖	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 descri	comp	cootion 1	70(h)(1	\/ \ \/\/i\	(Complete Part	: 11.)				
8 📙	An agricultural research of	sed III	ation doco	ibod i) cocti	on 170(h)(1)(A)(i	ix) operate	d in coniu	nction with a land-grant	college	
9	or university or a non-land	rganiz	ation desci	Ded II	Huro /o	on trouble tions	Enter the r	name city.	and state of the college	or	
		i-grant	college of	agricu	iture (S	e mstructions).	Littor the f	iarrio, oity,	u., u		
	university: An organization that norm	-				1/00/ of its supp	oort from c	ontribution	ns, membership fees, an	d gross receipts from	
10 X	An organization that norn	nally re	ceives: (1)	more 1	nan 33	1/3% Of its supp	and (2) no	more than	33 1/3% of its support f	rom gross investment	
	activities related to its ex	empt f	unctions - s	subject	to cer	ain exceptions,	and (2) no	niore triair	ad by the organization a	fter June 30, 1975.	
	income and unrelated bu			come (less se	ction 511 tax) fro	m busines	ses acquir	ed by the organization a	ator dano do, rerer	
	See section 509(a)(2). (0	omple	te Part III.)				(t · O		10(0)(4)		
11	An organization organize	d and	operated e	xclusiv	ely to t	est for public sa	rety. See \$	section 50	e of orto corn out the	nurnoses of one or	
12	An organization organize	d and	operated e	xclusiv	ely for	the benefit of, to	perform tr	ne function	One and the series 500(a)(3)	Chack the box in	
	more publicly supported	organi	zations des	scribed	in sec	ction 509(a)(1)	r section t	509(a)(2).	See section 509(a)(s).	SHECK THE DOX III	
	lines 12a through 12d tha	at desc	ribes the t	ype of	suppoi	ting organization	n and comp	plete lines	12e, 12f, and 12g.	on no o	
a	Type I. A supporting or	g <mark>aniz</mark> a	tion opera	ted, su	ıpervise	ed, or controlled	by its supp	orted orga	anization(s), typically by	giving	
	the supported organiza	ıtion(s)	the power	to reg	ula <mark>r</mark> ly a	ppoint or elect a	majority o	f the direc	tors or trustees of the su	ipporting	
	organization. You mus	t com	plete Part	IV, Se	ctions.	A and B.				w.	
b	Type II. A supporting of	rgani <mark>z</mark>	ation supe	rvised	or cont	rolled in connec	tion with its	s supporte	d organization(s), by hav	ring	
	control or managemen	t of the	supportin	g o <mark>rga</mark>	nizatio	n vested in the s	ame perso	ns that co	ntrol or manage the supp	ported	
	organization(s). You m	ust co	mplete Pa	rt IV, S	Section	s A and C.					
с	Type III functionally in	itegra	ted. A sup	porting	g or <mark>gan</mark>	zation operated	in connect	tion with, a	and functionally integrate	ed with,	
	its supported organiza	tion(s)	(see instru	ctions)	. You i	nust complete	Part IV, Se	ections A,	D, and E.		
d [Type III non-functions	ally int	egrated. A	supp	orti <mark>ng c</mark>	rganization oper	rated in co	nnection w	ith its supported organization	zation(s)	
	that is not functionally	integra	ated. The o	rganiz	ation ge	enerally must sat	tisfy a distr	ibution rec	quirement and an attentiv	veness	
	requirement (see instru	ctions). You mu	st con	nplete l	Part IV, Sections	s A and D,	and Part	V.		
е 🗆	Check this box if the o	rganiza	ation receiv	ed a v	vritten o	determination fro	m the IRS	that it is a	Type I, Type II, Type III		
6 _	functionally integrated										
4 En	ter the number of supporte				,	- g	5 5				
	ovide the following informat			porte	d organ	ization(s).					
g Fit	(i) Name of supported	lon ab	(ii) EIN	porto	(iii) Typ	e of organization	(iv) Is the orga	anization listed ing document?	(v) Amount of monetary	(vi) Amount of other	
	organization					bed on lines 1-10 (see instructions))	Yes	No	support (see instructions)	support (see instructions)	
					above	(See motractiona)					
								-			
		H H				W	_				
		u d	lic surcents	S California	J17 11 74	1755 FF 1	2 St. St. W. 19.				

Schedule A (Form 990 or 990-EZ) 2019 GIRL SCOUTS OF UTAH 87-0221 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
-	ization's benefit and either paid to					1	
	or expended on its behalf						
2	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3						
4		grade de la constitución de la c	Para lare tree and		Autoria de la compansión de la compansió		
5	The portion of total contributions			100			
	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,				3.74		
	column (f)	8 3 3 2 3 6 4 6 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6					
	Public support. Subtract line 5 from line 4.	SERVICE PRINCE		1,010/03/2016/03/10/20	10 (10 m) 10 m 10 m) 10 m	50.162-0.0128-0.1606-0.00	
	ction B. Total Support	(-) 0015	(h) 0016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(6) 2017	(u) 2010	(6) 2010	(1) 10 (4)
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)				-2	All Agents of the Control of the Con	
11	Total support. Add lines 7 through 10			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
12	Gross receipts from related activities	, etc. (see inst <mark>ruc</mark> tion	ons)			12	
13	First five years. If the Form 990 is for	r the organiza <mark>ti</mark> on':	s first, second, thi	rd, fourth, or fifth t	ax year as a section	n 501(c)(3)	
	organization, check this box and sto	p here					
Se	ction C. Computation of Publ	ic Support Per	centage				
14	Public support percentage for 2019	(<mark>l</mark> ine 6, column (f) d	ivided by line 11, o	column (f))		14	%
15	Public support percentage from 201	8 Schedule A, Part	II, line 14			15	%
16	33 1/3% support test - 2019. If the	organization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or m	nore, check this box	and
	stop here. The organization qualifies	as a publicly supp	orted organization	1			▶∟
ŀ	33 1/3% support test - 2018. If the	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qua	lifies as a publicly	supported organiz	ation			▶∟
178	a 10% -facts-and-circumstance <mark>s</mark> tes						
	and if the organization meets the "fa-						
	meets the "facts-and-circumstances"						
ı	10% -facts-and-circumstances tes						
•	more, and if the organization meets t						
	organization meets the "facts-and-cir						>
1Ω	Private foundation. If the organizati						▶ □
10	vate roundation. It the organizati	did not oncon a	27. 27. 11.13 10, 10	,,		edule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2019 GIRL SCOUTS OF UTAH Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section	A. Public Support						
	ear (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	grants, contributions, and						
	bership fees received. (Do not			_		200 106	1050507
	de any "unusual grants.")	355,468.	554,256.	227,296.	420,441.	302,126.	1859587.
	s receipts from admissions,						
merc	handise sold or services per-						
	ed, or facilities furnished in			1			26041010
any a	activity that is related to the nization's tax-exempt purpose	6761533.	7191932.	7555027.	7180501.	7552817.	36241810.
	s receipts from activities that						
	not an unrelated trade or bus-						
	s under section 513						
	revenues levied for the organ-						
	on's benefit and either paid to						
	spended on its behalf						
	value of services or facilities						
	shed by a governmental unit to						
	organization without charge						
	al. Add lines 1 through 5	7117001.	7746188.	7782323.	7600942.	7854943.	38101397.
	ounts included on lines 1, 2, and						
	ceived from disqualified persons	61,500.	341,088.	61,500.	35,000.	78,500.	577,588.
	ints included on lines 2 and 3 received						
from o	other than disqualified persons that					6	_
	ed the greater of \$5,000 or 1% of the int on line 13 for the year						0.
	lines 7a and 7b	61,500.	341,088.	61,500.	35,000.	78,500.	577,588.
	lic support. (Subtract line 7c from line 6.)	Principal of the state of the s	A MISTON			100	37523809.
Section	n B. Total Support						
	year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	ounts from line 6	7117001.	7746188.	7782323.	7600942.	7854943.	38101397.
	ss income from interest,						
divid	dends, payments received on						
sect	urities loans, rents, royalties, income from similar sources	65,928.	74,861.	86,313.	100,998.	82,188.	410,288.
	elated business taxable income						
	s section 511 taxes) from businesses						
	uired after June 30, 1975						
	d lines 10a and 10b	65,928.	74,861.	86,313.	100,998.	82,188.	410,288.
11 Net	income from unrelated business						
acti	vities not included in line 10b,				1		
	ether or not the business is						
	ularly carried oner income. Do not include gain						NECOSIO 2000 DE CONTONA
or le	oss from the sale of capital	130,476.	75,930.				206,406.
ass	ets (Explain in Part VI.)	7313405.			7701940.	7937131.	38718091.
13 1018	al support. (Add lines 9, 10c, 11, and 12.) st five years. If the Form 990 is fo	or the organization'	's first, second, thi			n 501(c)(3) organi:	zation,
		I the organization	0 11101, 00001111, 1111	, , , , , , , , , , , , , , , , , , , ,			>
Section	n C. Computation of Pub	ic Support Pe					
45 Dul	blic support percentage for 2019	(line 8 column (f)	divided by line 13.	column (f))		15	96.92 %
15 Pul	blic support percentage from 201	8 Schedule A Part	III. line 15			16	96.58 %
16 Put	on D. Computation of Inve	stment Incom					
300110	estment income percentage for 2	2019 (line 10c colu	umn (f) divided by	line 13, column (f))		17	1.06 %
40	setment income percentage from	2018 Schedule A	Part III, line 17			18	1.15 %
18 Inv	1/3% support tests - 2019. If the	e organization did	not check the box	on line 14, and lin	ne 15 is more than	33 1/3%, and line	17 is not
19a 33	ore than 33 1/3%, check this box	and stop here The	e organization qua	lifies as a publicly	supported organiz	ation	▶ X
mo	1/3% support tests - 2018. If the	e organization did	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	
b 33	1/3% support tests - 2018. If the end of the	ack this boy and	stop here. The org	anization qualifies	as a publicly supp	orted organization	· ▶ □
line	e 18 is not more than 33 1/3%, ch ivate foundation. If the organizat	ion did not chack	hox on line 14. 1	9a. or 19b. check	this box and see in	structions	>
20 Pri	ivate foundation. If the organization	on did not check a	LOCK OIT III O 1-F, T	,	Sc	hedule A (Form 9	90 or 990-EZ) 2019

Part IV Supporting Organizations

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

	11.000				
Section A	A. All	Suppo	rting	Organ	izations

- 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.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizat<mark>io</mark>ns added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the orga<mark>ni</mark>zat<mark>io</mark>n's organizin<mark>g</mark> 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.
- 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 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990 EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

75.5.2027	Yes	No
1		77.0
2		
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<u>ou</u>		20
3b		
	W. 15-5	
3c		
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4b	200	
4c		
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5b	7.11	
5c	a 190 A	
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of the second		
9b		
9c		-
10a		
10b	epress's	

Sche	dule A (Form 990 or 990-EZ) 2019 GIRLI BCOOLS OF GIRLI			
Pa	rt IV Supporting Organizations (continued)		Voc	No
		2.7	Yes	NO
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	11a		
	below, the governing body of a supported organization?	11b		
b	A family member of a person described in (a) above?	11c		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	110		
Sec	tion B. Type I Supporting Or <mark>g</mark> anizations		Yes	No
120	and the power to			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			G .
	controlled the organization's activities. If the organization had more than one supported organization,		50.	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		
128	organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	744.4	E	
2	organization operate for the benefit of any supported organization of the that the supported organization of the that the supported organization? If "Yes," explain in		1	
			Lala.	-
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
500	supervised, or controlled the supporting organization. Stion C. Type II Supporting Organizations			
360	Chort C. Type it Supporting Organizations		Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	26.4	12.5	
1	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sac	the supported organization(s). ction D. All Type III Supporting Organizations			
360	CHOILD: All Type III oupporting organizations		Yes	No
	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	12		
1	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ıs).		
a				
b				
c	Dent VII.	nstructions	3)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			plant.
	those supported organizations and explain how these activities directly furthered their exempt purposes,			le ari
	how the organization was responsive to those supported organizations, and how the organization determined			die.
	that these activities constituted substantially all of its activities.	2a		_
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	114		
	reasons for the organization's position that its supported organization(s) would have engaged in these	1	1	1
	activities but for the organization's involvement.	2b		+
3	Parent of Supported Organizations. Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		3	
	trustees of each of the supported organizations? Provide details in Part VI.	3a	7:	
k	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		B. S. S.	+-
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	Organ	izations	+ \ //\
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust on I	Nov. 20, 1970 (explain in Pa	rt VI). See instructions. Al
	other Type III non-functionally integrated supporting organizations must con	plete Se	ctions A through E.	(D) O
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
	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		
<u>7</u> 8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	on 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):			
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		/
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other	100	to grade the second	
	factors (explain in detail in Part VI):	1995	1.11	
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5	Mary Commence	
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 instructions).	ly integrat	ted Type III supporting orga	nization (see

chedule A (Form 990 or 990-EZ) 2019 GIRL SCOUTS	OF UTAH		7-0221612 Page
Part V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Orgar	nizations (continued)	
ection D - Distributions			Current Year
to accomplish a	kempt purposes		
	npt purposes of supported		
organizations, in excess of income from activity			The state of the s
id to appropriate exemption exempt purpo	ses of supported organizations		
	, coo or eapperson g		
o us I i i i a sum to (prior IDC approval required)			
6 Other distributions (describe in Part VI). See instructions.			
 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which 	the organization is responsive		
	The organization is responsive		
(provide details in Part VI). See instructions.			
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by line 9 amount	(3)	(ii)	(iii)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6		W. State of the st	
2 Underdistributions, if any, for years prior to 2019 (reason-			
able cause required- explain in Part VI). See instructions.	KIND OF BUILDING		
3 Excess distributions carryover, if any to 2019			
a From 2014			
b From 2015			
	The second second second	Mr.	
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years	State of the state		
h Applied to 2019 distributable amount	1 / A / A / A / A / A / A / A / A / A /	of Military Commission Commission	OV 10 value 1
i Carryover from 2014 not applied (see instructions)		Zana kana wa Danie ili wa	
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D,			
line 7:			
a Applied to underdistributions of prior years		Polyton was a series of the	100 100 100 100 100 100 100 100 100 100
b Applied to 2019 distributable amou <mark>nt</mark>			SECTOR LANG.
c Remainder. Subtract lines 4a and 4b from 4.	Mark Mark St. St. And C. Mark Mark Mark St. Co. V.		
5 Remaining underdistributions for years prior to 2019, if	and the second second		
any. Subtract lines 3g and 4a fr <mark>om li</mark> ne 2. For resu <mark>l</mark> t greate	er		172
than zero, explain in Part VI. See instructions.			MSk -
6 Remaining underdistributions for 2019. Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j			
and 4c.			KA MATERIAL TO THE STATE OF THE
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017		The second second	
d Excess from 2018			NEED W
e Excess from 2019			

Schedule A	(Form 990 or 990-F	=7) 201	9 G	IRL	sco	UT	S	OF	UTAH					87-0	22161	12 p	age 8
Part VI	(Form 990 or 990-E Supplementa Part IV, Section A line 1; Part IV, Se Section D, lines 5 (See instructions.)	, li <mark>n</mark> es ction D , 6, and	1, 2,	3b, 3c,	4b, 40	c, 5a,	6,	9a, 9	b, 9c, 11a, 11 F lines 1c 2	b, and 11 a. 2b. 3a.	lc; Part IV, and 3b: P	, Section E Part V. line	3, lines 1 : 1: Part V.	and 2; Pa Section	art IV, Sed B, line 1e	ction C,	, /,
											v						
									100 000								
																	
														-			
																	<u> </u>
		-															
-				-													
												W1					
										·							

Schedule B

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

Department of the Treasury

Schedule of Contributors

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

Employer identification number

Name of the organization		Employer Identification number
GI	RL SCOUTS OF UTAH	87-0221612
Organization type (check or		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Check if your organization is Note: Only a section 501(c)(s cove <mark>red by the General Rul</mark> e or a Special Rule. (7), (8) <mark>, or (10) organization can check boxes for both the General Rule and a Special Ru</mark>	le. See instructions.
General Rule		
X For an organization property) from any	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor	g \$5,000 or more (in money or s total contributions.
Special Rules		
sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount, line 1. Complete Parts I and II.	or 16b, and that received from
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or edulty to children or animals. Complete Parts I, II, and III.	any one contributor, during the cational purposes, or for the
year, contributions is checked, enter h purpose. Don't co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, charitable, etc., purposes, but no such contributions totaled no here the total contributions that were received during the year for an exclusively religious mplete any of the parts unless the General Rule applies to this organization because it le, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000. If this box us, charitable, etc., received <i>nonexclusively</i>
but it must answer "No" or	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (In Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its I the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	Form 990, 990-EZ, or 990-PF), Form 990-PF, Part I, line 2, to
LHA For Paperwork Reduct	ion Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedul	e B (Form 990, 990-EZ, or 990-PF) (2019)

Employer identification number

GIRL SCOUTS OF UTAH

Part I	Contributors (see instructions). Use duplicate copies of P	art I if additional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
1_		\$\$ Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
2		\$ 15,000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
No. 3	Name, address, and an	\$ 30,000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
4		\$ 15,000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
5		\$ 5,000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
6		\$ 59,500. Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

CIDI	COOTIMC	$O_{\mathbf{L}}$	TIMALI
GIRL	SCOUTS	Or	UIAI

Part I	Contributors (see	e instruc	t <mark>ions). Use</mark>	duplicat	есо	pies of Part I if additional sp	pace is needed.	
(a) No.		Name,	(b) address,	and ZI P	+ 4		(c) Total contributions	(d) Type of contribution
7							\$	Person X Payroll
(a) No.		Name	(b) , address,	and ZIP	+ 4		(c) Total contributions	(d) Type of contribution
8							\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)		Nama	(b)	and ZID			(c) Total contributions	(d) Type of contribution
		ivame	, address,				\$5,000.	Person X Payroll
(a)		Name	(b)		+ 4		(c) Total contributions	(d) Type of contribution
		Name	, address				\$5,000.	Person X Payroll
(a) No.		Name	(b) e, address		+ 4	4	(c) Total contributions	(d) Type of contribution
11_							\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.		Name	(b) e, address		0 + 4	4	(c) Total contributions	(d) Type of contribution
12							\$7,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

GIRL	SCOUTS	OF	UTAH
------	--------	----	------

Part I	Contributors (see	instruc	tions). Use	duplicate	copies o	Part I if additional space is needed.	
(a) No.		Name,	(b) address, a	and ZIP	+ 4	(c) Total contributions	(d) Type of contribution
13							Person X Payroll Noncash Complete Part II for oncash contributions.)
(a)		Name	(b) address,	and ZIP	+ 4	(c) Total contributions	(d) Type of contribution
14							Person X Payroll Noncash Complete Part II for loncash contributions.)
(a)		2504	(b) , address,			(c) Total contributions	(d) Type of contribution
		Name	, audi 655,	and 211		\$\$,904.	Person X Payroll
(a) No.		Name	(b) , address,	and ZIP	+ 4	(c) Total contributions	(d) Type of contribution
16		Name	, addi eee,			\$\$,000.	Person X Payroll
(a) No.		Name	(b) , address,	and ZIP	+ 4	(c) Total contributions	(d) Type of contribution
17							Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.		Name	(b)		+ 4	(c) Total contributions	(d) Type of contribution
18							Person X Payroll

Employer identification number

GIRL SCOUTS OF UTAH

Part II N	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
- -		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
=		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
- -		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_ =		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1		\$	

Employer identification number

RL SCO	JTS OF UTAH		87-0221612
rt III Exc from	lusively religious, ch <mark>aritable, etc., contributi</mark> n any one contributor. Complete columns (a)	ons to organizations described in section through (e) and the following line entry. For	501(c)(7), (8), or (10) that total more than \$1,000 for the year organizations
com Use	pleting Part III, enter the <mark>t</mark> otal of exc <mark>lu</mark> sively religious, on the duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 or less to space is needed.	r the year. (Enter this info. once.)
No. om	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ _			
-		(e) Transfer of gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
art I			
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ =		(e) Transfer of gift	
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
$- \Xi$			
		(e) Transfer of gift	
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
100000			

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 Open to Public Inspection

Name of the organization

Employer identification number 87-0221612

	GIRL SCOUTS OF UTAH	87-0221612
Par	Organizations Maintaining Donor Advised Funds or Other Similar Funds or Funds or Other Funds or Othe	counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year	
	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	ds
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fund	Yes No
	are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used o	ding
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confern	X Yes No
	impermissible private benefit?	
Par		, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	and the state of t
	Preservation of land for public use (for example, recreation or education) Preservation of a histo	orically important land area
	X Protection of natural habitat Preservation of a cert	ified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	nservation easement on the last
2	day of the tax year.	Held at the End of the Tax Year
120	Total number of conservation easements	2a 1
a		2b 59.00
b	Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a)	2c 0
С	Number of conservation easements on a certified historic structure included in (a)	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure	2d 1
	listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	iization during the tax
	year ▶1	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	v l
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservations	on easements during the year
	220	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation ea	asements during the year
•	▶ \$ 0.	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B	3)(i)
Ü	and section 170(h)(4)(B)(ii)?	
0	In Part XIII, describe how the organization reports conservation easements in its revenue and expense stater	ment and
9	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements the	nat describes the
	experiention to accounting for conservation easements	
Pa	rt III Organizations Mai <mark>ntai</mark> ning Collections of Art, Historical Treasures, or Other S	Similar Assets.
1 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and ba	lance sheet works
1a	If the organization elected, as permitted under PASB ASC 936, not to report in its revenue statement and sa	ance of public
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furthera	and or public
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	an about works of
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance	ce sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance	se of public service,
	provide the following amou <mark>nts r</mark> ela <mark>tin</mark> g to these items:	. .
	(i) Revenue included on Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	• \$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain,	, provide
10 mars	the following amounts required to be reported under FASB ASC 958 relating to these items:	
а	Decided as Farm 000 Port VIII lipo 1	• \$
	Assets included in Form 990. Part X	> \$

Sched	ule D (Form 990) 2019 GIRL SCC	UTS OF UTAI	ΗΕ			221612 Page 2			
Parl	III Organizations Maintaining Co	llections of Art,	Historical Trea	sures, or Othe	r Similar Asse	ts (continued)			
3	Using the organization's acq <mark>u</mark> isiti <mark>on, a</mark> ccessio	n, and other records,	check any of the fo	llowing that make s	ignificant use of its	S			
	collection items (check all that apply):								
а	d Loan or exchange program								
b	Scholarly research	е	Other						
_	Preservation for future generations								
4	Provide a description of the organization's col	lections and explain I	now they further the	e organization's exe	mpt purpose in Pa	art XIII.			
5	During the year, did the organization solicit or	receive donations of	art, historical treasu	ures, or other simila	r assets				
	to be sold to raise funds rather than to be mai	ntained as part of the	organization's coll	ection?		Yes No			
Par	t IV Escrow and Custodial Arrang	ements. Complet	e if the organizatior	answered "Yes" or	n Form 990, Part IV	V, line 9, or			
	reported an amount on Form 990, Part	X, line 21.							
1a	Is the organization an agent, trustee, custodia	ın <mark>or o</mark> ther intermedia	ry for contributions	or other assets not	included				
	on Form 990, Part X?				L	Yes No			
b	If "Yes," explain the arrangement in Part XIII a	ind complete the follo	wing table:						
						Amount			
С	Beginning balance				1c				
	Additions during the year				1d				
е	Distributions during the year				1e				
f	Ending balance				1f	□v □ N-			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	21, for escrow or cu	stodial account liab	ility?!	Yes No			
b	If "Yes," explain the arrangement in Part XIII.	Check here if the exp	lanation has been p	provided on Part XIII	10				
Par	t V Endowment Funds. Complete it	f the organization ans			10.	als 1-1 Four years back			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years ba				
1a	Beginning of year balance	4,250,453.	4,497,558.	4,247,198.		TOWNSHIP TO THE PARTY OF			
b	Contributions	30,056.	28,928.						
С	Net investment earnings, gains, and losses	398,480.	186,982.	283,282.	410,00	2. 323,731.			
d	Grants or scholarships								
е	Other expenditures for facilities		442 600	156 200		44,189.			
	and programs	28,808.	443,609.			The second secon			
f	Administrative expenses	19,907.	19,406.			William Additional Company Com			
g	End of year balance	4,630,274.	4,250,453.		1,211,15	•.			
2	Provide the estimated percentage of the curr	ent year end balance) neid as:					
а	Board designated or quasi-endowment	100.00	_%						
b	Permanent endowment	%							
С	Territ endownient	%							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.			the examination				
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held ar	na administered for	trie organization	Yes No			
	by:					- W V			
	(i) Unrelated organizations	<mark></mark>							
	(ii) Related organizations								
b	If "Yes" on line 3a(ii), are the related organiza								
4	Describe in Part XIII the intended uses of the	organization's endo	vment tunas.						
Ра	rt VI Land, Buildings, and Equipm Complete if the organization answere	d IVaall on Form 000	Dart IV line 11a 9	See Form 990 Part	X line 10				
			10 S P.S	t or other (c)	Accumulated	(d) Book value			
	Description of property	(a) Cost or o			depreciation	(a) Book value			
				7,891.		4,767,891.			
1a	Land				,762,031.	5,980,478.			
- b				5,596.	165,596.	0.			
С	Leasehold improvements			6,697.	720,339.	176,358.			
	Equipment			0,000.	15,857.	14,143.			
	Other					10,938,870.			
Tota	<mark>il.</mark> Add lines 1a through 1e. <i>(Colu<mark>mn (d) must s</mark></i>	equal Form 990. Part	x. column (B). line 1	UC.)	Sche	dule D (Form 990) 2019			
					Conto				

Part VII Investments -									
				on	Fo		e 11b. See Form 990, Pa	rt X, line 12.	
(a) Description of security or cate	gory (includ	ding name of se	ecurity)			(b) Book value	(c) Method of valu	uation: Cost or end-of-y	ear market value
1) Financial derivatives	<mark>.</mark>	. <mark>.</mark>							
Closely held equity interests	3	. <mark></mark>	<mark></mark>						
3) Other		<u> </u>		-					
(A)				+	+				
(B)		10		+	-				
(C)				+					
(D)		1		+-	_				
(E)		<u> </u>	+	+	+				
(F)	_	1		+	-		-		
(G)				+	-				
(H)	0.0.11	L /D\ I	10 \ \	+	+			4. ISBN 28-18-18-1	
Total. (Col. (b) must equal Form 99 Part VIII Investments -	Drogra	col. (B) line	00	1	+			lan Maria dak kalan <u>aya .</u>	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11			1	000 Dart IV II-	- 11- Coo Form 000 Do	et V. line 12	
(a) Description of			Yes	On	F-C	(b) Book value	e 11c. See Form 990, Pa	uation: Cost or end-of-y	ear market value
	i iiivestiiii	GIIC		+		(b) Book value	(o) mounds or rain		
(1)				+					
(2)		<u> </u>		+	-				
(3)	-	2		+					
(4)	+ +	<u> </u>		+					
(5)		1		+	+				
(6)	++++	1		+					
(7)									
(8)	+	-		H	+				
(9)	O Dort V	acl (D) line	12 \						
Total. (Col. (b) must equal Form 99 Part IX Other Assets.	o, rait A,	doi: (D) line	10.)	++			PERMANER AND ASSESSMENT OF THE SECOND OF THE	(80-90-10-10-10-10-10-10-10-10-10-10-10-10-10	
		n answered	"Yes	on.	Fo	rm 990. Part IV. lin	e 11d. See Form 990, Pa	art X. line 15.	
Complete it are en	garnzanor					ription			(b) Book value
(1)	111	1		Ħ		•			
(2)				П					
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
Total. (Column (b) must equal F	orm 990.	Part X. col	. (B) lir	ne 1:	5.)				
Part X Other Liabiliti	es.								
Complete if the or	ganizatioi	n answered	l "Yes	" on	Fo	orm 990, Part IV, lin	e 11e or 11f. See Form 9	990, Part X, line 25.	
1. (a) [De <mark>scripti</mark> o	of liability	/						(b) Book value
(1) Federal income taxes									
(2) FUNDS HELD F	OR O'	THERS							19,249.
(3)									
(4)									
(5)									
(6)									
(7)									
(8)		V.							
(9)									10.015
Total. (Column (b) must equal F	orm 990.	Part X. col	(B) lii	ne 2	5.)			<u></u>	19,249.
2. Liability for uncertain tax po	os <mark>itions. I</mark>	n Part XIII,	provid	e th	ne t	ext of the footnote	to the organization's fina	ancial statements that r	eports the

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 ... X

87-0221612 Page 4 GIRL SCOUTS OF UTAH Schedule D (Form 990) 2019 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 5,817,194. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: 206,575. 2a Net unrealized gains (losses) on investments b Donated services and use of facilities 20 c Recoveries of prior year grants 2d d Other (Describe in Part XIII.) 206,575. 2e e Add lines 2a through 2d 5,610,619. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4b b Other (Describe in Part XIII.) 14,743. c Add lines 4a and 4b 5,625,362. Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 4,499,361. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2b b Prior year adjustments c Other losses 2c 2d d Other (Describe in Part XIII.) e Add lines 2a through 2d 4,499,361. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b b Other (Describe in Part XIII.) 14,743. c Add lines 4a and 4b 4,514,104. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. PART V, LINE 4: THE COUNCIL ESTABLISHED A PERMANENT FUND TO GUARANTEE FOREVER AN INDEPENDENT BASE OF FINANCIAL STABILITY TO CARRY OUT THE MISSION OF THE GIRL SCOUTS OF THE USA. PART X, LINE 2: THE COUNCIL IS ORGANIZED AS A UTAH NONPROFIT CORPORATION AND HAS BEEN

RECOGNIZED BY THE INTERNAL REVENUE SERVICE (IRS) AS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3), QUALIFIES FOR THE CHARITABLE CONTRIBUTION DEDUCTION AND HAS BEEN DETERMINED NOT TO BE A PRIVATE FOUNDATION. THE COUNCIL IS ANNUALLY REQUIRED TO FILE A RETURN OF

Part XIII Supplemental Information (continued)
ORGANIZATION EXEMPT FROM INCOME TAX (FORM 990) WITH THE IRS. IN ADDITION,
THE COUNCIL IS SUBJECT TO INCOME TAX ON NET INCOME THAT IS DERIVED FROM
BUSINESS ACTIVITIES THAT ARE UNRELATED TO ITS EXEMPT PURPOSE. THE COUNCIL
HAS DETERMINED IT IS NOT SUBJECT TO UNRELATED BUSINESS INCOME TAX AND HAS
NOT FILED AN EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN (FORM 990-T)
WITH THE IRS TO REPORT ITS UNRELATED BUSINESS TAXABLE INCOME.
THE COUNCIL BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS
TAKEN AFFECTING ITS ANNUAL FILING REQUIREMENTS, AND AS SUCH, DOES NOT HAVE
ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS.
THE COUNCIL WOULD RECOGNIZE FUTURE ACCRUED INTEREST AND PENALTIES RELATED
TO UNRECOGNIZED TAX BENEFITS AND LIABILITIES IN INCOME TAX EXPENSE IF SUCH
INTEREST AND PENALTIES ARE INCURRED.
0.1.1.0.00.000

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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

Open to Public Inspection

Employer identification number

Name of the organization					ntification number
GIR <mark>L SC</mark> O	UTS OF UTAH			87-0221	
	Complete if the organization answe	red "Yes" on	Form 990, Part IV, lir	ne 17. Form 990-EZ	filers are not
required to complete this part.	Le la	a potivition (Shock all that apply		
1 Indicate whether the organization raise	d funds through any of the following	ion of non-a	overnment grants		
a Mail solicitations			nment grants		
b Internet and email solicitations		fundraising 6			
c Phone solicitations	g Special	iunuraising e	Sventa		
d In-person solicitations	L with any individual	(including of	ficers directors trust	ees. or	
2 a Did the organization have a written or key employees listed in Form 990, Pa	oral agreement with any individual	ofossional fi	indraising services?	Yes	No
b If "Yes," list the 10 highest paid indiv	duals or optition (fundraisers) pursu	ant to agreer	ments under which th	e fundraiser is to be	
compensated at least \$5,000 by the	organization	ant to agree.			
compensated at least \$5,000 by the	organization.				
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes No			
Total		>			
 List all states in which the organization or licensing. 	n is registered or licensed to solicit	contributions	s or has been notified	l it is exempt from re	egistration
or noorieng.					
LHA For Paperwork Reduction Act Not	ice, see the Instructions for Form	990 or 990-	EZ.	Schedule G (Form	990 or 990-EZ) 201

		of fundraising event contributions and gr	oss inco	ome on Form 990)-EZ, line	s 1 and 6b. List e	vents with gross	receipts	s greater than \$5,000.
T				a) Event #1	(t) Event #2	(c) Other ever	nts	(d) Total events
			UTAI	H DAY OF	CAME	ING FOR	NONE		(add col. (a) through
			THE	GIRL	A CA	USE			col. (c))
				(event type)	(event type)	(total numbe	er)	5511 (5)/
nue						01 045			1/1 776
Revenue	1	Gross receipts		119,781.		21,945.	ļ		141,726.
<u>a</u>					lu .				
	2	Less: Contributions			-				
				119,781.		21,945.			141,726.
	3	Gross income (line 1 minus line 2)		117,701.	+	21,5101			
	4	Cash prizes							
	5	Noncash prizes							
Direct Expenses	_	Rent/facility costs		7,848.			·		7,848.
xper	6	Reniziaciiity costs		,,,,,,,					
ot E	7	Food and beverages		14,885		925.			15,810.
Dire	85.1	ğ							
	8	Entertainment		10.001		F 157			23,551.
	9	Other direct expenses		18,394					47,209.
	10								94,517.
	11	Net income summary. Subtract line 10 from	line 3, c	column (d)				P	74,517.
Pa	rt	2002	n answe	red "Yes" on For	m 990, F	aπ IV, line 19, or	reported more tri	an	
		\$15,000 on Form 990-EZ, line 6a.		-	(b)	Pull tabs/instant	T		(d) Total gaming (add
e e				(a) Bingo		progressive bingo	(c) Other gan	ning	col. (a) through col. (c)
Revenue			-						
Re									
	1	Gross revenue							
	2	Cash prizes							
ses	-	Gd611 p11200				ii ii			
Expenses	3	Noncash prizes							
t EX									
Direct	4	Rent/facility costs	-		_				
	5	Other direct expenses		Yes 9		Yes %	Yes	%	
	6	Volunteer labor	IH	No /		No No	No No		
	٥	Volunteer label	- 1						
	7	Direct expense summary. Add lines 2 throu	gh 5 in d	column (d)				▶	
	8	Net gaming income summary. Subtract line	7 from	line 1, column (d)				🕨	
9		nter the state(s) in which th <mark>e organ</mark> ization con							
		the organization licensed to conduct gaming	activitie	s in each of thes	e states'	?			Yes No
Ł) If	"No," explain:							
-	_	/ere any of the organization's gaming licenses	rovelis	d cueponded e-	terminat	ed during the tay	vear?		Yes No
			revoked	a, suspended, or	terrillia	ed during the tax	Joan	,	
ı	דו כ	"Yes," explain:							
	-								

Cab	edule G (Form 990 or 990-EZ) 2019 GIRL SCOUTS OF UTAH	87-02	21612	Page 3
3011	Does the organization conduct gaming activities with nonmembers?	[Yes	No No
11	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
12	to administer charitable gaming?	[Yes	No
	Indicate the percentage of gaming activity conducted in:	1/54540401040		
13	Indicate the percentage of garning activity conducted in.		13a	%
а	The organization's facility		13b	%
b	An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and record			,
14	Enter the name and address of the person who prepares the organization's garning/special events been and reserve			
	Name			
	Address			
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	No
k	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amo	ount		
	of gaming revenue retained by the third party > \$			
	e If "Yes," enter name and add <mark>ress</mark> of <mark>th</mark> e third party:			
	Name			
	Address ►			
16	Gaming manager information:			
	Name			
	Couries responses companyation			
	Gaming manager compensation \$			
	Description of services provided			
	Description of solviese provides			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
17	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		
	organization's own exempt activities during the tax year > \$			
D	art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v)	; and Part	III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
_	15b, 15c, 16, and 17b, as applicable. Also provide any additional morniation.			
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-	Schedul	e G (Form	990 or 99	0-EZ) 2019

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87-0221612 Page 4	OF UTAH	SCOUTS	GIRL S	990-EZ)	6 (Form 990 or 9	Schedule (
		ontinued)	rmation (co	ental Infor	Suppleme	Part IV
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Schedule G (Form 990 or 990-EZ						
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer identification number

87-0221612 GIRL SCOUTS OF UTAH FORM 990, PART VI, SECTION A, LINE 6: ACCORDING TO GSU'S BYLAWS, THE GIRL SCOUTS IS A MEMBERSHIP ORGANIZATION. FORM 990, PART VI, SECTION A, LINE 7A: ACCORDING TO GSU'S BYLAWS, MEMBERS OF THE GSU BOARD OF DIRECTORS ARE ELECTED BY GSU DELEGATE MEMBERS TO SERVE ON THE BOARD. FORM 990, PART VI, SECTION A, LINE 7B: ACCORDING TO THE GSU BYLAWS, GSU DELEGATE MEMBERS MUST APPROVE OF ANY PROPOSED AMENDMENTS TO THE GSU CONSTITUTION AND BYLAWS IF THE AMENDMENT CONCERNS: THE VOTING RIGHTS OF MEMBERS; ELECTION OF THE BOARD OF DIRECTORS AND THE NOMINATING COMMITTEE; GSU'S AFFILIATION WITH GSUSA; AND/OR THE DISSOLUTION AND DISTRIBUTION OF ASSETS FORM 990, PART VI, SECTION B. LINE 11B: REQUIRED TO PROVIDE FORM 990 TO GOVERNING BODY PRIOR TO FILING AND BOARD APPROVAL. FORM 990, PART VI, SECTION B, LINE 12C: ANY POSSIBLE POTENTIAL CONFLICT OF INTEREST SHALL BE DISCLOSED IN WRITING TO THE CHAIR OF THE COUNCIL BOARD OF DIRECTORS BY THE INDIVIDUAL CONCERNED PRIOR TO ENGAGING IN CONFLICT OF INTEREST ACTION. WHEN ANY SUCH CONFLICT OF INTEREST IS RELEVANT TO A MATTER REQUIRING ACTION BY THE BOARD, THE INTERESTED PERSON SHALL CALL IT TO THE ATTENTION OF THE CHAIR, AND SUCH PERSON SHALL NOT VOTE ON THE MATTER. MOREOVER, THE PERSON HAVING THE

CONFLICT SHALL LEAVE THE ROOM IN WHICH THE MEETING IS HELD AND NOT

PARTICIPATE IN THE FINAL DELIBERATIONS OR DECISION REGARDING THE MATTER

UNDER CONSIDERATION. THE MINUTES OF THE MEETING SHALL REFLECT THAT

CONFLICT OF INTEREST WAS DISCLOSED AND THAT THE INTERESTED PERSON WAS NOT

PRESENT DURING THE FINAL DISCUSSION OR VOTE AND DID NOT VOTE. WHEN THERE

IS A DOUBT AS TO WHETHER A CONFLICT OF INTEREST EXISTS, THE MATTER SHALL BE

RESOLVED BY VOTE OF THE BODY, EXCLUDING THAT INDIVIDUAL. IN THE EVENT THAT

A POTENTIAL CONFLICT OF INTEREST IS NOT DISCLOSED, THE MATTER SHALL BE

REFERRED TO THE BOARD FOR DETERMINATION OF CONTINUED MEMBERSHIP OF THE

INDIVIDUAL CONCERNED.

EACH STAFF MEMBER SIGNS A STAFF MEMBER CONFLICT OF INTEREST POLICY

STATEMENT INDICATING THEY HAVE READ THE POLICY STATEMENT AND UNDERSTAND THE

FACTS REGARDING POSSIBLE QUESTIONS OF VIOLATION. WHEN THE POLICY MANUAL IS

REVISED EVERY TWO YEARS, EACH STAFF MEMBER RECEIVES A FRESH COPY AND IS

ASKED TO RE-SIGN THE CONFLICT OF INTEREST POLICY STATEMENT. IF A SITUATION

OR OCCURRENCE ARISES IN WHICH A STAFF MEMBERS CONFLICT OF INTEREST IS

QUESTIONED, A FULL INVESTIGATION AND REVIEW IS CONDUCTED TO INCLUDE A

FACT-FINDING STAGE, INTERVIEW(S), EVALUATION, AND CONCLUSION. IF THERE IS

A CONFLICT OF INTEREST IN WHICH A STAFF MEMBER MAY BE SEEN AS COMPETING

WITH THE INTEREST AND CONCERNS OF GSU, ANY MATTERS THAT ARISE WILL BE

REFERRED TO THE CEO FOR NECESSARY ACTION. DISCIPLINARY ACTION, UP TO AND

INCLUDING SEPARATION OF EMPLOYMENT, MAY OCCUR.

EACH BOARD MEMBER FILES A CONFLICT OF INTEREST STATEMENT EVERY YEAR AND ARE PROVIDED WITH THE FORM AT EVERY BOARD MEETING FOR CHANGES.

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

GIRL SCOUTS OF UT COMPENSATES ITS EMPLOYEES & OFFICERS BASED ON THEIR