

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury

A For the 2022 calendar year, or tax year beginning OCT 1, 2022and ending SEP 30, 2023 D Employer identification number C Name of organization GIRL SCOUT COMMONWEALTH COUNCIL OF Address change VIRGINIA, INC. Name change 54-0534506 Doing business as Initial return E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite 804-746-0590 Final return 4900 AUGUSTA AVENUE, SUITE 200 ,638,820. termi ated G Gross receipts \$ City or town, state or province, country, and ZIP or foreign postal code Amended return RICHMOND, VA 23230 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: ELLEN MARIE HESS for subordinates? ..... Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Yes If "No," attach a list. See instructions I Tax-exempt status: X 501(c)(3) 501(c) ( (insert no.) 4947(a)(1) or 527 H(c) Group exemption number WWW.COMGIRLSCOUTS.ORG Form of organization: X Corporation Trust L Year of formation: 1913 M State of legal domicile: VA Association Other Part I | Summary 1 Briefly describe the organization's mission or most significant activities: GIRL SCOUTING BUILDS GIRLS OF Activities & Governance CONFIDENCE AND CHARACTER WHO MAKE THE WORLD A BETTER PLACE. if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 14 Number of voting members of the governing body (Part VI, line 1a) 14 4 Number of independent voting members of the governing body (Part VI, line 1b) 48 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 2233 6 Total number of volunteers (estimate if necessary) 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, Part I, line 11 7h **Prior Year Current Year** 210,601. 521,606. Contributions and grants (Part VIII, line 1h) 8 Revenue 315,365. 296,086. Program service revenue (Part VIII, line 2g) 109,377. 110,221. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 2,878,035. 2,529,942. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 3,457,011. 3,514,222. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 123,168. 81,961. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 2,120,269. 1,928,868. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 12,500. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 1,783,759. 1,531,412. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,554,741. 4,027,196. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)  $-512,\overline{974}$ -97,730. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 100 8,008,114. 8,080,241. 20 Total assets (Part X, line 16) 536,032. 680,212. 21 Total liabilities (Part X, line 26) i i ,544,209. 7,327,902. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer, (other than officer) is based on all information of which preparer has any knowledge. Ellen Marie Signature of officer Sign ELLEN MARIE HESS, CHAIR Here Type or print name and title Date PTIN Preparer's signature Print/Type preparer's name LAKRISHA J. CASTLEBERRY CASTLEBE 07/25 P01677333 LAKRISHA J. 24 self-employed Paid Firm's EIN 44-0160260 FORVIS MAZARS, LLP Preparer Firm's name SUITE 1000 Firm's address 901 EAST CARY STREET, **Use Only** Phone no. (804) 282-7636 RICHMOND, VA 23219 X Yes

No

May the IRS discuss this return with the preparer shown above? See instructions

Pai	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:  SEE SCHEDULE O
	DEE DCHEDOLE O
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 302,788. including grants of \$ 87,150. ) (Revenue \$ 44,242. )
	MEMBERSHIP IS DIRECTED TO THE RECRUITMENT, TRAINING, SUPPORT, AND
	RETENTION OF GIRL MEMBERS AND ADULT VOLUNTEERS WHO DELIVER THE GIRL
	SCOUT LEADERSHIP PROGRAM TO GIRLS IN GRADES K-12. THE GIRL SCOUT LEADERSHIP EXPERIENCE ENGAGES GIRLS IN DISCOVERING SELF, CONNECTING
	WITH OTHERS, AND TAKING ACTION TO MAKE THE WORLD A BETTER PLACE. GIRL
	SCOUTS HELPS GIRLS DEVELOP THEIR FULL INDIVIDUAL POTENTIAL, RELATE TO
	OTHERS WITH INCREASING UNDERSTANDING, SKILL, AND RESPECT, DEVELOP
	VALUES TO GUIDE THEIR ACTIONS AND PROVIDE THE FOUNDATION FOR SOUND
	DECISION MAKING, AND CONTRIBUTE TO THE IMPROVEMENT OF SOCIETY THROUGH
	THEIR ABILITIES, LEADERSHIP SKILLS, AND COOPERATION WITH OTHERS. THE
	LONG-TERM OUTCOME IS A GENERATION OF GIRLS WHO LEAD WITH COURAGE,
	CONFIDENCE AND CHARACTER. SEE SCHEDULE O FOR CONTINUATION.
4b	$(\text{Code: } \underline{\hspace{1cm}}) \text{ (Expenses \$} \underline{\hspace{1cm}} 2,588,806 \cdot \underline{\hspace{1cm}} \text{ including grants of \$} \underline{\hspace{1cm}} 36,018 \cdot \underline{\hspace{1cm}}) \text{ (Revenue \$} \underline{\hspace{1cm}} 3,149,158 \cdot \underline{\hspace{1cm}})$
	GIRL SCOUT PROGRAM ACTIVITIES - THE GIRL SCOUT LEADERSHIP EXPERIENCE IS
	RESEARCH BASED, EVIDENCE BASED AND ENCOURAGES GIRLS TO THRIVE AND GROW
	THROUGH HANDS-ON, EXPERIENTIAL AND COOPERATIVE LEARNING. ACTIVITIES  ARE CENTERED AROUND THE FOUR PROGRAM PILLARS OF STEM (SCIENCE,
	TECHNOLOGY, ENGINEERING AND MATH) THE OUTDOORS, LIFE SKILLS, AND
	ENTREPRENEURIALISM. ACTIVITIES ARE DESIGNED TO BUILD TEAMWORK,
	SELF-CONFIDENCE, AND CREATIVE PROBLEM SOLVING AND DECISION-MAKING,
	REAL-WORLD LEADERSHIP SKILLS THAT ARE IN DEMAND BY TODAY'S LEADING
	INDUSTRIES. THE MAJORITY OF GSCV GIRL MEMBERS PARTICIPATE THROUGH A
	TROOP EXPERIENCE WHERE TRAINED ADULT VOLUNTEERS DELIVER THE GIRL SCOUT
	LEADERSHIP PROGRAM. SEE SCHEDULE O FOR CONTINUATION.
4c	(Code:) (Expenses \$
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 2,891,594.
	Form <b>990</b> (2022)

Page 3

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u>X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		_X_
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		_X_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		_X_
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		_X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes " complete Schedule I, Parts I and II	21		Х

### GIRL SCOUT COMMONWEALTH COUNCIL OF

Form 990 (2022)

VIRGINIA, INC.

Part IV	Checklist of Required Schedules	(continued)
---------	---------------------------------	-------------

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			l
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			ı
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			ı
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			ı
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		<u>X</u>
	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	<b>.</b>		ı
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		х
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			ı
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	OEL		х
06	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			ı
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i>	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			ı
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
u	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			ı
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			ı
	Part V, line 1	34		_X_
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_X_
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			l
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
37	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		<u>X</u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		Ψ,	ı
Par	Note: All Form 990 filers are required to complete Schedule O  t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
ı aı				
	Check if Schedule O contains a response or note to any line in this Part V			LL.
4 -	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 16  Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	-		
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C	(gambling) winnings to prize winners?	1c	х	
232004	12-13-22		_	(2022)

Form 990 (2022) VIRGINIA, INC.

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

			Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return 2a 48								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х					
b	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		Х					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7c		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X					
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
	sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12 10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
11	Section 501(c)(12) organizations. Enter:								
a	Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources against								
b									
120	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	IZa							
13	Section 501(c)(29) qualified nonprofit health insurance 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.	100							
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans								
С	Enter the amount of reserves on hand 13c								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		х					
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х					
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Yes," complete Form 6069.								

Form **990** (2022) 232005 12-13-22

VIRGINIA INC. 54-0534506 Page 6 Form 990 (2022) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 14 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? Х 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, Х and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official 15a Х 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure VA List the states with which a copy of this Form 990 is required to be filed

Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

X Own website Another's website X Upon request Other (explain on Schedule O)

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

State the name, address, and telephone number of the person who possesses the organization's books and records ANGELA R. HENDERSON - 804-746-0590

4900 AUGUSTA AVENUE, SUITE 200, RICHMOND,

Form **990** (2022)

#### Form 990 (2022) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEĆ) of more than \$100,000 from the organization and any related organizations.

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

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

(A)	(B)			(C	<del>)</del>			(D)	(E)	(F)
Name and title	Average hours per	box	not cl , unles cer an	heck i ss per	more son is	than o	n an	Reportable compensation	Reportable compensation	Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer p		Highest compensated 5		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) MOLLY T. FULLER CEO	40.00			х				187,143.	0.	14,112.
(2) WILLIAM FLAHERTY, III	40.00			x				13,780.	0.	0.
(3) ELLEN MARIE HESS CHAIR	10.00	х		X				0.	0.	0.
(4) PAULA YOUNG	2.00	Λ		Δ				0.	0.	<u> </u>
VICE CHAIR	0.00	Х		Х				0.	0.	0.
(5) LIZ BRYANT SECRETARY - TERM ENDED APRIL 2023	2.00	х		х				0.	0.	0.
(6) PATRICIA TITUS	2.00									
SECRETARY		Х		Х				0.	0.	0.
(7) COLLEEN QUINN	5.00								_	_
TREASURER - TERM ENDED APRIL 2023	<b>5</b> 00	Х		Х				0.	0.	0.
(8) REBECCA SNAVELY TREASURER	5.00	х		х				0.	0.	0.
(9) SYLVIA BUFFINGTON-LESTER	1.00	27						0.	0.	<u></u>
BOARD MEMBER		Х						0.	0.	0.
(10) SHENA CRITTENDON	1.00									
BOARD MEMBER - TERM ENDED FEBRUARY 2		Х						0.	0.	0.
(11) ELISSA ECKER	1.00									_
BOARD MEMBER	1 00	Х						0.	0.	0.
(12) ANGELA JONES BOARD MEMBER	1.00							0.	0.	0
(13) LAUREN ZALLER MOORE	1.00	Х						0.	0.	0.
BOARD MEMBER	1.00	Х						0.	0.	0.
(14) JAN NELSON	1.00									
BOARD MEMBER		х						0.	0.	0.
(15) TIFFANY OWENS	1.00									
BOARD MEMBER - TERM ENDED APRIL 2023		Х						0.	0.	0.
(16) XAVIER RICHARDSON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(17) GENEVIEVE ROBERTS	1.00									_
BOARD MEMBER		X						0.	0.	990 (2022)

Form 990 (2022)

Form 990 (2022) VIRGINIA	, INC.								54-05	345	506	Р	age <b>8</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	d Hig	ghes	st C	ompensated Employee	s (continued)				
(A) Name and title	(B) Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		( <b>D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from related		am	(F) timate nount other	of			
	(list any hours for related organizations below line)	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC 1099-NEC)	5/	comp fro orga and	pensa om th anizat d relat nizati	ation e tion ted
(18) SARAH SLADEK	1.00	.,						0		0.			0
BOARD MEMBER (19) JAMES H. TAYLOR	1.00	Х			$\vdash$	$\vdash$		0.		٠.			0.
BOARD MEMBER	1.00	Х						0.		٥.			0.
(20) LINDA TISSIERE	1.00	25				$\vdash$		1	'	<del>`</del>			•
BOARD MEMBER	1.00	х						0.		0.			0.
(21) ANGELA WILSON	1.00												
BOARD MEMBER - TERM ENDED APRIL 2023		Х						0.		0.			0.
(22) ANGELA HENDERSON	40.00												
CFO				Х				0.		0.			0.
		-											
1b Subtotal								200,923.		0.	14	4,1	
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)								200,923.		0.	1/	1,1	<u>0.</u> 12.
2 Total number of individuals (including but n						e) wh	io re	•		<u> </u>		<u> </u>	1
compensation from the organization												Yes	No
3 Did the organization list any <b>former</b> officer,	director, trust	ee, k	кеу е	emp	loye	e, or	hig	hest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for s	uch individual								·····	[	3		Х
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150											4	X	
5 Did any person listed on line 1a receive or a													77
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedul	e J f	or su	ıch ,	pers	on					5		X
Complete this table for your five highest co	mnensated inc	lene	nde	nt co	ontr	acto	rs th	nat received more than \$	100 000 of compe		ion fro	m	
the organization. Report compensation for										<i>,,</i> 1001	1011110	•••	
(A)				_				(B)			(C		_
Name and business	address	NO	ONE	<u> </u>				Description of s	ervices		omper	isatio	n
							_						

Form **990** (2022)

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

\$100,000 of compensation from the organization

Form 990 (2022) VIRGINI
Part VIII Statement of Revenue

_		Check if Schedule O contains a response or	r note to any line	e in this Part VIII			
		-	,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
SS	1 :	a Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	1 4	o Membership dues 1b					
Ę g	'						
fts, Ar	(						
ij Gi	•						
ns, Sim	•	Government grants (contributions) 1e					
utio er (	1	All other contributions, gifts, grants, and	210 601				
έŧ		similar amounts not included above 1f	210,601.				
ont od (	9	Noncash contributions included in lines 1a-1f		010 601			
<u>0</u> 8		1 Total. Add lines 1a-1f		210,601.			
		+	900099				
çe	2 8		263,024.	263,024.			
Program Service Revenue	ŀ	COUNCIL EVENTS	900099	52,341.	52,341.		
Se	(						
ar	(	d					_
ю. Н	•	·					_
Ā	1	All other program service revenue					
	9	Total. Add lines 2a-2f		315,365.			
	3	Investment income (including dividends, interes	t, and				
		other similar amounts)		107,858.			107,858.
	4	Income from investment of tax-exempt bond pro	oceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	a Gross rents6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)					
		a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory <b>7a</b> 423,692.					
		Less: cost or other basis					
<u>o</u>		and sales expenses <b>7b</b> 421,329.					
her Revenue		Gain or (loss) 7c 2,363.					
le v		d Net gain or (loss)		2,363.			2,363.
푸		a Gross income from fundraising events (not					7
Othe	0 0	including \$ of					
٥		contributions reported on line 1c). See					
		Part IV, line 18 8a b Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
	9 8	a Gross income from gaming activities. See					
		Part IV, line 19 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
	10 a	a Gross sales of inventory, less returns	4 556 401				
	_		4,576,491.				
			1,703,269.	0.070.000	0.070.000		
	•	, , , , , , , , , , , , , , , , , , , ,		2,873,222.	2,873,222.		
ω		<u> </u>	Business Code	,			
eon Te	11 a	MISCELLANEOUS	900099	4,813.	4,813.		
lan	ŀ	·					
Miscellaneous Revenue	(	·					
Mis	(	d All other revenue					
	•	Total. Add lines 11a-11d		4,813.			
	12	Total revenue. See instructions		3,514,222.	3,193,400.	0.	110,221.

Page 9

#### Part IX | Statement of Functional Expenses

	Check if Schedule O contains a respons	e or note to any line in t	this Part IX(B)	(C)	<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	123,168.	123,168.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	074 000		50 656	124 226
	trustees, and key employees	274,890.	80,908.	59,656.	134,326
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 204 672	0.60, 0.07	212 501	22 225
7	Other salaries and wages	1,304,673.	968,887.	313,581.	22,205
8	Pension plan accruals and contributions (include	204 261	105 674	04 407	14 100
_	section 401(k) and 403(b) employer contributions)	284,261. 129,897.	185,674.	84,427.	14,160
9	Other employee benefits	126,548.	123,966. 96,050.	4,810.	1,121
10	Payroll taxes	120,548.	96,050.	20,955.	9,543
11	Fees for services (nonemployees):				
а	Management	52,575.		52,575.	
b	Legal	48,380.		48,380.	
	Accounting	40,300.		40,300.	
	Lobbying				
e	Professional fundraising services. See Part IV, line 17	23,920.		23,920.	
f	Investment management fees	23,920.		23,920.	
g	Other. (If line 11g amount exceeds 10% of line 25,	189,758.	49,533.	139,725.	500
40	column (A), amount, list line 11g expenses on Sch 0.)	115,019.	110,963.	155,125	4,056
12	Advertising and promotion	483,748.	445,127.	25,794.	12,827
13	Office expenses	3,600.	443,1276	1,421.	2,179
14 15	Information technology	3,000.		1,421.	4,117
15 16	Royalties	356,317.	351,217.	3,000.	2,100
10 17	Occupancy	76,618.	70,818.	4,835.	965
17 18	Payments of travel or entertainment expenses	7070101	7070201	1,0331	
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	29,772.	6,721.	22,063.	988
20	Interest		• • • • • • • • • • • • • • • • • • • •		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	134,992.	130,029.	4,963.	
23	Insurance	99,518.	73,318.	26,200.	
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.)				
а	MT CORT T ANDOLIC	124,797.	55,789.	67,188.	1,820
b	MAINTENANCE	44,182.	19,426.	23,586.	1,170
c	MEMBERSHIP DUES	563.	,	563.	•
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4,027,196.	2,891,594.	927,642.	207,960
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form **990** (2022)

#### Part X Balance Sheet

		Check if Schedule O contains a response or note	e to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	350.	1	300.		
	2	Savings and temporary cash investments			2,365,923.	2	1,680,696.
	3	Pledges and grants receivable, net		24,100.	3	47,987.	
	4	Accounts receivable, net		36,150.	4	21,341.	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	antial co	ntributor, or 35%			
		controlled entity or family member of any of thes	e persor	ns		5	
	6	Loans and other receivables from other disqualif	ied pers	ons (as defined			
		under section 4958(f)(1)), and persons described	in secti	on 4958(c)(3)(B)		6	
တ္က	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use		ı	117,677.	8	100,276
¥	9	D			108,967.	9	129,141.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	4,789,321.			
	b	Less: accumulated depreciation		2,991,229.	1,864,417.	10c	1,798,092.
	11	Investments - publicly traded securities			3,562,657.	11	3,996,955.
	12	Investments - other securities. See Part IV, line 1			12		
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		0.	15	233,326.	
	16	Total assets. Add lines 1 through 15 (must equa	8,080,241.	16	8,008,114		
	17	Accounts payable and accrued expenses	364,551.	17	221,890.		
	18	Grants payable			18		
	19	Deferred revenue	ı	23,828.	19	43,799.	
	20	_				20	
	21	Escrow or custodial account liability. Complete F				21	
s	22	Loans and other payables to any current or form	er office	r, director,			
i <u>ti</u> e		trustee, key employee, creator or founder, subst	antial co	ntributor, or 35%			
Liabilities		controlled entity or family member of any of thes	e persor	ns		22	
ן בֿי	23	Secured mortgages and notes payable to unrela	ted third	parties		23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines					
		of Schedule D		L	147,653.	25	414,523.
	26	Total liabilities. Add lines 17 through 25			536,032.	26	680,212.
		Organizations that follow FASB ASC 958, che	ck here	X			
Ses		and complete lines 27, 28, 32, and 33.					
au	27	Net assets without donor restrictions			7,531,359.	27	7,325,652.
Bal	28	Net assets with donor restrictions			12,850.	28	2,250.
2		Organizations that do not follow FASB ASC 9	58, chec	k here			
ᇎᅵ		and complete lines 29 through 33.					
ğ	29	Capital stock or trust principal, or current funds				29	
Set	30	Paid-in or capital surplus, or land, building, or eq				30	
As	31	Retained earnings, endowment, accumulated inc				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			7,544,209.	32	7,327,902.
_	33				8,080,241.	33	8,008,114.

Form **990** (2022)

Pal	TAI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,5	514	1,2	22.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,(	22	7,1	<u>96.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	5	512	2,9	<u>74.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,5	544	1,2	09.
5	Net unrealized gains (losses) on investments	5	- 2	296	5,6	67.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	7,3	327	7,9	02.
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		:	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche					
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		;	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		t			
			1,	21-		1

232012 12-13-22

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

GIRL SCOUT COMMONWEALTH COUNCIL OF

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

OMB No. 1545-0047

**Employer identification number** 

Open to Public Inspection

VIRGINIA 54-0534506 INC. Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

#### Schedule A (Form 990) 2022

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	Section A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")	181,595.	176,753.	610,527.	521,606.	210,601.	1701082.			
2	Tax revenues levied for the organ-			-	-	-				
	ization's benefit and either paid to									
	or expended on its behalf									
3	The value of services or facilities									
_	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3	181,595.	176,753.	610,527.	521,606.	210,601.	1701082.			
	The portion of total contributions	,	,		,					
Ū	by each person (other than a									
	governmental unit or publicly									
	supported organization) included									
	on line 1 that exceeds 2% of the									
	amount shown on line 11,									
	column (f)						5,264.			
6	Public support. Subtract line 5 from line 4.						1695818.			
	etion B. Total Support									
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total			
	Amounts from line 4	181,595.	176,753.	610,527.	521,606.	210,601.	1701082.			
	Gross income from interest,	,	,	,	,	,				
_	dividends, payments received on									
	securities loans, rents, royalties,									
	and income from similar sources	101,032.	88,380.	82,726.	87,708.	107,858.	467,704.			
9	Net income from unrelated business	, ,	, ,	,	,	,	<u> </u>			
_	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.)	72,877.	19,419.				92,296.			
11	<b>Total support.</b> Add lines 7 through 10	, -	-, -				92,296. 2261082.			
	Gross receipts from related activities,	etc. (see instructio	ns)			12 23	,367,300.			
	First 5 years. If the Form 990 is for the			ourth, or fifth tax v	ear as a section 50		<u> </u>			
	organization, check this box and stor	· ·		•		. , , ,				
Sec	tion C. Computation of Publi	c Support Per								
14	Public support percentage for 2022 (I	ine 6, column (f), di	vided by line 11, c	olumn (f))		14	75.00 %			
15	Public support percentage from 2021	Schedule A, Part I	I, line 14			15	74.61 %			
16a	33 1/3% support test - 2022. If the o	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this box	and			
	stop here. The organization qualifies	as a publicly suppo	orted organization				X			
b	33 1/3% support test - 2021. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box			
	and stop here. The organization qual	ifies as a publicly s	upported organiza	ition						
17a	10% -facts-and-circumstances test	- 2022. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	or more,			
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	r <b>e.</b> Explain in Part	VI how the organiz	ation			
	meets the facts-and-circumstances te	st. The organization	n qualifies as a pu	blicly supported or	rganization					
b	10% -facts-and-circumstances test	- <b>2021.</b> If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or			
	more, and if the organization meets th									
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation				
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instructions				
						Calandula A	(Form 990) 2022			

54-0534506 Page 3

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		1	T			
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	•		•	•		· —
0-	check this box and stop here						
	ction C. Computation of Publi					T T	
	Public support percentage for 2022 (I	, (,,	,	( //		15	<u>%</u>
	Public support percentage from 2021 ction D. Computation of Investigation					16	%
	•			no 13 column (f)		17	0/
	Investment income percentage for 20						<u>%</u>
	Investment income percentage from :					18   3 1/3% and line 1	7 is not
198	33 1/3% support tests - 2022. If the						
L	more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the						
i.	line 18 is not more than 33 1/3%, che						
20	<b>Private foundation</b> If the organization						

232023 12-09-22

#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	V -	N1 -
	Yes	No
1		
•		
2		
3a		
3b		
_		
3c		
4-		
4a		
4b		
4c		
_		
5a		
5b		
5c		
6		
_		
7		
8		
0		
9a		
9b		
9c		
10a		
105		
10b le A (Forr	2 000\	2022
170 TJ A 51	・・ ンプリ	2022

202024 12 03 22

12330730 797738 3001291871

	rt IV Supporting Organizations (continued)		<u> </u>	age <b>o</b>
	Continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		100	110
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
0	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
800	the supported organization(s). tion D. All Type III Supporting Organizations	1		
360	tion b. All Type III Supporting Organizations			l
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	_		
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2		
3	the organization maintained a close and continuous working relationship with the supported organization(s).  By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
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 <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion 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 instructions	).		
a	The organization satisfied the Activities Test. Complete line 2 below.	,-		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> <b>line 3</b> <i>below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	ns)	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

232025 12-09-22 Schedule A (Form 990) 2022

54-0534506 Page 6 VIRGINIA, INC. Schedule A (Form 990) 2022 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions **3** Other gross income (see instructions) 3 4 4 Add lines 1 through 3. 5 5 Depreciation and depletion 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) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by 0.035. 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Current Year 1 1 Adjusted net income for prior year (from Section A, line 8, column A) 2 Enter 0.85 of line 1. 2 Minimum asset amount for prior year (from Section B, line 8, column A) 3 Enter greater of line 2 or line 3. 4

Schedule A (Form 990) 2022

5

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

5

6

Income tax imposed in prior year

instructions)

emergency temporary reduction (see instructions)

Distributable Amount. Subtract line 5 from line 4, unless subject to

	rt V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations (continu	ued)	T 033 T 300 Page
Sect	ion D - Distributions	<u>, , , , , , , , , , , , , , , , , , , </u>	Continu	100,	Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	3			
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2022	ns	Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
c	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i_	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	LAUGOO II UIII ZUZZ				hadala A (Farra 000) 0000

Schedule A (Form 990) 2022

## GIRL SCOUT COMMONWEALTH COUNCIL OF VIRGINIA INC.

54-053<u>4506 Page 8</u> VIRGINIA, INC. Schedule A (Form 990) 2022 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, Part VI line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule A (Form 990) 2022

### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Organization type (check one):

### **Schedule of Contributors**

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization

GIRL SCOUT COMMONWEALTH COUNCIL OF

VIRGINIA, INC.

Employer identification number

54-0534506

Filers of	:	Section:					
Form 99	0 or 990-EZ	X 501(c)( 3 ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		527 political organization					
Form 99	0-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
		covered by the <b>General Rule</b> or a <b>Special Rule</b> .  (), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General	Rule						
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules						
X							
	contributor, during the literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, hal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.					
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., plete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year					
answer "	No" on Part IV, line 2	It isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify requirements of Schedule B (Form 990).					

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

Name of organization

GIRL SCOUT COMMONWEALTH COUNCIL OF VIRGINIA, INC.

Employer identification number

54-0534506

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$11,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$15,486 <b>.</b>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$5,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$5,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$10,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)

Name of organization

GIRL SCOUT COMMONWEALTH COUNCIL OF VIRGINIA, INC.

Employer identification number

54-0534506

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional 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
		\$	

Name of organization **Employer identification number** GIRL SCOUT COMMONWEALTH COUNCIL OF 54-0534506 VIRGINIA, INC. Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

GIRL SCOUT COMMONWEALTH COUNCIL OF VIRGINIA, INC.

**Employer identification number** 54-0534506

Pal	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin		# Offiliar Funds	Complete if the	
		1	dvised funds	(b) Funds and other accounts	
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in v	writing that the asset	ts held in donor advise	ed funds	
	are the organization's property, subject to the organization's	exclusive legal contr	ol?	Yes	No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that	at grant funds can be	used only	
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or fo	or any other purpose of	conferring	
	impermissible private benefit?				No
Pa	rt II Conservation Easements. Complete if the org	ganization answered	"Yes" on Form 990, F	Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that ap	oly).		
	Preservation of land for public use (for example, recrea	tion or education)	Preservation of	a historically important land area	
	Protection of natural habitat		Preservation of	a certified historic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	ried conservation cor	ntribution in the form	of a conservation easement on the la	ast
	day of the tax year.			Held at the End of the Ta	ax Year
а	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easements			2b	
С	Number of conservation easements on a certified historic stru	ucture included in (a)	)	2c	
d	Number of conservation easements included in (c) acquired a	after July 25,2006, ai	nd not on a		
	historic structure listed in the National Register			2d	
3	Number of conservation easements modified, transferred, rele				
	year				
4	Number of states where property subject to conservation eas	sement is located			
5	Does the organization have a written policy regarding the per	riodic monitoring, ins	pection, handling of		
	violations, and enforcement of the conservation easements it	: holds?		Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violation	s, and enforcing cons	servation easements during the year	
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, an	d enforcing conservat	tion easements during the year	
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirer	nents of section 170(h	h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes	No
9	In Part XIII, describe how the organization reports conservation	on easements in its r	evenue and expense	statement and	
	balance sheet, and include, if applicable, the text of the footn	note to the organizati	on's financial stateme	ents that describes the	
	organization's accounting for conservation easements.				
Pa	rt III Organizations Maintaining Collections of	Art, Historical	Treasures, or Ot	her Similar Assets.	
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its	revenue statement a	nd balance sheet works	
	of art, historical treasures, or other similar assets held for pub	olic exhibition, educa	ition, or research in fu	rtherance of public	
	service, provide in Part XIII the text of the footnote to its finan	ncial statements that	describes these item	S.	
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its rev	enue statement and b	palance sheet works of	
	art, historical treasures, or other similar assets held for public	exhibition, education	n, or research in furth	nerance of public service,	
	provide the following amounts relating to these items:				
	(i) Revenue included on Form 990, Part VIII, line 1			\$ <u></u> _	
	(ii) Assets included in Form 990, Part X				
2	If the organization received or held works of art, historical treat				
	the following amounts required to be reported under FASB A				
а	Revenue included on Form 990, Part VIII, line 1			\$	
	Assets included in Form 990, Part X				
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 99	0) 2022

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

	t III Organizations Maintaining C		t Historical	Treasures o	r Other			34500		age <b>∠</b>
_	<u> </u>							(contir	nued)	
3	Using the organization's acquisition, accession	on, and other record	s, cneck any or	the following tha	it make sig	gnificant use	e or its			
	collection items (check all that apply):									
a										
b	Scholarly research	е	e Other_							
С	Preservation for future generations						. –			
4	Provide a description of the organization's co						in Part	XIII.		
5	During the year, did the organization solicit o		•	·				7		٦.,
Dar	to be sold to raise funds rather than to be matter than to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be matter to be matter to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be sold to be sold to be sold to raise funds rather than to be matter to be sold to be							Yes		No
ı aı	reported an amount on Form 990, Par		ete ir the organ	ization answered	res on	Form 990, F	art IV, I	ine 9, or		
10	Is the organization an agent, trustee, custodi		ion, for contrib	itions or other as	ooto not ir	adudad				
ıa								Yes		No
h	on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII a						🗀	_ 1 es		_ INO
b	in res, explain the analigement in rait Allia	and complete the loi	lowing table.					Amoun	t	
С	Beginning balance					1c			-	
	Additions during the year									
	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on Fo							Yes		No
	If "Yes," explain the arrangement in Part XIII.							-		]
Par						0.				
	·	(a) Current year	(b) Prior ye			(d) Three yea	rs back	(e) Four	years	back
1a	Beginning of year balance									
	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, colur	nn (a)) held as:						
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С		%								
	The percentages on lines 2a, 2b, and 2c show									
3a	Are there endowment funds not in the posses	ssion of the organiza	ation that are he	eld and administe	red for the	€		ſ	· I	
	organization by:							- "	Yes	No
	(i) Unrelated organizations							3a(i)		
	(ii) Related organizations							3a(ii)		
_	If "Yes" on line 3a(ii), are the related organiza			e R?				3b		
4 Par	Describe in Part XIII the intended uses of the t VI Land, Buildings, and Equipm		wment funds.							
ı aı	Complete if the organization answered		) Part IV line 1	1a See Form 996	) Part X I	ine 10				
	Description of property	(a) Cost or o		Cost or other	<u> </u>	cumulated		(d) Boo	اد برمار بر	
	Description of property	basis (investr	, ,	pasis (other)		reciation		( <b>u</b> ) 600	n value	E
12	Land		,	528,227.	4,01			5.2	8,22	27.
b	Land Buildings		3	,377,119.	2.1	67,162	2.	1,20		
	Leasehold improvements			, - , , , •		,		_ , _ 0 .	,,,	•
ď	Equipment			883,975.	8	24,067	7.	5	9,90	08.
e	Other			,	<u> </u>	. = ,	1		, - ,	<u> </u>
	. Add lines 1a through 1e. (Column (d) must e		X column (R)	ine 10c )				1,79	8,09	92.
	3 · - · (Oolamii (a) mast c	<del>quar i viiii vov. i ait</del>	<u></u>	100,/						

Schedule D (Form 990) 2022

	COMMONWEALTH		4 0504506 0
Schedule D (Form 990) 2022 VIRGINIA, II	1C.	5	4-0534506 Page <b>3</b>
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" of		T	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 000 Dort IV line	11a Saa Farm 000 Part V line 12	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or el	nd-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a) I	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.	<u>15.)</u>		
	F 000 D+ IV I'	44 446 O Faura 200 Bast V line 0	NE.
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			1
(2) CUSTODIAN FUNDS			148,771.
(3) OPERATING LEASE LIABILITIE	<u>'S</u>		265,752.
(4)			
(5)			
(6)			
(7)			
(8)			

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

Schedule D (Form 990) 2022

414,523.

(9)

Fai	Complete if the approximation approximated		nevenue per ne	turri.	
1	Complete if the organization answered "Yes" on Form 990, Part IV, line Total revenue, gains, and other support per audited financial statements			1	3,786,969.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			-	3,100,303.
	Net unrealized gains (losses) on investments	2a	296,667.		
a b	Donated services and use of facilities		250,007.	-	
				-	
q	Recoveries of prior year grants  Other (Describe in Part XIII.)			-	
d				2e	296 667
е 3				3	296,667. 3,490,302.
	Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part VIII, line 12, but not on line 1:			3	3,430,3026
4	Investment expenses not included on Form 990, Part VIII, line 7b	4a	23,920.		
a			23,320.	-	
b	Other (Describe in Part XIII.)			40	23,920.
C	Add lines 4a and 4b			4c	3,514,222.
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)  † XII   Reconciliation of Expenses per Audited Financial State	ements With	Expenses per F		
ı u	Complete if the organization answered "Yes" on Form 990, Part IV, line		Expended per i	ictaii	•
1				1	4,003,276.
	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:			'	4,003,270
2	, ,	ا مو ا			
a	Donated services and use of facilities			1	
b	Prior year adjustments			-	
C	Other losses			-	
d	Other (Describe in Part XIII.)			0-	0
e	Add lines 2a through 2d			2e 3	4,003,276.
3	Subtract line 2e from line 1			3	4,003,270.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	45	23,920.		
a	Investment expenses not included on Form 990, Part VIII, line 7b		23,920.	-	
b	Other (Describe in Part XIII.)			4.	23,920.
c	Add lines 4a and 4b			4c	4,027,196.
5 Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  † XIII   Supplemental Information.			5	4,027,130.
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F	Part IV lines 1h	and 2h: Part V. line 4	· Dart V	/ line 2: Part VI
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any			, rait A	x, IIIIe Z, Fait XI,
111103	20 and 45, and 1 at All, lines 20 and 45. Also complete this part to provide any	additional inform	ation.		
PAI	RT X, LINE 2:				
	XI X, 11111 2.				
тні	COUNCIL IS EXEMPT FROM FEDERAL AND STAT	F TNCOME	TAXES IIND	ER S	SECTION
	COONCIL ID DADMIT INOM I DDDIND AND DIAI	INCOME	TAMES OND	ши к	DECITOR
501	(C)(3) OF THE INTERNAL REVENUE CODE AND	ΤΗΕ ΤΔΥ	STATITES O	יי א	JE.
<del>50.</del>	(C)(S) OI IND INTERNAL REVENOE CODE FAIL	11111 1772	DIMICILD O	1 11	10
രവ	MONWEALTH OF VIRGINIA. THE COUNCIL HAS I	ETERMINE	יד יים איי ס	DOES	NOT HAVE
<u> </u>	mionnament of vincinini, ind cooncid mid i	) LI LIVITIVE	<i>D</i> 111111 11	<u> </u>	J NOT INIVE
יוו ב	MATERIAL UNRECOGNIZED TAX BENEFITS OR C	BLTGATTO	NS AS OF S	прті	MBER 30
Z 11 V .	MILKIAL CHRECONIZED TAX BENEFITS ON C	DHIGHTIC	NO AD OI D	<u> </u>	IMDLIK 50,
201	23 AND 2022.				
202	IS AND EVEZ:				

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information. GIRL SCOUT COMMONWEALTH COUNCIL OF

**Employer identification number** 

Name of the organization WIRCINIA TNC

54-0534506

OMB No. 1545-0047

Open to Public

Inspection

	VINGINIA,	TIVC.						24-022	4000
Part I	General Information on Grants a	nd Assistance							
<b>1</b> Do	es the organization maintain records	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	stance, and the selection	n	
crit	teria used to award the grants or assis	stance?						X Yes	☐ No
	scribe in Part IV the organization's pro								
Part II	Grants and Other Assistance to	Domestic Organia	zations and Domesti	Governments.	Complete if the org	anization answered "\	es" on Form 990, Part I	V, line 21, for any	
	recipient that received more than	\$5,000. Part II can	be duplicated if addit	onal space is need	ed.				
1 (a)	Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of gr or assistance	
	ter total number of section 501(c)(3) a	-	=						

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

Schedule I (Form 990) 2022

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Page 2

Part III

VIRGINIA, INC.

Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (c) Amount of (b) Number of (d) Amount of non-(e) Method of valuation (f) Description of noncash assistance (book, FMV, appraisal, other) recipients cash grant cash assistance FINANCIAL AID AND SCHOLARSHIPS 3663 123,168. 0 Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. PART I, LINE 2: THE COUNCIL PROVIDES FINANCIAL ASSISTANCE BY AWARDING CAMPERSHIPS AND PAYING THE GSUSA MEMBERSHIP DUES FOR UNDERPRIVILEDGED GIRLS AND GIRLS WHOSE FAMILY CANNOT AFFORD TO PAY THE MEMBERSHIP DUES SO THAT GIRLS ARE ABLE TO BECOME GIRL SCOUTS AND PARTICIPATE IN THE GIRL SCOUT PROGRAMS. FINANCIAL ASSISTANCE IS BASED UPON COMPLETING AN APPLICATION TO DETERMINE THE FINANCIAL NEEDS OF THE FAMILY. THE COUNCIL ALSO AWARDS COLLEGE SCHOLARSHIPS FOR GRADUATING GIRL SCOUTS. COLLEGE SCHOLARSHIPS ARE AWARDED BASED ON AN APPLICATION AND INTERVIEW PROCESS.

#### SCHEDULE J (Form 990)

**Compensation Information** 

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

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

GIRL SCOUT COMMONWEALTH COUNCIL OF

VIRGINIA, INC.

Employer identification number 54-0534506

Pi	art i Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
-	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
_	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
	additions, and officers, moduling the GEO/Exceditive Birector, regulating the fermio checked of time fat:	······		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
_	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	<ul> <li>X Form 990 of other organizations</li> <li>X Approval by the board or compensation committee</li> </ul>			
	Torm 556 of other organizations			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?			Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

Schedule J (Form 990) 2022

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation				(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MOLLY T. FULLER	(i)	187,143.	0.	0.	6,912.	7,200.	201,255.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2022 VIRGINIA, INC.	54-0534506	Page 3
Part III Supplemental Information		
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. A	Also complete this part for any additional information.	

#### **SCHEDULE 0** (Form 990)

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 Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

GIRL SCOUT COMMONWEALTH COUNCIL OF INC. VIRGINIA

**Employer identification number** 54-0534506

FORM 990, PART LINE 1, III, DESCRIPTION OF ORGANIZATION MISSION: GIRL SCOUTING BUILDS GIRLS OF COURAGE, CONFIDENCE AND CHARACTER WHO MAKE THE WORLD A BETTER PLACE. THE GIRL SCOUT LEADERSHIP EXPEREIENCE IS ONE-OF-A-KIND LEADERSHIP DEVELOPMENT PROGRAM FOR GIRLS WITH PROVEN IT IS BASED ON TIME-TESTED METHODS AND RESEARCHED BACKED PROGRAMMING THAT HELPS GIRLS TAKE THE LEAD IN THEIR OWN LIVES AND IN THE WORLD.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: EFFORTS TO RECRUIT GIRLS FROM UNDERSERVED OR UNDER-RESOURCED COMMUNITIES ARE PRIMARILY STAFF-LED UNTIL COMMUNITY VOLUNTEERS CAN BE RECRUITED AND TRAINED. IN FISCAL YEAR 2023, GIRL SCOUTS OF THE COMMONWEALTH OF VIRGINIA (GSCV) SERVED 7,212 GIRLS AND 3,778 ADULTS FOR TOTAL MEMBERSHIP OF 10,990. ON A SELF REPORTED BASIS, GIRLS OF COLOR COMPRISE 42% OF THE ORGANIZATION'S TOTAL GIRL MEMBERSHIP.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: VOLUNTEERS ARE SUPPORTED THROUGH THEIR VOLUNTEER EXPERIENCE WITH ONBOARD TRAINING, PROGRAM TRAINING, CPR/FA CERTIFICATION AND OUTDOOR EDUCATION. THE ORGANIZATION OFFERS AND PROMOTES FLEXIBLE PATHWAYS FOR PARTICIPATION.

EVENTS AND ACTIVITIES OFFERED SPAN A WIDE RANGE OF OPTIONS AND TOPICS THAT SUPPORT AND ENRICH EACH GIRL'S EXPERIENCE, I.E., STEM (SCIENCE) TECHNOLOGY, ENGINEERING AND MATH), CAMPING, TRAVEL, ENVIRONMENTAL GLOBAL CITIZENSHIP, ARTS, HEALTHY LIVING FINANCIAL STEWARDSHIP,

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

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page **2** 

Name of the organization GIRL SCOUT COMMONWEALTH COUNCIL OF VIRGINIA, INC.

Employer identification number 54-0534506

LITERACY, COMMUNITY SERVICE, AND CAREER EXPLORATION. THESE EVENTS AND

ACTIVITIES ALSO PROVIDE OPPORTUNITIES FOR GIRLS FROM A VARIETY OF

DIFFERENT COMMUNITIES TO MEET, CONNECT, AND WORK TOGETHER. STAFF,

TOOLS, RESOURCE MATERIALS, EQUIPMENT, AWARDS, AND VENUES INCLUDING

COUNCIL-OWNED PROGRAM PROPERTIES ARE AVAILABLE AND INCLUDED IN PROGRAM

DELIVERY. GIRL SCOUT PROGRAMMING REACHED OVER 7,000 GIRLS LAST YEAR.

FINANCIAL ASSISTANCE IS PROVIDED FOR PROGRAM FEES, CAMPING FEES, AND

TRANSPORTATION COSTS FOR REGIONAL, NATIONAL, AND INTERNATIONAL

OPPORTUNITIES.

FORM 990, PART VI, SECTION A, LINE 6:

THE MEMBERS OF THE COUNCIL, WHO SHALL BE MEMBERS OF THE GIRL SCOUT

MOVEMENT, 14 YEARS OF AGE OR OVER AND REGISTERED THROUGH THE COUNCIL ARE:

- A. COUNCIL DELEGATES WHO SHALL INCLUDE INDIVIDUALS SELECTED AS DELEGATES OR

  ALTERNATIVE DELEGATES BY THE SERVICE UNITS AS DEFINED IN ARTICLE VIII AND

  ASSOCIATION CHAIRS;
- B. INDIVIDUALS WHO ARE OFFICERS, THE MEMBERS OF THE BOARD OF DIRECTORS,

  MEMBERS OF THE BOARD OF GOVERNANCE AND NOMINATIONS COMMITTEE WHO ARE NOT

  OTHERWISE MEMBERS OF THE COUNCIL, AND REGISTERED PAST COUNCIL PRESIDENTS OR

  BOARD CHAIRS.

ALL MEMBERS SHALL HOLD MEMBERSHIP ONLY FOR THE TERM TO WHICH THEY HAVE BEEN ELECTED AND ONLY FOR AS LONG AS THEY ARE REGISTERED THROUGH THE COUNCIL,

EXCEPT REGISTERED PAST COUNCIL PRESIDENTS OR BOARD CHAIRS WHO MAY BE

MEMBERS FOR AS LONG AS THEY DESIRE TO SERVE.

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

Schedule O (Form 990) 2022 Page **2** 

Name of the organization GIRL SCOUT COMMONWEALTH COUNCIL OF Employer identification number VIRGINIA, INC. 54-0534506

THE MEMBERS OF THE COUNCIL SHALL:

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

DIRECTORS, THE MEMBERS OF THE BOARD GOVERNANCE AND NOMINATIONS COMMITTEE

AND, IN APPROPRIATE YEARS, THE DELEGATES AND ALTERNATE DELEGATES TO THE

NATIONAL COUNCIL OF GIRL SCOUTS OF THE UNITED STATES OF AMERICA;

- B. DETERMINE GENERAL LINES OF DIRECTION FOR GIRL SCOUTING WITH THE

  JURISDICTION OF THE COUNCIL BY RECEIVING AND RESPONDING TO REPORTS AND

  INFORMATION FROM THE BOARD OF DIRECTORS;
- C. AMEND THE ARTICLES OF INCORPORATION AND BY-LAWS;
- D. TAKE ALL OTHER ACTION REQUIRING MEMBERSHIP VOTE;
- E. CONDUCT SUCH OTHER BUSINESS AS MAY, FROM TIME TO TIME, COME BEFORE THE MEMBERS.

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

THE BOARD GOVERNANCE AND NOMINATIONS COMMITTEE SELECTS THE SLATE OF

CANDIDATES FOR ELECTION AS OFFICERS, DIRECTORS, BOARD GOVERNANCE AND

NOMINATIONS COMMITTEE MEMBERS, AND/OR DELEGATES/ALTERNATIVES TO THE

NATIONAL COUNCIL AND THE MEMBERS OF THE COUNCIL APPROVE THE SLATE.

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

ALL BOARD MEMBERS RECEIVE A FULL COPY OF THE 990 VIA EMAIL PRIOR TO FILING.

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

THE ORGANIZATION REQUIRES ALL OFFICERS, DIRECTORS, AND KEY EMPLOYEES TO

ANNUALLY DISCLOSE ANY CONFLICT OF INTEREST AND SIGN A CONFLICT OF INTEREST

STATEMENT. IN THE EVENT OF ANY CONFLICT THROUGHOUT THE YEAR THAT OFFICER,

DIRECTOR OR KEY EMPLOYEE WILL RECUSE HIMSELF OR HERSELF BEFORE ANY

DIRECTOR OR RET EMPLOTEE WILL RECUSE HIMSELF OR HERSELF BEFORE ANT

Schedule O (Form 990) 2022	Page 2
Name of the organization GIRL SCOUT COMMONWEALTH COUNCIL OF VIRGINIA, INC.	Employer identification number 54-0534506
DISCUSSION OR VOTE.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS SERVED	AS THE CEO REVIEW
AND COMPENSATION TEAM AND REVIEWED SALARY DATA FROM OUR N	ATIONAL
ORGANIZATION GSUSA. WHEN DETERMINING COMPENSATION, COMPAR	ABILITY DATA FROM
OTHER LOCAL ORGANIZATIONS AND OTHER GIRL SCOUT COUNCILS A	CROSS THE COUNTRY
ARE USED.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE GIRL SCOUT COMMONWEALTH COUNCIL OF VIRGINIA MAKES ITS	GOVERNING
DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO TH	E PUBLIC UPON
REQUEST. THE ORGANIZATIONS FINANCIAL STATEMENTS ARE AVAIL	ABLE ON THEIR
WEBSITE.	
FORM 990, PART XII, LINE 2C:	
THE PROCESS FOR THE OVERSIGHT OF THE FINANCIAL STATEMENT	AUDIT AND
SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED FR	OM THE PRIOR
YEAR.	