990 Form

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 2024 Open to Public Inspection

Department of the Treasury Internal Revenue Service

<u>A</u>	For the	e 2024 calendar year, or tax year beginning		, and ending										
В	Check if ap	pplicable: C Name of organization					D Employer	identification number						
	Address c	change Girl Scou	ts of Ke	ntuckiana,	Inc.									
Ħ	Name cha	Doing business as					61-04	144698						
\equiv		Number and street (or P.O. box if mail is not delive	red to street addre	ess)		Room/suite	E Telephone							
_	Initial return		foreign postal and				502-6	536-0900						
	terminated													
П	Amended	Louisville	KY 4020	6			G Gross rece	ipts\$ 10,011,154						
=	Application	r Name and address of principal officer.				H(a) Is this a gr	oup return for s	ubordinates? Yes X No						
Ш	Application	indigated Eiger	•											
		2115 Lexington Road		40006		H(b) Are all su		See instructions						
		Louisville		40206	_	li NO.	allauri a iist. v	see instructions						
			sert no.)	4947(a)(1) or	527									
	Website:				<u> </u>	H(c) Group exe		M State of legal domicile: KY						
		Form of organization: X Corporation Trust Association Other L Year of formation: 1932												
	art I	Summary												
	1 8	Briefly describe the organization's mission or most s	ignificant activi	ties:										
e		See Schedule O												
Jan		•												
Governance	l	2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.												
Ô			1 1	0.2										
⋖	3 1	Number of voting members of the governing body (P	art VI, line 1a)				3	23						
ies	4 1	Number of independent voting members of the gover			4	23								
Activities		Total number of individuals employed in calendar year				125								
Ac		Total number of volunteers (estimate if necessary)			6	5000								
		Total unrelated business revenue from Part VIII, colu						57,369						
_	bΝ	Net unrelated business taxable income from Form 99	90-T, Part I, lin	e 11	· · · · · · · · · · · · · · · · · · ·			45,716						
		Contributions and grants (Part VIII line 1h)			-	Prior Ye	0,886	Current Year 905,376						
ne	9 F	Contributions and grants (Part VIII, line 1h)					4,986	8,101,406						
Revenue	10 1	Program service revenue (Part VIII, line 2g)			· · · · · · · · · · · ·		9,157	511,992						
Re			nent income (Part VIII, column (A), lines 3, 4, and 7d)											
							1,008 6,037	197,467 9,716,241						
		<u>Fotal revenue – add lines 8 through 11 (must equal l</u> Grants and similar amounts paid (Part IX, column (A					8,094	138,475						
					0,001	130/173								
	l	Benefits paid to or for members (Part IX, column (A), Salaries, other compensation, employee benefits (Pa				3 98	8,788	4,274,625						
ses	15 5	Salaries, other compensation, employee benefits (Pa Professional fundraising fees (Part IX, column (A), lin Fotal fundraising expenses (Part IX, column (D), line	it ix, coluiriii (A), illies 5–10)		3,30	0							
Expenses	l loar	Fotel fundraining expanses (Part IX, column (D), line	25)	255 0	 									
Ä			446.04.)			5 19	8,816	5,234,455						
	17	Other expenses (Part IX, column (A), lines 11a–11d, Fotal expenses. Add lines 13–17 (must equal Part IX		ino 25)			5,698	9,647,555						
		Revenue less expenses. Subtract line 18 from line 1:					9,661	68,686						
Or Po		Toversue 1655 expenses. Subtract IIITE 10 ITOTTI IITE 1.	<u></u>			Beginning of Cu		End of Year						
ets (20 T	Fotal assets (Part X, line 16)				19,80		20,609,437						
ASS	21 T	Fotal liabilities (Part X, line 26)					5,439	3,349,200						
Net Assets or Find Balances	22 N	Net assets or fund balances. Subtract line 21 from lin				16,39		17,260,237						
P	art II	Signature Block					•							
U	nder pen	nalties of perjury, I declare that I have examined this retu	rn, including ac	companying schedule	s and statement	s, and to the be	st of my kno	wledge and belief, it is						
tru	ue, corre	ect, and complete. Declaration of preparer (other than offi	cer) is based or	n all information of when	nich preparer has	s any knowledge	Э.							
Sig	gn	Signature of officer					Date							
He		Margaret Elder		CEO										
		Type or print name and title												
		Preparer's name	Preparer's sign	ature		Date	Check	if PTIN						
Paid	d	Myron D. Fisher	Myron D.	Fisher			self-emp	elf-employed P00078455						
Pre	parer	Firm's name Baldwin CPAs,	PLLC	<u> </u>			Firm's EIN	20-1416603						
Use	Only	713 W Main St												
_		Firm's address Richmond, KY	40475-1	351			Phone no.	859-626-9040						
May	the IRS	S discuss this return with the preparer shown above	? See instructi	ons				Yes No						

Form	n 990 (2024) Girl Scouts of Kentuckiana, Inc. 61-0444698	Page 2
Pa	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1		
	Girl Scouting is the premier leadership organization for	girls. In Girl
	Scouting, the girls learn to discover, connect and take a	
	cooperation with dedicated volunteers and staff.	20010117 111
	cooperation with dedicated volunteers and staff.	
2		
	prior Form 990 or 990-EZ?	Yes X No
	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	
		Yes X No
	If "Yes," describe these changes on Schedule O.	🗀 📇
		. 1.1.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to or	thers,
	the total expenses, and revenue, if any, for each program service reported.	
5 D I s r 2	of southern Indiana, the council served more than 9,000 girls of 5,000 adult members. Our program priorities challed becover, Connect and Take Action in their communities and In 2024 our accomplishments can be measured by the successed GSK was home to 8 Gold Award Girl Scouts, 46 Silver Award sellers of 1.41 million boxes of cookies. The Council has record high girl retention for the past three consecutive 2023, and 2024), indicative of girl and leader satisfaction nundreds of programs and leadership opportunities.	enge girls to in their lives. es of our girls. Girl Scouts, and experienced years (2022,
	······································	
4h	(Code:) (Expenses \$ including grants of \$) (Rev	Venue \$ \
	T / 7x	
14	N/A	
	•	
	: (Code:) (Expenses \$ including grants of \$) (Rev	venue \$)
N	N/A	
	······································	
	· · · · · · · · · · · · · · · · · · ·	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	• Total program service expenses 8,554,044	,

61-0444698 **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? See instructions X 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Х candidates for public office? If "Yes," complete Schedule C, Part I 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 election in effect during the tax year? If "Yes," complete Schedule C, Part II Х 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III 5 X 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 X "Yes," complete Schedule D, Part I 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 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Х complete Schedule D, Part III 8 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 Х debt negotiation services? If "Yes," complete Schedule D, Part IV 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 Х 10 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. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," Х complete Schedule D, Part VI 11a 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 Х 11b 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 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 Х Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete Х 12a Schedule D, Parts XI and XII 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 13 13 Did the organization maintain an office, employees, or agents outside of the United States? Х 14a 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 X foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b 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 X 15 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other Х assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 Х If "Yes," complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H Х 20a 20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 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 ,

	7		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	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	23	х	
242	employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		
244	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a				l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			 ₩
00	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	20		
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled 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, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		x
31	conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		X
32	Did the organization required, estimate, or dissolve and cease operations: If "res, complete scriedule N, rait "	31		122
32	accomplete Colored de N. Dout II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	x	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			۱
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			٠,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	20	х	
P	19? Note: All Form 990 filers are required to complete Schedule O. Art V Statements Regarding Other IRS Filings and Tax Compliance	38	l v	
	Check if Schedule O contains a response or note to any line in this Part V			
_	Chest is conceded a contained a reopenies of flots to diff into it tills I diff v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 21			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	10	1	1

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continue	ed)		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	a 125			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b	X	
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	nt)?	4a		Х
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 Account				
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? \dots		5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
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		١		
_	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		_		v
	and services provided to the payor?		7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		70		х
ч	required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year	'd	7c		
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file		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:	ì			
а	Initiation fees and capital contributions included on Part VIII, line 12	0a	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	0b	-		
11	Section 501(c)(12) organizations. Enter:	1			
а	Gross income from members or shareholders	1a	_		
b	Gross income from other sources. (Do not net amounts due or paid to other sources	[
	· · · · · · · · · · · · · · · · · · ·	1b	_		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10413		12a		
	, , , , , , , , , , , , , , , , , , , ,	2b	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		13a		
а	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.		ısa		
b	Enter the amount of reserves the organization is required to maintain by the states in which				
		3b			
С		3c	_		
14a	Did the experimentary reading any payments for indept tenning against diving the tay 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 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, 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.				

Greg Cardwell-Copenhefer

Form 990 (2024) Girl Scouts of Kentuckiana, Inc. 61-0444698 Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below. and for a "No response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 23 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. 23 Enter the number of voting members included on line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 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 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint Х one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? 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 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 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. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official Х 15a Other officers or key employees of the organization Х 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed **KY, IN** 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 X 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.

2115 Lexington Road Louisville KY 40206 502-636-0900 Form **990** (2024)

orm 990 (2024)	Girl	Scouts	of	Kentuckiana,	Inc.
UIIII 330 (2024)	GTTT		\sim	Mencaciana,	T11 C 6

			A A	_	\sim	•
h	1 - (14	44	h	42	< −

Page **7**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

 <u>See</u> the instructions for the order in which to list the persons above.

Check this box if neither the organization		

(A) Name and title	(B) Average hours per week	box	(C) Position (do not check more box, unless person officer and a direct			s both an or/trustee)	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) Margaret Elder									
· <u></u>	40.00						1.1		10.000
CEO (2) Meredith De Renz	0.00			Х		\vdash	147,739	0	12,383
(2) Meredith De Renz	40.00								
COO	0.00			x			108,050	0	9,496
(3) John Gregory Ca:		pe	nh		er		100,000		3,130
(0,000000000000000000000000000000000000	40.00								
СВО	0.00			х			111,184	0	3,589
(4) Colleen Abate									
	1.00								
Member at Large	0.00	Х					0	0	0
(5) Theresa Batliner									
	1.00						_	_	
Treasurer	0.00	Х		Х			0	0	0
(6) Christina Boyle									
	1.00							_	•
Member at Large (7) Cynthia Miles Br	0.00	Х				\vdash	0	0	<u> </u>
(/) Cynchia Miles Br	1.00								
Member at Large	0.00	x					0	0	0
(8) Ria Chandler	0.00							<u> </u>	
(o) Italia Cilalia Cil	1.00								
Second Vice-Chair	0.00	x		х			0	0	0
(9) Gary Dryden									
,,	1.00								
Member at Large	0.00	х					0	0	0
(10) Sharon Handy									
	1.00								
Chair	0.00	Х		X	<u> </u>		0	0	0
(11) Laura Hatfield									
	1.00							_	_
Member at Large	0.00	X					0	0	5 000 (000)

Part VII Section A. Officers,	, Directors, Trus	stees	, Ke	y Er	nplo	yees	, an	d Highest Compensated I	Employees (continued)			
(A) Name and title	(B) Average hours per week	off	x, unle icer a	Pos check ess pe nd a	rson i directo	than cos both	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/	(F) Estimated amount of other compensation from the		
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	ganization ted orga	on and	s
(12) Simon Keemer (12)	1.00											
Secretary	0.00	x		х				0	0			0
(13) Lori Kimble												
(13) Member at Large	1.00	x						0	0			0
(14) Sharon LaRue												
(14)	1.00											_
Member at Large (15) Samantha Luca	0.00	Х						0	0			0
(15) Salitational Luca	1.00											
Member at Large	0.00	x						0	0			0
(16) Terri Massey												
(16) First Vice-Chair	1.00	x		x				o	0			0
(17) Claydean McCa		1^		^				0	0			
(17)	1.00											
Member at Large	0.00	Х						0	0			0
(18) Charmaine Pow												
(18) Member at Large	1.00	X						o	0			0
(19) Ria Pruiett	0.00											
(19)	1.00											
Member at Large	0.00	X						266 073	0		25	0
1b Subtotal	ts to Part VII S	ectio	Δ					366,973		•	25 ,	±00
d Total (add lines 1b and 1c)	•							366,973			25,4	468
2 Total number of individuals (incl	uding but not lim							ho received more than \$100	0,000 of			
reportable compensation from the	ne organization		3								Yes	No
3 Did the organization list any form	mer officer, direc	ctor, t	ruste	e, ke	ey er	nploy	ee, o	or highest compensated		3		х
employee on line 1a? <i>If "Yes," o</i> 4 For any individual listed on line										 3		22
organization and related organization										4	х	
individual5 Did any person listed on line 1a	receive or accru	ie co	 mper	 nsatio	on fro	 om a	 ny ur	nrelated organization or indiv	vidual	 4	71	
for services rendered to the org	anization? If "Ye									 5		X
Section B. Independent Contractor1 Complete this table for your five		noto	d ind	onon	dont	cont	rooto	are that received more than	\$100,000 of			
compensation from the organiza	ation. Report com							ear ending with or within the	e organization's tax year.			
Name and	(A) business address							Descript	(B) ion of services	Co	(C) mpensati	ion
2 Total number of independent correceived more than \$100,000 or							se li	sted above) who	0			

Form 990 (2024) Girl Scouts of Kentuckiana, Inc. 61-0444698 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) (B) Related or exempt (C) (D) Revenue excluded Unrelated function revenue from tax under business revenue sections 512-514 25,000 Gifts, Grants, ilar Amounts 1a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 65,603 1c d Related organizations 1d **e** Government grants (contributions) Contributions, and Other Sim All other contributions, gifts, grants, 1f 814,773 and similar amounts not included above Noncash contributions included in 1g lines 1a-1f 905,376 h Total. Add lines 1a-1f ... 900099 7,777,003 7,777,003 Product Sales Program Service Revenue 900099 249,710 249,710 Camping and program fees 74,693 74,693 Membership fees f All other program service revenue 8,101,406 g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 511,992 511,992 Income from investment of tax-exempt bond proceeds Royalties (ii) Personal (i) Real 198,314 6a Gross rents 6a 109,445 **b** Less: rental expenses 6b 88,869 c Rental inc. or (loss) 6c d Net rental income or (loss) 88,869 57,369 31,500 7a Gross amount from (ii) Other (i) Securities sales of assets 7a other than inventory **b** Less: cost or other Other Revenue basis and sales exps. 7h c Gain or (loss) 7с d Net gain or (loss) 8a Gross income from fundraising events (not including \$ 65,603 of contributions reported on line 1c). See Part IV, line 18 8a **b** Less: direct expenses 8b 33,534 -33,534 -33,534 c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities . . 10a Gross sales of inventory, less returns and allowances 279,152 10a **b** Less: cost of goods sold 10b 151,934 127,218 127,218 c Net income or (loss) from sales of inventory . Business Code 900099 14,914 14,914 Miscellaneous 11a d All other revenue

14,914

8,243,538

9,716,241

57,369

e Total. Add lines 11a-11d

Total revenue. See instructions

Statement of Functional Expenses Part IX

	on 501(c)(3) and 501(c)(4) organizations must cor	•	organizations must complete	te column (A).	
	Check if Schedule O contains a respon				
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) 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	138,475	138,475		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	366,973	297,684	53,452	15,837
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	2 22 522	0 400 400	40- 44-	100 000
7	Other salaries and wages	2,987,509	2,423,433	435,147	128,929
8	Pension plan accruals and contributions (include	200 044	300 555	E0 E3.	15 000
_	section 401(k) and 403(b) employer contributions)	398,241	322,575	59,736	15,930
9	Other employee benefits	267,597	217,545	37,247	12,805
10	Payroll taxes	254,305	206,289	37,041	10,975
11	Fees for services (nonemployees):				
	Management	16,396		16,396	
D	Legal	32,000		32,000	
	Accounting	32,000		32,000	
	Lobbying Professional fundraising services. See Part IV, line 17				
f	1				
g g					
9	(A), amount, list line 11g expenses on Schedule O.)	230,797	208,970		21,827
12	Advertising and promotion	,			, -
13	Office expenses	266,154	227,203	25,795	13,156
14	Information technology	_			-
15	Royalties				
16	Occupancy	454,196	436,459	16,337	1,400
17	Travel	185,963	168,770	12,383	4,810
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	97,037	80,244	16,267	526
20	Interest	75,392	66,295	8,379	718
21	Payments to affiliates	27.1.212	252 244	10 - 10	
22	Depreciation, depletion, and amortization	374,013	353,861	18,562	1,590
23	Insurance	186,660	156,795	22,399	7,466
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)	2,906,326	2,906,326		
a	COGS	180,953	152,741	16,405	11,807
b	Printing, Internet, Techn Recruitment	94,322	92,834	1,488	TT,00/
c d	Equipment rental & maint.	56,927	46,395	7,116	3,416
a e	All other expenses	77,319	51,150	22,272	3,897
25	Total functional expenses. Add lines 1 through 24e	9,647,555	8,554,044	838,422	255,089
26	Joint costs. Complete this line only if the	2,02.,000	-,,		
	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)				
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				

Pa	art)	K Balance Sheet					
		Check if Schedule O contains a response or note to	any line	in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			365,693	2	460,737
	3	Pledges and grants receivable, net			481,913	3	246,659
	4	Accounts receivable, net			383	4	6,710
	5	Loans and other receivables from any current or former of	officer, dire	ector,			
		trustee, key employee, creator or founder, substantial con	tributor, o	r 35%			
		controlled entity or family member of any of these persons	S			5	
	6	Loans and other receivables from other disqualified perso	ns (as de	efined			
ţ		under section 4958(f)(1)), and persons described in section	c)(3)(B)		6		
Assets	7	Notes and loans receivable, net				7	
ď	8	Inventories for sale or use			134,612	8	160,934
	9	Prepaid expenses and deferred charges		52,550	9	75,891	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	16,949,534			
	b	Less: accumulated depreciation	10b	9,093,686	7,905,334	10c	7,855,848
	11	Investments—publicly traded securities			10,812,580	11	11,765,594
	12	Investments—other securities. See Part IV, line 11			12		
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			50,529	15	37,064
	16	Total assets. Add lines 1 through 15 (must equal line 33))		19,803,594	16	20,609,437
	17	Accounts payable and accrued expenses			399,662	17	363,897
	18	Grants payable			18		
	19	Deferred revenue		102,958	19	96,492	
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Part IV of	Schedule	D	39,526	21	39,948
S	22	Loans and other payables to any current or former officer	, director,				
ij		trustee, key employee, creator or founder, substantial con		r 35%			
Liabilities		controlled entity or family member of any of these persons				22	
_	23	Secured mortgages and notes payable to unrelated third payable the unrelated third payable to unrelated third payable third pa			2,795,945	23	2,795,945
	24	Unsecured notes and loans payable to unrelated third par				24	
	25	Other liabilities (including federal income tax, payables to					
		parties, and other liabilities not included on lines 17-24). C	•		45.040		
		of Schedule D		·····	67,348	25	52,918
	26	Total liabilities. Add lines 17 through 25			3,405,439	26	3,349,200
			X				
ces		and complete lines 27, 28, 32, and 33.			10 010 460		10 201 450
Fund Balances	27	Net assets without donor restrictions			10,210,468	27	10,321,478
B	28			·· _/ , · · · · · · · · · · · · · · · · · · ·	6,187,687	28	6,938,759
n n		Organizations that do not follow FASB ASC 958, che	ck here				
		and complete lines 29 through 33.					
ŝ	29					29	
Assets or	30	Paid-in or capital surplus, or land, building, or equipment				30	
, As	31	Retained earnings, endowment, accumulated income, or		16 200 155	31	17 260 227	
Net	32				16,398,155	32	17,260,237
	33	Total liabilities and net assets/fund balances			19,803,594	33	20,609,437

Form **990** (2024)

Schedule O.

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of

If the organization changed either its oversight process or selection process during the tax year, explain on

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.

the audit, review, or compilation of its financial statements and selection of an independent accountant?

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

Form **990** (2024)

X

X

2c

3a

Part VII Section A. Officers	, Directors, Trus	stees	s, Ke	y Er	nplo	yees	, an	d Highest Compensated	Employees (continued)			
(A) Name and title	(B) Average hours per week	bo	x, unle ficer a	Pos check ess pe nd a	rson i directo	than on the state of the state	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related	Estimate of compe	(F) ed amount other ensation	t
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	organiz	m the cation and organization	
(20) Danielle Stal	llard 1.00											
Member at Large	0.00	х						0	0			C
(21) Wendi Tatum	1 00											
(13) Member at Large	1.00	x						0	0			C
(22) Lisa Thompson		^						0				
(14)	1.00											
Member at Large	0.00	х						0	0			C
(23) Berard Tomas												
(15)	1.00	٠,										_
Member at Large (24) Kellie Watson	0.00	Х						0	0			
(16)	1.00											
Member at Large	0.00	х						0	0			C
(25) Aimee Green V												
(17)	1.00											_
Member at Large (26) Daryl William	0.00	Х	┢				_	0	0			
(18)	1.00											
Member at Large	0.00	x						0	0			C
1b Subtotal												
d Total (add lines 1b and 1c)	•											
2 Total number of individuals (inc	luding but not limi							ho received more than \$100	0,000 of			
reportable compensation from t	the organization										Yes	No
3 Did the organization list any for	mer officer, direc	tor, t	truste	e, ke	ey er	nploy	/ee,	or highest compensated			1,00	110
employee on line 1a? If "Yes," of	complete Schedu	le J	for s	uch i	ndivi	dual			d.	3	+	
4 For any individual listed on line organization and related organi									tne			
individual										4		
5 Did any person listed on line 1a for services rendered to the org										5		
Section B. Independent Contracto		-,	,					<i>p</i>				
Complete this table for your five compensation from the organization.								ear ending with or within the	e organization's tax year.			
Name and	(A) d business address							Descrip	(B) tion of services		(C) Compensat	tion
								<u> </u>				
							\vdash					
							_					
2 Total number of independent of	ontractors (includi	na h	ut no	at lim	itad †	the the	l co li	isted above) who				

received more than \$100,000 of compensation from the organization

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

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.

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

2024

Open to Public Inspection

Employer identification number Name of the organization Girl Scouts of Kentuckiana, Inc. 61-0444698 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.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 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 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization (i) Name of supported (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-10 organization support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D)

(E)

Total

Page 2

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

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

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	459,434	2,048,807	1,682,745	850,886	905,376	5,947,248
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount	459,434	2,048,807	1,682,745	850,886	905,376	5,947,248
_	shown on line 11, column (f)						652,992
<u>6</u> Sec	Public support. Subtract line 5 from line 4						5,294,256
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7	Amounto from line 4	459,434	2,048,807	1,682,745	850,886	905,376	5,947,248
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	367,485	476,815	22,351	369,157	543,492	1,779,300
9	Net income from unrelated business activities, whether or not the business is regularly carried on	24,198	24,606	63,546		12,182	124,532
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		65,876	80,124	70,526		216,526
11	Total support. Add lines 7 through 10						8,067,606
12	Gross receipts from related activities, etc. (s						36,072,906
13	First 5 years. If the Form 990 is for the org	anization's first, sec	ond, third, fourth, o	r fifth tax year as a	section 501(c)(3)		
<u></u>	organization, check this box and stop here						
	tion C. Computation of Public S					1 1	
14	Public support percentage for 2024 (line 6, c						65.62 %
15	Public support percentage from 2023 Sched	ule A, Part II, line 1	4				67.48 %
16a	33 1/3% support test — 2024. If the organibox and stop here. The organization qualifies	es as a publicly sup	ported organization				X
b	33 1/3% support test — 2023. If the organithis box and stop here. The organization qu					check	
17a	10%-facts-and-circumstances test — 202 10% or more, and if the organization meets Part VI how the organization meets the fact	the facts-and-circur	nstances test, chec	k this box and sto	p here. Explain in	is	
b	organization 10%-facts-and-circumstances test — 202 15 is 10% or more, and if the organization r in Part VI how the organization meets the factorganization	23. If the organization neets the facts-and-acts-and-circumstand	n did not check a b circumstances test ces test. The organ	ox on line 13, 16a, , check this box and nization qualifies as	16b, or 17a, and lind stop here. Explair a publicly supporte	ne in d	
18	Private foundation. If the organization did instructions	not check a box on	line 13, 16a, 16b, 1	7a, or 17b, check the	his box and see		

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.)

500	tion A. Public Support	quality under	the tests listed	below, please	complete Part	11.)		
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024		(f) Total
1	Gifts, grants, contributions, and membership fees	(a) 2020	(b) 2021	(6) 2022	(u) 2023	(e) 2024	+	(I) Total
•	received. (Do not include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services performed, 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 business under section 513							
4	Tax revenues levied for the organization'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	tion B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024		(f) Total
9	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							
С	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.)							
13	Total support. (Add lines 9, 10c, 11, and 12.)							
14	First 5 years. If the Form 990 is for the org	ganization's first, se	cond, third, fourth,	or fifth tax year as a	a section 501(c)(3)	1		
	organization, check this box and stop here							<u></u>
	tion C. Computation of Public S					Ι		
15	Public support percentage for 2024 (line 8,							<u>%</u>
16 Sec	Public support percentage from 2023 Scheotion D. Computation of Investment					16	<u> </u>	%
17	Investment income percentage for 2024 (lin			column (f))		17	,	%
18	Investment income percentage for 2024 (iiii							<u> </u>
19a	33 1/3% support tests — 2024. If the orga			 14, and line 15 is m			- 1	
	17 is not more than 33 1/3%, check this box							
b	33 1/3% support tests — 2023. If the orga		-					
	line 18 is not more than 33 1/3%, check this	box and stop here	e. The organization	qualifies as a publ	icly supported orga	nization		<u> </u>
20	Private foundation. If the organization did	not check a box on	line 14, 19a, or 19	b, check this box a	nd see instructions			

Supporting Organizations Part IV

(Complete only if you checked a box on line 12 on 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

_	Did the appropriation have any appropriate that does not have an IDC determination of status
	class or purpose, describe the designation. If historic and continuing relationship, explain.
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by
1	Are all of the organization's supported organizations listed by name in the organization's governing

- 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
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and b satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- 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.
- 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.
- 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.
- 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)
- 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).
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? С
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 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).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a 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.
- 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.
- 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.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
	3b		
	30		
	3с		
	4a		
	4b		
	40		
	4c		
	5a		
	- Ju		
	5b		
	5c		
	6		
	6		
	7		
	8		
	00		
	9a		
	9b		
	9с		
	40		
	10a		
	10h		
Sch	edule A	A (Form 9	990) 2024

Page 5

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а				
	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		
Secti	ion 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 Part VI 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,			
	supervised, or controlled the supporting organization.	2		
Secti	ion 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			
	the supported organization(s).	1		
Secti	ion D. All Type III Supporting Organizations			
			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 the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	_		
Sooti	supported organizations played in this regard. ion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below.			
a b	The organization satisfied the Activities rest. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruction	s).		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
а	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 each of its supported organizations, and how the organization determined	2a		
	that these activities constituted substantially all of its activities.			
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	26		
	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		

Schedu	ule A (Form 990) 2024 Girl Scouts of Kentuckiana,	Inc	61-0444	598 Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ganiz	ations	
1	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 con-	mplete	Sections A through E.	
Sect	ion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
	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	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8_	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C – Distributable Amount			Current Year
1_	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3_	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integrated Type	III su	pporting organization	

Schedule A (Form 990) 2024

(see instructions).

Girl Scouts of Kentuckiana, Inc. 61-0444698 Schedule A (Form 990) 2024 Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. Distributable amount for 2024 from Section C, line 6 9 10 Line 8 amount divided by line 9 amount 10 (i) (ii) (iii) Section E - Distribution Allocations (see instructions) **Excess Distributions** Underdistributions Distributable Pre-2024 Amount for 2024 Distributable amount for 2024 from Section C, line 6 Underdistributions, if any, for years prior to 2024 2 (reasonable cause required-explain in Part VI). See instructions. Excess distributions carryover, if any, to 2024 a From 2019 **b** From 2020 **c** From 2021 **d** From 2022 **e** From 2023 f Total of lines 3a through 3e **g** Applied to underdistributions of prior years h Applied to 2024 distributable amount i Carryover from 2019 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2024 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2024 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2025. Add lines 3j and 4c. Breakdown of line 7: a Excess from 2020 **b** Excess from 2021

Schedule A (Form 990) 2024

c Excess from 2022 d Excess from 2023 e Excess from 2024.

Girl Scouts of Kentuckiana, Inc. 61-0444698 Schedule A (Form 990) 2024 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) Part II, Line 10 - Other Income Detail Miscellaneous Income

DAA Schedule A (Form 990) 2024

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

2024
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

• Section 501(c)(4), (5), or (6) organizations: Complete Part III

Name	of organization			Employer identif	ication number (EIN)
	Girl Scouts of Kentu			61-04446	
	I-A Complete if the organization is exem				ion.
1	Provide a description of the organization's direct and indirect p	political campaign activities in Pa	art IV. See instruction	ons for	
	definition of "political campaign activities."				
2	Political campaign activity expenditures. See instructions			\$	
	Volunteer hours for political campaign activities. See instruction				
	I-B Complete if the organization is exem		, , ,		
1	Enter the amount of any excise tax incurred by the organization	n under section 4955		\$	
2	Enter the amount of any excise tax incurred by organization m	nanagers under section 4955		\$	
	If the organization incurred a section 4955 tax, did it file Form				
	Was a correction made?				Yes No
	If "Yes," describe in Part IV. t I-C Complete if the organization is exem	ant under coetion E01/a	N eveent coet	ion E04(a)(2)	
), except sect	ion 501(c)(s).	
1	Enter the amount directly expended by the filing organization f	' '		•	
_	activities			\$	
2	Enter the amount of the filing organization's funds contributed	· ·		•	
•	527 exempt function activities	4400 DOI			
3	Total exempt function expenditures. Add lines 1 and 2. Enter I			•	
	line 17b				Yes No
	Did the filing organization file Form 1120-POL for this year?				Yes No
5	Enter the names, addresses, and EINs of all section 527 politics				
	For each organization listed, enter the amount paid from the fi				
	contributions received that were promptly and directly delivered segregated fund or a political action committee (PAC). If additi		•		
	(a) Name	· · · · · · · · · · · · · · · · · · ·	(c) EIN		(e) Amount of political
	(a) Name	(b) Address	(C) EIN	(d) Amount paid from filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization.
					If none, enter -0
(1)					
(')					
(2)					
(-)					
(3)					
(0)					
(4)					
,					
(5)					
,					
(6)					
` '					

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

Schedule C (Form 990) 2024

2959	10/19/2025 11:45 AM	I			
Sche	dule C (Form 990)	2024 Girl S	Scouts of Kentuckiana, Inc.	61-0444698	Page 2
Pa	rt II-A Co	omplete if the organiza	ation is exempt under section 501(c)(3) a	nd filed Form 5768 (e	lection under
	se	ction 501(h)).			
4 (Check	if the filing organization b	elongs to an affiliated group (and list in Part IV	each affiliated group mer	nber's name, address
	_	EIN, expenses, and shar	e of excess lobbying expenditures).		
3 (Check	if the filing organization of	checked box A and "limited control" provisions ap	oply.	
			ying Expenditures	(a) Filing	(b) Affiliated
			eans amounts paid or incurred.)	organization's totals	group totals
			opinion (grassroots lobbying)		
b			slative body (direct lobbying)		
С			1b)		
d	Other exempt p	urpose expenditures			
е	Total exempt pu	irpose expenditures (add lines	1c and 1d)		
f	Lobbying nontax	cable amount. Enter the amoun	t from the following table in both		
_	columns.				
	IF the amount or	n line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:		
	not over \$500,00	0	20% of the amount on line 1e.		
-	over \$500,000 bu	ut not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
-	over \$1,000,000	but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
-	over \$1,500,000	but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	over \$17,000,000		\$1,000,000.		
			ine 1f)		
		from line 1a. If zero or less, er			
i			ter -0-		
j			line 1h or line 1i, did the organization file Form 4720		
	reporting section	1 4911 tax for this year?			Yes No
			4-Year Averaging Period Under Section 501(I	n)	
	(Some	organizations that made	a section 501(h) election do not have to comp	lete all of the five colum	ıns below.
		Se	e the separate instructions for lines 2a throug	h 2f.)	

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total			
2a Lobbying nontaxable amount								
b Lobbying ceiling amount (150% of line 2a, column (e))								
c Total lobbying expenditures								
d Grassroots nontaxable amount								
e Grassroots ceiling amount (150% of line 2d, column (e))								
f Grassroots lobbying expenditures								

Schedule C (Form 990) 2024

Schedule C (Form 990) 2024 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (b) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. Yes No Amount During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: X Volunteers? X Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? X X d Mailings to members, legislators, or the public? X e Publications, or published or broadcast statements? X f Grants to other organizations for lobbying purposes? X 3,600 g Direct contact with legislators, their staffs, government officials, or a legislative body? X h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Х i Other activities? j Total. Add lines 1c through 1i X 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? **b** If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 **d** If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? ... Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No;" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments, and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2a Carryover from last year 2b Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information. Schedule C, Part II-B, Line 1 The council paid \$3,600 to the Corydon Group for representation in Indianapolis.

DAA Schedule C (Form 990) 2024

Schedule C (Form	990) 2024	Girl	Sco	outs	of	Kentuckiana,	Inc.	61-0444698	Page 4
Part IV	Supplemental								
	•			`					

SCHEDULE D (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Girl Scouts of Kentuckiana, Inc. 61-0444698 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 Aggregate value at end of year _____ 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Total number of conservation easements Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included on line 2a d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conversation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other 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 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990. Part X...

<u>sche</u>	dule D (Form 990) (Rev. 12-2024) GITI	SCOULS OF	Kentuckiana	, inc.	01-044469	<u> </u>	F	age ∠
Pa	art III Organizations Maintaining	Collections of	Art, Historical Tr	easures, or Oth	er Similar Ass	sets (cor	ntinued	<u>d)</u>
3	Using the organization's acquisition, accession collection items (check all that apply).	, and other records, ch	neck any of the following	g that make significant	use of its			
а	Public exhibition	d \square L	oan or exchange progra	am				
b	Scholarly research		Other					
C	Preservation for future generations	· .						
		actions and avalois has	u that further the areas	i-ation's avament nume	oo in Dort			
4	Provide a description of the organization's colle	ections and explain nov	w they further the organ	ization's exempt purpo	se in Part			
	XIII.							
5	During the year, did the organization solicit or						_	7
Pa	assets to be sold to raise funds rather than to art IV Escrow and Custodial Ar		of the organization's co	llection?		<u>'</u>	res _	No
	Complete if the organization 990, Part X, line 21.	n answered "Yes"	on Form 990, Pa	rt IV, line 9, or re	ported an amo	unt on Fo	orm	
12	Is the organization an agent, trustee, custodial	or other intermedian	for contributions or other	ar accete not				
ıa						▼ .	, F	٦
	included on Form 990, Part X?					X	res _	No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the following	ing table.					
						Amou	nt	
С	Beginning balance				1c			
	Additions during the year							
	Distributions during the year							
f					40			
	•				· · · · · · · · · · · · · · · · · · ·	X	/	T N =
	Did the organization include an amount on Fo					· · · · · · · · · · · · · · · · · · ·		No
	If "Yes," explain the arrangement in Part XIII.	neck nere if the explai	nation has been provide	ed in Part XIII			🕰	-
Pa	ert V Endowment Funds							
	Complete if the organization	<u>n answered "Yes"</u>	on Form 990, Pa	rt IV, line 10.	•			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years bac	k (e) F	our years	back
1a	Beginning of year balance	5,247,707	4,738,896	5,804,377	5,179,3	77 4	,765,	411
	Contributions	11,257	5,622	13,466	32,1	.89		
	Net investment earnings, gains,	-	•	<u> </u>	-			
٠		622,362	694,532	-1,028,947	708,1	91	575	488
	and losses	022/302	051,552	1,020,517	70071		3,3,	100
	Grants or scholarships					-		
е	Other expenditures for facilities and							
	programs	-155,567	-191,343	-50,000	-115,3	80	-161,	522
f	Administrative expenses							
g	End of year balance	5,725,759	5,247,707	4,738,896	5,804,3	77 5	,179,	377
2	Provide the estimated percentage of the currer	nt vear end balance (lin	ne 1g. column (a)) held	as:				
а	Board designated or quasi-endowment	%	3, (-,,					
	Permanent endowment 68.00 %							
С	Term endowment 32.00 %							
	The percentages on lines 2a, 2b, and 2c should	ld equal 100%.						
3a	Are there endowment funds not in the possess	sion of the organization	that are held and admi	inistered for the				
	organization by:						Yes	No
	(i) Unrelated organizations?					3a(i) X	
	(II) D.14.1							Х
h	If "Yes" on line 3a(ii), are the related organization						4	
						30		<u> </u>
	Describe in Part XIII the intended uses of the		ient tunas.					
Pa	ert VI Land, Buildings, and Equ							
	Complete if the organization	<u>n answered "Yes"</u>	<u>on Form 990, Pa</u>	<u>rt IV, line 11a. Se</u>	<u>ee Form 990, P</u>	art X, lin	e 10.	
	Description of property	(a) Cost or other ba	asis (b) Cost or ot	her basis (c)	Accumulated	(d) Boo	k value	
		(investment)	(other	' I	epreciation			
1a	Land		2,17	8,352		2,1	.78,	352
	Di di dia sa				,037,799		232,	
		•	13/2/	0,527	, , , , , , , , , ,		,	. 20
	Leasehold improvements		1	0 CEE 1	055 007		1 / /	760
	Equipment		1,50	00,655 1	,055,887		144,	/ b 8
	Other							
[otal	L Add lines 1a through 1e (Column (d) must ed	gual Form 990 Part X	line 10c column (R))		l	7 - 8	355 -	848

	orm 990) (Rev. 12-2024) GIFI SCOUTS OF K	entuckiana, inc	. 61-0444698	Page
Part VII	Investments – Other Securities Complete if the organization answered "Yes"	on Form 990, Part IV. li	ne 11b. See Form 990,	Part X, line 12.
	(a) Description of security or category	(b) Book value	(c) Method of	
	(including name of security)		Cost or end-of-yea	r market value
	derivatives			
	ld equity interests			
(3) Other				
(A)				

(1.1)				
	n (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments - Program Related	· · ·	•	
	Complete if the organization answered "Yes"	on Form 990, Part IV, li	ne 11c. See Form 990, I	Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of	valuation:
			Cost or end-of-yea	r market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(9)				
	n (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets			
	Complete if the organization answered "Yes"	on Form 990, Part IV, li	ne 11d. See Form 990, I	Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
•	n (b) must equal Form 990, Part X, line 15, col. (B))			
Part X	Other Liabilities			
	Complete if the organization answered "Yes"	on Form 990, Part IV, li	ne 11e or 11f. See Form	990, Part X,
	line 25.			
1.	(a) Description of lia	ability		(b) Book value
	income taxes			
	Liability			38,39
	rity deposit			14,52
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	n (b) must equal Form 990, Part X, line 25, col. (B))			52,918
· Juli (Coluilli	r (2) must oquar i sim 330, r art A, iiilo 20, toi. (D)/	<u></u>		J2,J1

1 ago 4								
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return								
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.								
1	Total revenue, gains, and other support per audited financial statements			1	7,668,388			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
а	Net unrealized gains (losses) on investments	2a	454,161					
b	Donated services and use of facilities	2b						
С	Recoveries of prior year grants	2c						
d	Other (Describe in Part XIII.)	2d	-2,603,668					
е	Add lines 2a through 2d			2e	-2,149,507			
3	Subtract line 2e from line 1			3	9,817,895			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:							
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a						
b	Other (Describe in Part XIII.)	4b	-101,654					
С	Add lines 4a and 4b			4c	-101,654			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	9,716,241			
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem			Retu	ırn			
	Complete if the organization answered "Yes" on Form 990, Page 1	art IV, li	ne 12a.					
1	Total expenses and losses per audited financial statements			1	6,806,306			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:							
а	Donated services and use of facilities	2a						
b	Prior year adjustments	2b						
С	Other losses	1 0- 1						
d	Other (Describe in Part XIII.)	2d	101,654					
е	Add lines 2a through 2d			2e	101,654			
3	Subtract line 2e from line 1	.,		3	6,704,652			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:							
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a						
b	Other (Describe in Part XIII.)	4b	2,942,903					
С	Add lines 4a and 4b			4c	2,942,903			

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

Part IV, Line 1b - Explanation for Unreported Contributions or Assets Collect membership dues and remit them to the national organization, Girl Scouts USA.

Part IV, Line 2b - Escrow Liability Arrangement Explanation Collect membership dues and remit them to the national organization, Girl Scouts USA.

Part V, Line 4 - Intended Uses for Endowment Funds
To provide general operating support to the organization's various programs that build courage, confidence and character in our members.

Part X - FIN 48 Footnote

The Council is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. However, income from certain activities not directly related to the Council's tax-exempt purposes could be subject to taxation as unrelated business income. The Council qualified for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization that is not a private foundation under Section 509(a)(2). IRC Section 513(a) defines an unrelated trade or business of an exempt organization as any trade or business which is not substantially related to the exercise or performance of its trade or business. Unrelated business income arises from rental income earned by the

5

9,647,555

Part XIII Supplemental Information (continued)

Council. Income tax expense on unrelated business income totaled \$5,632 and \$1,253 for the years ended December 31, 2024 and 2023, respectively, for the prior year tax liabilities.							
Management has concluded that any tax positions that would not meet the more-likely-than-not criterion of FASB ASC Topic 740 would be immaterial to the financial statements taken as a whole. Accordingly, the accompanying financial statements do not include any provision for uncertain tax positions, and no related interest or penalties have been recorded in the consolidated statements of activities or accrued in the consolidated statements of financial position.							
Part XI, Line 2d - Revenue Amounts Included in Financials Change in value of perpetual trusts Direct Cost of Program Revenue	\$ \$	her -2,9	302,65 906,32	8 6			
Part XI, Line 4b - Revenue Amounts Included on Return - Otl Direct Office Rental Expenses		-:	L01,65	4			
Part XII, Line 2d - Expense Amounts Included in Financials Direct Office Rental Expenses	- C \$	the	r 101,65	4			
Part XII, Line 4b - Expense Amounts Included on Return - Or Direct Cost of Program Revenue Book / Tax Depreciation Difference	ther \$ \$		906,32 36,57				

SCHEDULE G (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19; or if the
organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Girl Scouts of Ken		Employer identification number 61-0444698						
Part I Fundraising Activities. Complete if	the organizati	on a	ารพย	ered "Yes" on Form				
Form 990-EZ filers are not required t								
1 Indicate whether the organization raised funds through any								
a Mail solicitations				nment grants				
b Internet and email solicitations	f Solicitation	of gov	ernme	ent grants				
c Phone solicitations	g Special fur	ndraisin	g eve	ents				
d In-person solicitations								
2a Did the organization have a written or oral agreement with or key employees listed in Form 990, Part VII) or entity in	connection with pr	ofessio	nal fu	indraising services?		Yes No		
b If "Yes," list the 10 highest paid individuals or entities (fund compensated at least \$5,000 by the organization.	Iraisers) pursuant t	to agre	emen	ts under which the fundra	niser is to be			
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fund- raiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization		
		Yes	No					
1								
2								
3								
,								
4								
5								
6								
7								
8								
9								
10		1						
10								
Tatal								
Total								
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.								

61-0444698

Schedule G (Form 990) (Rev. 12-2024)Girl Scouts of Kentuckiana, Inc. Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events Via Colori None (add col. (a) through col. (c)) (event type) (event type) (total number) Revenue 1 Gross receipts 65,603 65,603 65,603 2 Less: Contributions 65,603 **3** Gross income (line 1 minus line 2) ... 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs Direct Expenses **7** Food and beverages 33,534 33,534 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 33,534 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Expenses 3 Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: Is the organization licensed to conduct gaming activities in each of these states? 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Sche	dule G (Form 990) (Rev. 12-2024)Girl Scouts of Kentuckiana, Inc. 61-0444698			F	age 3
11	Does the organization conduct gaming activities with nonmembers?			Yes	No
12	Is the organization a grantor, beneficiary, or trustee of a trust; or a member of a partnership or other entity	•	_		
	formed to administer charitable gaming?		∐ ,	Yes	No
13	Indicate the percentage of gaming activity conducted in:				
а	The organization's facility	13a			%
b	An outside facility	13b			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and				
	records:				
	Name				
	Address				
15a	Does the organization have a contract with a third party from whom the organization receives gaming		П.	. 1	– 1
	revenue?		Ш,	Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the				
	amount of gaming revenue retained by the third party \$				
С	If "Yes," enter tha name and address of the third party:				
	Nama				
	Name				
	Address				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation \$				
	Description of services provided				
	Director/officer Employee Independent contractor				
17	Mandatory distributions:				
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to				
	retain the state gaming license?		\Box	Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or		_		
	spent in the organization's own exempt activities during the tax year \$				
Pa	Int IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii	and (v); a	nd	
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional info	ormatio	on.		
	See instructions.				

SCHEDULE I (Form 990)

(Rev. December 2024)

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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

· ·								Employer identification number 61-0444698			
Pa	art I General Information on Grants and	Assistance					•				
	and the selection criteria used to award the grants or assistance. Describe in Part IV the organization's procedures for monitor	ance?ing the use of gra	ant funds in t	the United States.					X No		
Pa	Grants and Other Assistance to Done Part IV, line 21, for any recipient that							answered "Yes" on I	-orm 990,		
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 on noncash assistan	` ' '			
(1)											
(2)											
(3)											
(4)											
٠											
(5)											
(6)											
(7)											
(8)											
(9)											
2	Enter total number of section 501(c)(3) and government org	anizations listed in	the line 1 ta	able							
3	Enter total number of other organizations listed in the line 1	table									

SCHEDULE O (Form 990)

(Rev. December 2024)

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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Girl Scouts of Kentuckiana, Inc.

Employer identification number 61-0444698

Form 990 - Organization's Mission or Most Significant Activities Girl Scouting builds girls of courage, confidence and character, who make the world a better place. Girl Scouts of Kentuckiana advocates for all girls and helps them build character and gain skills for success in life. In partnership with committed adults and communities, we inspire girls to develop strong values, leadership skills, social conscience and conviction about their own potential and self-worth.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders Adult members and Youth members 14 years of age and above elect persons from amongst their number to be delegates to the Delegate Assembly. The Delegate Assembly meets annually.

Form 990, Part VI, Line 7a - Election of Members and Their Rights The Delegate Assembly elects the members of the Board and the Officers of the Board.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members Members have sole authority to approve, amend the articles of incorporation and by-laws of the organization. Members also elect those who serve on the governing body.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 The 990 is prepared by the Council's auditors using information supplied by their audit findings and management data. A draft 990 is reviewed by Council staff and the Audit Committee of the Board. Suggested revisions from the Audit Committee are made by the auditors when appropriate. The 990 is then reviewed and accepted by the full board at a regular meeting.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy Review of and attestation to the conflict of interest policy (by all Board members) is part of the election and installation of new board members every year. Major changes in vendor relationships are made by committees of Board members, staff members and community experts so that no single individual or group has too much influence in contracting or resource allocation.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Base salary is determined by the Board of Directors based on guidelines provided by GSUSA for the size, location, demographics, etc. of the Council.

Form 990, Part VI, Line 18 - No Public Disclosure Explanation Through the IRS, our Form 990 is available for viewing through: guidestar.org. We also have current and recent historical 990s available on the Council's website: gskentuckiana.org. Our Form 990 and other applicable forms are available upon request during normal business hours at the Council's main office.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

SCHEDULE O (Form 990)

(Rev. December 2024)

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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Girl Scouts of Kentuckiana, Inc. 61-0444698 Any of the organization's documents, policies and financial statements are available upon request. Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Change in value of perpetual trusts \$302,658 Direct Cost of Program Revenue \$-2,906,326 Direct Office Rental Expenses \$101,654 Direct Office Rental Expenses \$-101,654 Direct Cost of Program Revenue \$2,906,326 Book / Tax Depreciation Difference \$36,577 Total \$3339,235	Name of the organization	Employer identification number
Any of the organization's documents, policies and financial statements are available upon request. Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Change in value of perpetual trusts \$ 302,658 Direct Cost of Program Revenue \$ -2,906,326 Direct Office Rental Expenses \$ 101,654 Direct Office Rental Expenses \$ -101,654 Direct Cost of Program Revenue \$ 2,906,326 Book / Tax Depreciation Difference \$ 36,577 Total \$ 339,235	Girl Scouts of Kentuckiana, Inc.	61-0444698
Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Change in value of perpetual trusts \$ 302,658 Direct Cost of Program Revenue \$ -2,906,326 Direct Office Rental Expenses \$ 101,654 Direct Cost of Program Revenue \$ 2,906,326 Book / Tax Depreciation Difference \$ 36,577 Total \$ 339,235	Any of the organization's documents, policies and financi	
Change in value of perpetual trusts \$ 302,658		
Direct Cost of Program Revenue \$ -2,906,326	Form 990, Part XI, Line 9 - Other Changes in Net Assets 1	Explanation
Direct Office Rental Expenses \$ 101,654 Direct Office Rental Expenses \$ -101,654 Direct Cost of Program Revenue \$ 2,906,326 Book / Tax Depreciation Difference \$ 36,577 Total \$ 339,235		
Direct Cost of Program Revenue \$ 2,906,326 Book / Tax Depreciation Difference \$ 36,577 Total \$ 339,235	Direct Cost of Program Revenue	
Direct Cost of Program Revenue \$ 2,906,326 Book / Tax Depreciation Difference \$ 36,577 Total \$ 339,235	Direct Office Rental Expenses	
Book / Tax Depreciation Difference \$ 36,577 Total \$ 339,235	Direct Office Rental Expenses	\$ -101,654
Total \$ 339,235		
	Total	\$ 339,235
	·	
	•	
	•	
	· · · · · · · · · · · · · · · · · · ·	
	·	
·· ·· ·		
•		
	•	
•	•	