Extended to August 15, 2018

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 16

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

Inspection

A F	or the	2016 calendar year, or tax year beginning $$ OCT 1 , 2016 $$ and $$	ending ${\mathbb S}$	EP 30, 201	7
B (a	Check if pplicable:	C Name of organization		D Employer identi	fication number
	Address change	Girl Scouts of Central Maryland, Inc			
	Name change	Doing business as		52-	0780207
	Initial return Final return/	Number and street (or P.O. box if mail is not delivered to street address) 4806 Seton Drive	Room/suite	E Telephone numb	er -358-9711
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	8,187,266.
	Amende return	Baltimore, MD 21215		H(a) Is this a group	return
	Applica- tion pending			for subordinate	
		Same as C above		H(b) Are all subordinates	
		mpt status: $\overline{\mathbf{X}}$ 501(c)(3) $\overline{}$ 501(c) () $\overline{}$ (insert no.) $\overline{}$ 4947(a)(1) o	or 527	1	a list. (see instructions)
		www.gscm.org	1	H(c) Group exempt	
	art I	organization: X Corporation			M State of legal domicile; MD
Φ	1 E	Briefly describe the organization's mission or most significant activities: GSCM			
Governance	<u> </u>	courage, confidence and character who make			
erns	2 0	Check this box if the organization discontinued its operations or dispose	ed of more	1	
Š	3 1			3	
		lumber of independent voting members of the governing body (Part VI, line 1b)			
Activities &		otal number of individuals employed in calendar year 2016 (Part V, line 2a)			0.7.64
tivit		otal number of volunteers (estimate if necessary)			
Ac		otal unrelated business revenue from Part VIII, column (C), line 12			
	D IV	let unrelated pusitiess taxable income from Form 990-1, line 34		Prior Year	Current Year
	8 0	Contributions and grants (Part VIII, line 1h)		521,542	
Jue	1	Program service revenue (Part VIII, line 2g)		597,651	
Revenue	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		459,182	
Re		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		4,027,598	
	I	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,605,973	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		136,602	
	I	Benefits paid to or for members (Part IX, column (A), line 4)		0 .	
S	45 0	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,860,022	4,040,848.
Expenses	16 a F	Professional fundraising fees (Part IX, column (A), line 11e)		0 .	0.
g	b T	otal fundraising expenses (Part IX, column (D), line 25)	29.		
ш	17 C	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,879,535	
	18 T	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,876,159	
		Revenue less expenses. Subtract line 18 from line 12		-270,186	138,651.
Net Assets or				ginning of Current Year	
Sset	20 T	otal assets (Part X, line 16)		17,019,663	
et A	21 T	otal liabilities (Part X, line 26)		1,065,193	
	22 N	let assets or fund balances. Subtract line 21 from line 20		15,954,470	16,983,709.
		ies of perjury, I declare that I have examined this return, including accompanying schedules	and etatoma	unter and to the heet of n	ov knowledge and belief it is
	•	and complete. Declaration of preparer (other than officer) is based on all information of whi		•	ny knowledge and belief, it is
liuo	, соггось,	and complete. Declaration of preparer (other than officer) is based on an information of will	icii pi cpai ci	ilas arīy kriowicuge.	
Sig	n	Signature of officer		Date	
Her	- 1	Violet M Apple, CEO			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid	ı <u>I</u> V	Monique Booker	0	2/26/18 self-emp	
Prep		Firm's name SB & Company, LLC		Firm's EIN ▶	20-2153727
Use	Only	Firm's address 200 International Circle, Suite	5500		
		Hunt Valley, MD 21030		Phone no. (
May	the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No

· u	Check if Schedule O contains a response or note to any line in this Part III	Х
1	Briefly describe the organization's mission:	
	Girl Scouting builds girls of courage, confidence, and character who	
	make the world a better place.	
2	Did the organization undertake any significant program services during the year which were not listed on the	_
	prior Form 990 or 990-EZ?	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 services?Yes 🗵	_ No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
4-	revenue, if any, for each program service reported.	7 \
4a	(Code:)(Expenses \$5,203,634. including grants of \$96,303.) (Revenue \$4,560,32] Program Service Accomplishment: Girl Scouts of Central Maryland (GSCM)	<u>/•</u>)
	offers research-based and evidence-based programs in a variety of	
	venues in Baltimore City, and Anne Arundel, Baltimore, Carroll, Harfor	a
	and Howard Counties, using experiential learning techniques that	<u>u</u>
	produce impact and positive outcomes in more than 20,000 girls K-12,	
	including 4,000 underserved girls, in the national priority areas of	
	STEM education/career aspirations, the outdoors, life skills and	
	entrepreneurship. All programs impact a girl's journey to adulthood,	
	increasing a girl's readiness for and opportunities to be successful i	
	school, aspire to pursue rewarding careers, maintain productive	
	interpersonal relationships with a foundation of strong	
	self-image/self-esteem, and respect and appreciate the	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$)
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 5, 203, 634.	
	Total program control expenses y	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	Х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.			
а	in rea, complete conceans 2,		37	
	Part VI	11a	Х	
b	3			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С				X
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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			X
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	Α.
e	in 100, complete conceans B, ratex	11e	Λ	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	444	х	
100	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes." <i>complete</i>	11f	21	
ıZd	, ,	12a		X
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	120		- 25
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13		Х
14a	The state of the s	14a		X
b		1.0		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G. Part III	19		Х
			000	

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
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	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form 990 (2016) Girl Scouts of Central Maryland, Inc Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 30	-		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			37
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
		5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
ba	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6-		Х
L	any contributions that were not tax deductible as charitable contributions?	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	OD		
' а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	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 a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 Cross resolits included as Farra 200 Part VIII, line 10 for rubilities and falls facilities	1		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against	1		
b	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	. <u>.</u> .u		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	25.5	
		Form	990	(2016)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 25			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 25			
2	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?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			•
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X	
	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?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	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?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		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?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶MD			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) as	/ailable	•	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	Donald Biles - 410-358-9711			
	4806 Seton Drive, Baltimore, MD 21215			

Form 990 (2016) Girl Scouts of Central Maryland, Inc 52-0 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

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

Check this box if neither the organization no	or any related	orga	nizat	tion	con	npen	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average	(do	Position (do not check more than one				200	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son i	s both	an	compensation	compensation	amount of
	week		cer an	d a d	recto	r/trus	tee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	or di	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	ruste	l trusi		99	ubeu		(88-2/1099-181130)		organization and related
	below	dual t	Institutional trustee	_	old m	st col	-			organizations
	line)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Former			3
(1) Lynne M. Durbin, Esq.	2.00									
Chair		Х		Х				0.	0.	0.
(2) Karen M. Singer, Esq.	2.00									
1st Vice Chair		Х		Х				0.	0.	0.
(3) Betsy A. Bender	2.00									
2nd Vice Chair		Х		Х				0.	0.	0.
(4) Gwendolyn D. Skillern, CPA, CGMA	2.00									
CRMA, 3rd Vice Chair		Х		Х				0.	0.	0.
(5) G. Louise Green	2.00									
Treasurer		Х		Х				0.	0.	0.
(6) Judy McGovern	2.00									
Secretary		Х		Х				0.	0.	0.
(7) Karen Barbour	2.00									
Member-at-large		Х						0.	0.	0.
(8) Juliet Bodinetz	2.00									
Member-at-large		Х						0.	0.	0.
(9) Christine E. Buckley, J.D.	2.00									
Member-at-large		Х						0.	0.	0.
(10) Regina Clay	2.00								_	_
Member-at-large		Х						0.	0.	0.
(11) Deborah H. Diehl, Esq.	2.00								_	_
Member-at-large		Х						0.	0.	0.
(12) Grace Fieni (Girl member)	2.00								_	_
Member-at-large		Х						0.	0.	0.
(13) Bonnie K. Heneson	2.00									_
Chair, Nominating Committee		Х						0.	0.	0.
(14) Barbara A. Hutchinson, MD, PhD	2.00									_
FACC, Member-at-large		X						0.	0.	0.
(15) Marian C. Hwang, Esq.	2.00									
Member-at-large		Х						0.	0.	0.
(16) Katherine Lay (Girl Member)	2.00									_
Member-at-large	0.00	Х						0.	0.	0.
(17) Julie Lenzer	2.00									_
Member-at-large		Х						0.	0.	0.

(A) Name and title	(B) Average hours per week	box	not c , unle	Posi heck i ss per	ition more rson i	than o	n an	(D) Reportable compensation	(E) Reportable compensation		am	(F) timate nount	
	(list any hours for related organizations below line)	Individual trustee or director	In stitutio nal trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	comp fro orga and	other pensa om the anizat d relat nizati	e ion ed
(18) J. Glenn Little, II	2.00									\top			_
Member-at-large	2 00	Х	_					0.	C) .			0.
(19) Kellie T. MacDonald Member-at-large	2.00	Х						0.	(0.
(20) Valencia L. McClure	2.00	Λ	\vdash					0.		' +			0.
Member-at-large	2.00	Х						0.	C).			0.
(21) L. Content McLaughlin, Esq	2.00									+			
Member-at-large		х						0.	C).			0.
(22) Carmina Perez-Fowler	2.00									十			-
Member-at-large		Х						0.	C).			0.
(23) Cynthia E. Rodgers-Waire, Esq.	2.00									\top			
Member-at-large		Х						0.	C).			0.
(24) Darlene B. Smith, PhD	2.00												
Member-at-large		Х						0.	C).			0.
(25) Deborah Stallings, SHRM-SCP, SPHR	2.00												•
Member-at-large	2 00	Х	_					0.	·) .			0.
(26) Jania Stout	2.00	х							,				0
Member-at-large		A						0.).			0.
1b Sub-total								378,953.).	3 (0,5	
c Total from continuation sheets to Part VII d Total (add lines 1b and 1c)								378,953.).),5	
Total number of individuals (including but not not not not not not not not not no							o re					<i>3</i>	
compensation from the organization	or miniou to th	000		u un	,0,0	,	010	, convoca mono cham proos,					3
												Yes	No
3 Did the organization list any former officer,	director, or tru	ıste	e, ke	y en	nplo	yee,	or h	nighest compensated er	nployee on				
line 1a? If "Yes," complete Schedule J for si	uch individual									. [3		X
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150),000? If "Yes,	" co	mple	ete S	Sche	edule	Jf	or such individual		L	4	X	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes." com	plete Schedule	e J fo	or su	ıch r	oers	on					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest con	-	-							•	isatio	on tro	m	
the organization. Report compensation for t	irie caleridar ye	ear e	riuii	ig w	itii C	ועע וכ	<u> </u>	(B)	ear.		(C	2)	
Name and business	address	NO	ONE	3				Description of s	ervices	Со		r , nsatio	n
							\perp						
							\dashv						
							\dashv						
2 Total number of independent contractors (in	ncludina hut n	ot lin	niter	d to t	thos	se lie	ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz	•	J. 111			()			2.5 6.10.1				
See Part VII, Section		in	ua	ti	on	s	he	ets	•	F	orm \$	990 (2016)

(A) (B) (C) (C) (D) (E) (D)	Form 990 Girl Sco	uts of C	en	ıtr	a1	<u> M</u>	ar	<u>y1</u>	and, Inc	52-078	0207
Name and title	Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, aı	nd H	lighe	est (Compensated Employ	ees (continued)	
Nous Per Week (list any) Per										' '	(F)
Nous Per Week (list any) Per		1									
		hours	(cl	heck	all ·	that	арр	ly)		· ·	amount of
(ijist any burns for related organizations shows for related organizations and related organizations organizations which is a final part of the final		per							from	from related	other
		I	_				yee				
		1 '	recto				em plc			(W-2/1099-MISC)	
		I	ordi	ee ee			ated		(W-2/1099-MISC)		"
			ustee	trust		e e	Suedi				
		1 ~	lual tr	tional		nploy	tcon	_			organizations
		1	ndivic	nstitu	Officer	(ey en	Highes	orme			
Member-at-large X	(27) Sidney Strong (Girl Member)	2.00	_	_		_	_	_			
Member-at-large	Member-at-large		Х						0.	0.	0.
(29) Dr. Maria Thompson	(28) JaNean Stubbs-Taylor	2.00									
Member - at - large	Member-at-large		Х						0.	0.	0.
30 Suranne Thompson 2.00	-	2.00									
Member-at-large			Х						0.	0.	0.
(31) Joyce L. Ulrich 2.00 X	-	2.00									
Member-at-large		1 2 22	X			_			0.	0.	0.
(32) Emily Vajo (Girl member)	-	2.00	37								_
Member-at-large		2 00	A				\vdash		0.	0.	U •
(33) Kimberly Valentine-Langley		2.00	v						_	0	<u> </u>
Member-at-large		2.00	77						0.	0.	<u></u>
August A		2:00	x						0.	0.	0.
Chief Executive Officer (35) Yong H. Kim (40.00 Chief Financial Officer (36) Lorrie Caudle Chief Operating Officer (37) Donald Biles Chief Financial Officer from 06/17 (2000 Chief Financial Officer fro	(34) Violet M. Apple	40.00									
A	Chief Executive Officer		1		х				163,636.	0.	11,571.
Chief Financial Officer (36) Lorrie Caudle Chief Operating Officer (37) Donald Biles Chief Financial Officer from 06/17 X	(35) Yong H. Kim	40.00							,	-	, -
A	Chief Financial Officer				Х				112,737.	0.	9,646.
(37) Donald Biles Chief Financial Officer from 06/17 X 0. 0. 0. 0.	(36) Lorrie Caudle	40.00									
Chief Financial Officer from 06/17 X 0. 0. 0.	Chief Operating Officer				X				102,580.	0.	9,323.
	(37) Donald Biles	40.00									
Total to Part VII. Section A line 1c. 378, 953. 30, 540.	Chief Financial Officer from 06/17				Х				0.	0.	0.
Total to Part VII. Section A line 10.											
Total to Part VII. Section A line 1c. 378, 953. 30, 540.											
Total to Part VII. Section A line 1c. 378 . 953 . 30. 540 .											
Total to Part VII. Section A line 10.											
Total to Part VII. Section A line 1c. 378, 953, 30, 540,											
Total to Part VII. Section A line 1c. 378 , 953 . 30, 540 .											
Total to Part VII. Section A line 1c. 378 , 953 . 30, 540 .											
Total to Part VII. Section A line 1c. 378 , 953 . 30, 540 .											
Total to Part VII. Section A line 1c. 378 , 953 . 30, 540 .											
Total to Part VII. Section A line 1c. 378 , 953 . 30, 540 .			1								
Total to Part VII. Section A line 1c. 378 , 953 . 30, 540 .											
Total to Part VII. Section A line 1c. 378 , 953 . 30, 540 .			L								
Total to Part VII. Section A line 1c. 378 , 953 . 30, 540 .											
Total to Part VII. Section A line 1c. 378 - 953 - 30 - 540 -											
Total to Part VII. Section A line 1c 378 - 953 - 30 540 -											
Total to Part VII. Section A line 1c 378 - 953 - 30 540 -											
	Total to Part VII. Section A line 1c								378,953.		30,540.

		Check if Schedule O conta	ains a response	or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
इ इ	1 a	Federated campaigns	1a					
Grants nounts		Membership dues						
Ē,		Fundraising events		525.				
iifts ar A		Related organizations						
s, G mila		Government grants (contribution						
ion		All other contributions, gifts, grant						
but		similar amounts not included above	/e 1f	505,909.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1	la-1f: \$					
<u>လ</u> ရ	h	Total. Add lines 1a-1f			506,434.			
				Business Code				
မွ	2 a	Program Service Fees		900099	651,212.	651,212.		
Program Service Revenue	b							
am Ser evenue	С							
ran Sev	d							
og T	е							
۵	f	All other program service rever						
	g				651,212.			
	3	Investment income (including			106 164			106 164
		other similar amounts)			196,164.			196,164.
	4	Income from investment of tax						
	5	Royalties						
	•	0	(i) Real	(ii) Personal				
	оa	Gross rents	0					
	D	Less: rental expenses Rental income or (loss)	120,233	-				
		A1			120,233.			120,233.
		Gross amount from sales of	(i) Securities					
	, u	assets other than inventory	613,348					
	b	Less: cost or other basis	,					
		and sales expenses	11,383	.				
	С	Gain or (loss)	601,965					
		Net gain or (loss)			601,965.			601,965.
0		Gross income from fundraising						
nu.		including \$	525. of					
Other Reven		contributions reported on line	1c). See					
۳. R		Part IV, line 18	a	189,055.				
the l		Less: direct expenses		26,850.				
J		Net income or (loss) from fund		_	162,205.			162,205.
	9 a	Gross income from gaming ac						
		Part IV, line 19		1				
		Less: direct expenses		·				
		Net income or (loss) from gam						
	10 a	Gross sales of inventory, less i		F 020 104				
		and allowances						
		Less: cost of goods sold		1,921,009.	3,909,115.	3,909,115.		
	С	Net income or (loss) from sales Miscellaneous Revenue		Business Code	3,303,113.	3,303,113.		
	11 ^	Miscellaneous Revenue	-	900099	80,696.			80,696.
	ii a b				23,030.			
	C							
		All other revenue						
		Total. Add lines 11a-11d			80,696.			
	12	Total revenue. See instructions.			6,228,024.	4,560,327.	0.	1,161,263.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX											
		se or note to any line in (A)	(B)	(C)	(D)						
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses						
1	Grants and other assistance to domestic organizations										
	and domestic governments. See Part IV, line 21										
2	Grants and other assistance to domestic										
	individuals. See Part IV, line 22	96,303.	96,303.								
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,	400 405	245 410	40 600	01 250						
	trustees, and key employees	409,495.	347,418.	40,699.	21,378.						
6	Compensation not included above, to disqualified										
	persons (as defined under section 4958(f)(1)) and										
_	persons described in section 4958(c)(3)(B)	2 600 610	2 201 006	267 217	140 415						
7	Other salaries and wages	2,689,618.	2,281,886.	267,317.	140,415.						
8	Pension plan accruals and contributions (include	121 062	365,715.	12 012	22 504						
_	section 401(k) and 403(b) employer contributions)	431,062. 276,647.	234,709.	42,843.	22,504. 14,443.						
9	Other employee benefits	234,026.	198,549.	23,259.	12,218.						
10	Payroll taxes	234,020.	130,343.	23,239.	12,210.						
11	Fees for services (non-employees):										
a	Management	3,272.	2,776.	325.	171.						
	Legal	14,500.	12,302.	1,441.	757.						
	Accounting	16,800.	14,253.	1,670.	877.						
	Lobbying Professional fundraising services. See Part IV, line 17	10,000.	14,233.	1,070.	011.						
	Investment management fees	69,268.	58,767.	6,885.	3,616.						
f		05,200	30,707.	0,003.	3,010.						
g	column (A) amount, list line 11g expenses on Sch 0.)	159,841.	135,610.	15,886.	8,345.						
12	Advertising and promotion	13,673.	11,600.	1,359.	714.						
13	Office expenses	391,831.	347,672.	40,729.	3,430.						
14	Information technology	331,031	317,0720	10 / 7 23 0	3,1301						
15	Royalties										
16	Occupancy	236,003.	200,226.	23,456.	12,321.						
17	Travel	126,624.	107,428.	12,585.	6,611.						
18	Payments of travel or entertainment expenses	,	,	,	- ,						
	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings										
20	Interest	16,028.	13,598.	1,593.	837.						
21	Payments to affiliates										
22	Depreciation, depletion, and amortization	435,391.	369,388.	43,273.	22,730.						
23	Insurance	187,459.	159,041.	18,631.	9,787.						
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)										
а	Equip. Rental and Maint	82,256.	69,787.	8,175.	4,294.						
b	Staff and Key Volunteer	37,950.	32,197.	3,772.	1,981.						
c		0.7000	7=7=2	7,							
d											
	All other expenses	161,326.	144,409.	16,917.							
25	Total functional expenses. Add lines 1 through 24e	6,089,373.	5,203,634.	598,310.	287,429.						
26	Joint costs. Complete this line only if the organization	-	-		-						
	reported in column (B) joint costs from a combined										
	educational campaign and fundraising solicitation.										
	Check here if following SOP 98-2 (ASC 958-720)										
					000						

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or note	to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,758.	1	796.
	2	Savings and temporary cash investments			332,439.	2	141,715.
	3	Pledges and grants receivable, net			149,817.	3	77,805.
	4	Accounts receivable, net			44,675.	4	51,664.
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensa-	ted em	ployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqualifi	ied per	sons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c	(3)(B), and contributing			
		employers and sponsoring organizations of secti	on 501	(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr).	Compl	ete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7			
¥	8	Inventories for sale or use			143,596.	8	148,688.
	9	B ::			77,935.	9	84,900.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		10,711,473.			
	b	Less: accumulated depreciation	10b	7,344,825.	3,368,985.	10c	3,366,648. 13,731,145.
	11	Investments - publicly traded securities			12,480,703.	11	13,731,145.
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line 1			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	419,755.	15	444,062.		
	16	Total assets. Add lines 1 through 15 (must equa			17,019,663.	16	18,047,423.
	17	Accounts payable and accrued expenses			339,538.	17	514,837.
	18	Grants payable	1.45 0.00	18	154 202		
	19	Deferred revenue			147,009.	19	154,389.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
es	22	Loans and other payables to current and former					
∄		key employees, highest compensated employees		•			
Liabilities					150 410	22	104 504
_	23	Secured mortgages and notes payable to unrelate			159,412.	23	124,584.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of	410 224		260 004
					419,234. 1,065,193.	25	269,904. 1,063,714.
	26	Total liabilities. Add lines 17 through 25			1,005,195.	26	1,005,714.
		Organizations that follow SFAS 117 (ASC 958)		k nere 🕨 🔼 and			
Ses	07	complete lines 27 through 29, and lines 33 and			13,597,158.	07	14,468,417.
ano	27	Unrestricted net assets Temporarily restricted net assets	607,827.	27 28	637,185.		
Ba	28		1,749,485.	<u>20</u> 29	1,878,107.		
pu	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (AS) shock hare	1,140,400.	29	1,070,107.
Ę		and complete lines 30 through 34.	JC 930	n, check here			
S	30	Capital stock or trust principal, or current funds				30	
set	31	Paid-in or capital surplus, or land, building, or eq				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated inc				32	
Ne	33	Total net assets or fund balances			15,954,470.	33	16,983,709.
	34	Total liabilities and net assets/fund balances			17,019,663.	34	18,047,423.
	<u> </u>				, , , , , , , , , , , , , , , ,	J f	, , , , 3 *

Form	990 (2016) Girl Scouts of Central Maryland, Inc	52-	0780207	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
					_
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,22		
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,08		
3	Revenue less expenses. Subtract line 2 from line 1	3		8,6	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	15,95		
5	Net unrealized gains (losses) on investments	5	89	0,58	<u>88.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	16,98	3,70	09.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>			X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin		t		
	Act and OMB Circular A-133?	-	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit	1		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2016)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

Total

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number Girl Scouts of Central Maryland, 52-0780207 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed n your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2016 Girl Scouts of Central Maryland, Inc 52-0780 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) 52-0780207 Page 2

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨 📗	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, e	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization's	s first, second, thi	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
_	organization, check this box and stop	here					>
	ction C. Computation of Public						
	Public support percentage for 2016 (lin					14	%
	Public support percentage from 2015					15	%
16a	33 1/3% support test - 2016. If the o	-			14 is 33 1/3% or m	nore, check this box	k and
	stop here. The organization qualifies a	. ,	· ·				
b	33 1/3% support test - 2015. If the o	-					
	and stop here. The organization qualit						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact						
	meets the "facts-and-circumstances" t	-	-		-		
b	10% -facts-and-circumstances test						
	more, and if the organization meets the						
46	organization meets the "facts-and-circu		•	•	,		}
18	Private foundation. If the organization	ı dıd not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	ind see instructions	·

(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 usalify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support	elow, please comp	lete Part II.)						
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	686,427.				506,434.			
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	5911376.	5825250.	5661484.	6095041.		28053478.		
3	Gross receipts from activities that are not an unrelated trade or business under section 513								
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf								
	The value of services or facilities furnished by a governmental unit to the organization without charge	CE07003	CE02CC0	C405050	6616502	5066761	21 27 27 57		
	Total. Add lines 1 through 5	6597803.	6503660.	6485950.	6616583.	5066761.	31270757.		
	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.		
r	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						0.		
c	Add lines 7a and 7b						0.		
8	Public support. (Subtract line 7c from line 6.)						31270757.		
	ction B. Total Support								
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6597803. 323,516.	6503660. 281,631.	6485950. 270,315.	392,317.		31270757. 1584176.		
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	323,516.	281,631.	270,315.	392,317.	316,397.	1584176.		
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	50,419.	5,126.	17,360.	36,104.	80,696.			
	Total support. (Add lines 9, 10c, 11, and 12.)	6971738.	6790417.	6773625.	7045004.		33044638.		
14	First five years. If the Form 990 is for	•			•				
Sad	check this box and stop here ction C. Computation of Publi	c Support Per					P		
	Public support percentage for 2016 (li			olumn (fl)		15	94.63 %		
16	Public support percentage from 2015			JidiTiiT (1))		16	94.96 %		
	ction D. Computation of Inves					101	7 2 2 3 3 70		
	Investment income percentage for 20			e 13. column (f))		17	4.79 %		
	Investment income percentage from 2					18	4.64 %		
	33 1/3% support tests - 2016. If the								
	more than 33 1/3%, check this box ar 33 1/3% support tests - 2015. If the	nd stop here. The	organization quali	fies as a publicly s	supported organiza	ition	▶ X		
•									
20	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
_		
3a		
3b		
3c		
- 55		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
3.5		
9с		
10a		
10b		
990 or 99	0-EZ	2016

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.

	dule A (Form 990 or 990-EZ) 2016 Girl Scouts of Central			52-0780207 Page 6
Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ing Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on	Nov. 20, 1970 (explain	in Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must	complete Se	ections 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		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
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-function	ally integrate	ed Type III supporting o	rganization (see

Schedule A (Form 990 or 990-EZ) 2016

instructions).

	dule A (Form 990 or 990-EZ) 2016 G1r1 Scouts of Type III Non-Functionally Integrated 509(i Central Mary	land, Inc 5	2-0780207 Page 7
	on D - Distributions	<u>(a)(a) aappartiiig argu</u>	(continued)	Current Year
1	Amounts paid to supported organizations to accomplish exer		- Carrone Four	
	Amounts paid to perform activity that directly furthers exemp			
_	organizations, in excess of income from activity	T pai poods or oupportou		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	 S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
_	and 4c			
8	Breakdown of line 7:			
<u>а</u>	5 (2010			
	Excess from 2013			
	Excess from 2014			
ď	Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2016

e Excess from 2016

Schedule A	(Form 990 or 990-EZ) 2016 Girl	Scouts	of Central	Maryland,	Inc	52-0780207	Page 8
Part VI	Supplemental Information. Part IV, Section A, lines 1, 2, 3b, 3c line 1; Part IV, Section D, lines 2 an Section D, lines 5, 6, and 8; and Pa	Provide the exp , 4b, 4c, 5a, 6, 9 d 3; Part IV, Sec	olanations required 9a, 9b, 9c, 11a, 11b tion E, lines 1c, 2a,	by Part II, line 10; Pa , and 11c; Part IV, Se 2b, 3a, and 3b; Part	rt II, line 17a or 1 ction B, lines 1 a V, line 1; Part V,	7b; Part III, line 12; and 2; Part IV, Section Section B, line 1e; Par	C,
	(See instructions.)						

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

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

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

	(see separate instructions), then	iana, Canadata Dart III			
	Section 501(c)(4), (5), or (6) organizat ne of organization	lions: Complete Part III.		Fi	mployer identification number
14411		outs of Central M	aruland In	I	52-0780207
Pa	rt I-A Complete if the org	anization is exempt unde	r section 501(c) o	or is a section 527	organization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ation's direct and indirect politica	l campaign activities in	n Part IV.	> \$
Pa	rt I-B Complete if the org	anization is exempt unde	r section 501(c)(3	3).	
1 2 3 4a b Pa 1 2 3 4	Enter the amount of any excise tax Enter the amount of any excise tax If the organization incurred a section Was a correction made? If "Yes," describe in Part IV. IT I-C Complete if the org Enter the amount directly expended Enter the amount of the filing organ exempt function activities Total exempt function expenditures line 17b Did the filing organization file Form Enter the names, addresses and en made payments. For each organization ontributions received that were pro-	incurred by the organization under incurred by organization manager in 4955 tax, did it file Form 4720 for anization is exempt under it by the filing organization for sectization's funds contributed to other. Add lines 1 and 2. Enter here an included in the included in	er section 4955 ers under section 4955 or this year? er section 501(c), or this year? er section 501(c), or this year? er section 501(c), or this year? er organizations for section 527 exempt function organizations for section for the filling organization organ	except section 50 on activities ction 527 itical organizations to whation's funds. Also enternization, such as a separation of the section of	Yes No Yes No I(c)(3). \$\\$ \\$ \$ \\$ \$ \\$ \$ Yes No N
	political action committee (PAC). If a (a) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization's funds. If none, enter	contributions received and

Schedule C (Form 990 or 990-EZ) 2016 Part II-A Complete if the org	Girl Scouts anization is exer	of Central npt under section	<u>Maryland, I</u> n 501(c)(3) and file	<u>nc 52-0</u> d Form 5768 (el e	0780207 Page 2 ection under
section 501(h)).					
expenses, and share	re of excess lobbying		Part IV each affiliated	group member's nam	e, address, EIN,
Limi	ts on Lobbying Expe	•		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influ	uence a legislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add li	nes 1a and 1b)				
d Other exempt purpose expenditure	es				
e Total exempt purpose expenditure	s (add lines 1c and 1d)			
f Lobbying nontaxable amount. Enter	er the amount from the	e following table in bot	h columns.		
If the amount on line 1e, column (a) o	or (b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e.			
Over \$500,000 but not over \$1,000	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (en	iter 25% of line 1f)				
h Subtract line 1g from line 1a. If zer	o or less, enter -0-				
i Subtract line 1f from line 1c. If zero	o or less, enter -0				
j If there is an amount other than ze reporting section 4911 tax for this	0	line 1i, did the organiz			Yes No
(Some organizations t	hat made a section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all o	f the five columns b	elow.
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(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 or 990-EZ) 2016

Schedule C (F	Form 990 or 990-EZ) 2016	Girl :	Scouts	of	Central	Marvland.	Inc	52-0780207	Page 3
	Complete if the org	janizatio	n is exem						, ago o

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. 1 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: a Volunteers? X	
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	
or referendum, through the use of:	
a Volunteers?	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? X	
c Media advertisements?	
d Mailings to members, legislators, or the public?	
e Publications, or published or broadcast statements?	
f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body?	
3 , , , , , , , , , , , , , , , , , , ,	
7 16.0	0.0
	00.
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? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section	
501(c)(6).	
Yes	No
1 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?	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3	
Part III-B 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, answered "Yes."	15
1 Dues, assessments and similar amounts from members1	
2 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	
b Carryover from last year	
c Total	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3	
4 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	
expenditure next year?	
5 Taxable amount of lobbying and political expenditures (see instructions) 5	
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.	
Part II-B, Line 1, Lobbying Activities:	
GSCM hired the law firm of Alexander & Cleaver for lobbying and	
government relations services	
government relations services.	

SCHEDULE D (Form 990)

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.

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

OMB No. 1545-0047 16 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Girl Scouts of Central Maryland, Inc

Employer identification number 52-0780207

Part	t I Organizations Maintaining Donor Advis	sed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV,		
		(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year	1	
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
	Aggregate value at end of year		
	Did the organization inform all donors and donor advisors i	•	
	are the organization's property, subject to the organization		
	Did the organization inform all grantees, donors, and dono	5 5	,
	for charitable purposes and not for the benefit of the donor		
Part	impermissible private benefit?		
	Complete in the		Part IV, line 7.
1	Purpose(s) of conservation easements held by the organiza		taria di circa artent la cal arra
	X Preservation of land for public use (e.g., recreation o	The servation of a risk in the servation of a certain of	torically important land area
	X Protection of natural habitat X Preservation of open space	Preservation of a cer	tilled historic structure
2		alified concentation contribution in the form	of a concentration assembnt on the last
	Complete lines 2a through 2d if the organization held a quaday of the tax year.	ailled conservation contribution in the form	Held at the End of the Tax Year
	Total program restricted by concentration examinate		
	Total acreage restricted by conservation easements Number of conservation easements on a certified historic s		
	Number of conservation easements on a certified historic s		
	listed in the National Register	,	
	Number of conservation easements modified, transferred,		
	year	released, extinguished, or terminated by the	sorganization during the tax
	Number of states where property subject to conservation e	easement is located 1	
	Does the organization have a written policy regarding the p		
	violations, and enforcement of the conservation easements		\[\tau_{11}\]
	Staff and volunteer hours devoted to monitoring, inspectin		
١	▶ 200	.g,g	
7	Amount of expenses incurred in monitoring, inspecting, ha	andling of violations, and enforcing conserva	ation easements during the vear
	▶ \$ 330,560.	3	3 ,
8	Does each conservation easement reported on line 2(d) ab	pove satisfy the requirements of section 170	(h)(4)(B)(i)
	In Part XIII, describe how the organization reports conserva		
i	include, if applicable, the text of the footnote to the organization	zation's financial statements that describes	the organization's accounting for
	conservation easements.		-
Part	t III Organizations Maintaining Collections	of Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 ((ASC 958), not to report in its revenue stater	nent and balance sheet works of art,
- 1	historical treasures, or other similar assets held for public ϵ	exhibition, education, or research in furthera	nce of public service, provide, in Part XIII,
1	the text of the footnote to its financial statements that described	cribes these items.	
b	If the organization elected, as permitted under SFAS 116 ((ASC 958), to report in its revenue statement	t and balance sheet works of art, historical
1	treasures, or other similar assets held for public exhibition,	, education, or research in furtherance of pu	blic service, provide the following amounts
1	relating to these items:		
((i) Revenue included on Form 990, Part VIII, line 1		> \$
			. .
2	If the organization received or held works of art, historical t	treasures, or other similar assets for financia	
1	the following amounts required to be reported under SFAS	S 116 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		

1,802,574.

251,471.

Schedule D (Form 990) 2016

1,175,190.

3,366,648.

251,471.

627,384.

e Other

c Leasehold improvements

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B). line 10c.) ...

Schedule D (Form 990) 2016 GILL SCOULS	or central Ma	iryrand, inc	32-0760207	Page
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12	<u>)</u>	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost	t or end-of-year market \	/alue
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13	3.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost	t or end-of-year market \	/alue
(1)				
(2)				

(a) Description of investment	(b) Book value	(c) Method of Valuation: Cost of end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Other Assets. Part IX

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description		(b) Book value
<u>(1)</u>		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
	7	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)	Capital Lease Obligation	69,904.	
(3)	Line of Credit	200,000.	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	269,904.	

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sched	ule D (Form 990) 2016 Girl Scouts of Central Mary	land	l, Inc	52-0	0780207 Page
Part	XI Reconciliation of Revenue per Audited Financial Statement	ts Wit	h Revenue per Re	turn.	
	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	9,066,471
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a l	Net unrealized gains (losses) on investments	2a	890,588.		
	Donated services and use of facilities	2b			
	Recoveries of prior year grants	2c			
	Other (Describe in Part XIII.)	2d	1,947,859.		
	Add lines 2a through 2d			2e	2,838,447
3	Subtract line 2e from line 1			3	6,228,024
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a l	nvestment expenses not included on Form 990, Part VIII, line 7b	4a			
b (Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b			4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	6,228,024
Part	XII Reconciliation of Expenses per Audited Financial Statemer	nts W	ith Expenses per F	Returr	۱.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	8,037,232
	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a l	Donated services and use of facilities	2a			
	Prior year adjustments	2b			
	Other losses	2c			
	Other (Describe in Part XIII.)	2d	1,947,859.		
е /	Add lines 2a through 2d			2e	1,947,859
	Subtract line 2e from line 1			3	6,089,373
	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a l	nvestment expenses not included on Form 990, Part VIII, line 7b	4a			
b (Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b			4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	6,089,373
Part	XIII Supplemental Information.				
Provid	e 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 2	d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition	onal inf	ormation.		
Par	t II, line 9:				
<u>The</u>	conservation easement was recorded as other	er r	evenue for t	he y	year ended
Aug	ıst 31, 2011.				
Par'	t X, Line 2:				
<u>GSCI</u>	<u>M is a not-for-profit organization exempt f</u>	rom	Federal inc	ome	taxes
<u>und</u>	er section 501(c) (3) of the Internal Rever	nue	Code and is	reco	ognized as
sucl	n by the Internal Revenue Service.				
<u>The</u>	provisions included in accounting principl	Les	generally ac	cept	ted in the
IInii	ted States of America provide consistent of	בהוו	nce for the	acco	nuntina

for uncertainty in income taxes recognized in an entity's financial

Part XIII | Supplemental Information (continued)

statements and prescribe a threshold of "more likely than not" for recognition of tax positions taken or expected to be taken in a tax return. The GSCM performed an evaluation of uncertain tax positions as of September 30, 2017, and determined that there were no matters that would require recognition in the consolidated financial statements or which may have any effect on its tax-exempt status. As of September 30, 2017, the statute of limitations for fiscal years 2014 through 2017 remains open with the U.S. Federal jurisdiction or the various states and local jurisdictions in which the GSCM's files tax returns.

4806 Seton Drive LLC is a single member LLC wholly owned by GSCM. Accordingly, all activity is reported under GSCM's name, and the LLC assumes the same tax status as GSCM.

Part XI, Line 2d - Other Adjustments:

Cost of Goods Sold	1,921,009.
Direct Fundraising Expenses	26,850.
Total to Schedule D, Part XI, Line 2d	1,947,859.
Part XII, Line 2d - Other Adjustments:	

Direct Fundraising Expenses 26,850. Total to Schedule D, Part XII, Line 2d 1,947,859.

1,921,009.

Cost of Goods Sold

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Employer identification number

Name of the organization

Girl Scouts of Central Maryland, 52-0780207 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events С In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No **b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No

1016	
	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.

52-0780207 Page 2 Schedule G (Form 990 or 990-EZ) 2016 Girl Scouts of Central Maryland, 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 Distinguished None (add col. (a) through Women col. (c)) (event type) (event type) (total number) 189,580. 189,580. 1 Gross receipts 525. 525. 2 Less: Contributions 189,055. 189,055. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses Rent/facility costs 1,349. 1,349. 22,239. 22,239. 7 Food and beverages 8 Entertainment 3,262. 3,262. 9 Other direct expenses 26,850. 10 Direct expense summary. Add lines 4 through 9 in column (d) 162,205. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III 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 (a) Bingo (c) Other gaming Revenue col. (a) through col. (c)) bingo/progressive bingo Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: _

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

b If "Yes," explain:

Sch	edule G (Form 990 or 990 EZ) 2016 GITL Scouts of Central Maryland, Inc 52-0	1780207	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
	An outside facility	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100	/0
14	enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization \$\bigs\\$ and the amount		
	of gaming revenue retained by the third party > \$		
С	If "Yes," enter name and address of the third party:		
	The first finance and addition of the annual party.		
	Name		
	Address >		
16	Gaming manager information:		
10	Garning manager information.		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
47	Manual de La companya		
	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	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	TTIV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, line	nes 9, 9b, 10	b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions		

Schedule G	(Form 990 or 990-EZ) Supplemental Infor	Girl Scouts	of	Central	Maryland,	Inc	52-0780207	Page 4
Part IV	Supplemental Infor	mation (continued)						

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Attach to Form 990.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Employer identification number

Girl Scouts of Central Maryland, Inc						52-0780207	
Part I General Information on Grants a							
Does the organization maintain records criteria used to award the grants or assis							X Yes No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to					anization answered "\	Yes" on Form 990, Part IV	, line 21, for any
recipient that received more than	=					,	•
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
2 Enter total number of section 501(c)(3) a Enter total number of other organization	-	-	ne line 1 table				}

Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance			
Financial Assistance	5962	96,303.	0.					
		,						
Part IV Supplemental Information. Provide the information requ	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.				
Part I, Line 2:								
All recipients are required to subm	mit a rep	ort indica	ting the u	se of the				
funds, what was accomplished and ho	ow the fu	nds benefi	ted the in	dividual.				
Purpose of Financial Assistance:								
GSCM provides financial assistance to girl members to ensure that all								
girls have the opportunity to parti	cipate i	n troops,	attend day	or				
overnight camp, and to go on unique travel experiences called								
destinations. GSCM also provides assistance to girls who need								
Caladria I (Farm 000) (0016)								

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

Girl Scouts of Central Maryland, Inc

Employer identification number 52-0780207

De	rt I Questions Regarding Compensation	020	/	
1.0	ate &desired fregarding compensation		Yes	No
12	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,		163	NO
ia	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
	Discretionary spending account Personal services (such as, maid, chauneur, cher)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	1.0		
_	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
	trustees, and officers, including the OLO/Exceditive birector, regarding the items checked of fine rate			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
	Tom 550 of other organizations			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
-	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2016

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	penents	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) Violet M. Apple	(i)	163,636.	0.	0.	3,000.	8,571.	175,207.	0.
Chief Executive Officer	(ii)	0.	0.	0.	0.	0.		0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
-	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2016	Girl Scouts o	of Central Maryland	, Inc	52-0780207	Page 3
Part III Supplemental Informat					
Provide the information, explanation	on, or descriptions required fo	or Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a	5b, 6a, 6b, 7, and 8,	and for Part II. Also complete this part for any additional info	rmation.

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

16 Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

Girl Scouts of Central Maryland, Inc

Employer identification number 52-0780207

Form 990, Part I, Line 1, Description of Organization Mission: It is the largest leadership development organization for girls and ensures that all girls regardless of background, ethnicity, income or circumstance have the opportunity to develop knowledge and skills that allow them to make a difference in their community, school, and the world.

Form 990, Part III, Line 4a, Program Service Accomplishments: outdoors/ecosystem and its resources.

GSCM offers the core Girl Scout program including earning skill-building badges while also offering a vibrant troop program delivered by nearly 9,000 adult volunteers, who are trained in the Girl Scout Leadership Experience. Girls are guided to complete impactful service-learning projects as well as achieve their Bronze, Silver and Gold Award. The Gold Award is the highest achievement a girl can earn and offers benefits such as access to college scholarships and higher ranking in the military. An integral part of the Girl Scout experience is camp. GSCM offers resident camp at Camp Conowingo (Cecil County), overnight/day camp at Camp Whippoorwill and Camp Woodlands (Anne Arundel County), and day camp at its Program Center (Baltimore) and Camp Ilchester (Howard County), which includes a nature center. In 2017, GSCM offered day camp at its Program Center for 5 weeks girls from Title I schools. GSCM has a robust workforce development program, partnering with the Baltimore City YouthWorks program and

VISTA Americorps.

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GSCM delivers out-of-school-time programs in Baltimore City, and Anne
Arundel, Baltimore and Harford Counties Title I schools, within social
service agencies to special populations and within public libraries and
recreation centers. Programs include reading and financial literacy,
robotics, cybersecurity, environmental stewardship, anti-bullying,
conflict resolution, healthy food choices and physical activity. In
addition, GSCM continues to offer its nationally-recognized Beyond Bars
program, which celebrated its 25th anniversary in 2017 and has served
more than 400 girls since 1992. The program was founded in Maryland
through a partnership with the National Institute for Justice and the
Maryland Correctional Institution for Women, and helps girls maintain a
bond with their incarcerated mothers through Girl Scout activities in
the prison, and programs outside of the prison such as camping and
college tours.

Form 990, Part VI, Section A, line 4:

Yes, the organization amended its bylaws in October 2016. The following are areas of significant change:

- Removal of references to the level of associations. The Council had not used the association structure for many years.
- Reduction of the number of board members from 26 to 22.
- Added requirement that of the nine nominating committee members, at least two but not more than three shall be sitting members of the Board of

Directors.

Schedule O (Form 990 or 990-EZ) (2016) Page 2 Name of the organization **Employer identification number** Girl Scouts of Central Maryland, Inc 52-0780207 - Clarification that notices of meetings may be sent electronically. - Removal of the ability to make nominations from the floor at the Annual Meeting and replacement with a provision for write-in or self-nomination with three business days prior notice to allow for verification of eligibility and inclusion in Annual Meeting materials for the day of the meeting. - Change in the time that officers and directors begin their duties from August 1 to June 1. - Addition of a conflict of interest provision. Although the Board has been using a conflict of interest form for Board members for many years the requirement was not in the bylaws. Form 990, Part VI, Section A, line 6: All members shall be 14 years of age or older and currently registered through the council as members of the Girl Scouts of the United States of America. The members consist of (a) delegates from each association (b) members of the Board of Directors and (c) members of the council nominating committee. Form 990, Part VI, Section A, line 7a: The members of the council as described in line 6 have the right to (1) elect the council officers (with the exception of the Chief Executive Officer), members of the Board of Directors, and members of the nominating

committee and (2) elect national council delegates.

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Form 990, Part VI, Section A, line 7b:

The members of the council as described in line 6 have the right to amend
the "Articles of Amendment and Restatement" to the "Articles of
Consolidation and the Bylaws".

Form 990, Part VI, Section B, line 11b:

The form 990 is reviewed in detail by the audit committee and the CFO and approved by the audit committee. The audit committee chair provides the complete 990 to the Board prior to filing with the IRS.

Form 990, Part VI, Section B, Line 12c:

Board members and staff annually complete and sign a conflict of interest disclosure statement. A conflict of interest is determined to exist when the interests or concerns of any member of the Board of Directors and non-board committee members, Girl Scout staff, or any member of her/his family, or any party, group, or organization in which the individual is actively involved, may be seen as competing with the interests of or violating the ethical integrity of the Girl Scout Council. For board members, any possible potential conflict of interest shall be disclosed in writing to the President/Chair of the council by the individual concerned prior to engaging in conflict of interest action. When any such conflict of interest is relevant to a matter requiring action by the board, the interested person shall call it to the attention of the President/Chair, and such person shall not vote on the matter. Moreover, the person having the conflict shall leave the room in which the meeting is held and not participate in the final deliberations or decision regarding the matter under consideration. The minutes of the meeting shall reflect the conflict

Name of the organization
Girl Scouts of Central Maryland, Inc

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of interest was disclosed and that the interested person was not present during the final discussion or vote and did not vote when there is a doubt. As to whether a conflict of interest exists, the matter shall be resolved by vote of the body, excluding the individual. For employees, any possible potential conflict of interest shall be disclosed in writing to the Chief Executive Officer of the council by the individual concerned prior to engaging in conflict of interest action and shall abide by her/his decision. In the event that a potential conflict of interest is not disclosed, the matter shall be referred to the Chief Executive Officer for determination of continued employment of the individual concerned.

Form 990, Part VI, Section B, Line 15:

Annually, the Chair of the Board asks for several board members to volunteer to be part of a performance evaluation committee for the CEO. Usually three other board members participate along with the Chair. The committee reviews the CEO's performance against her personal performance goals (written) that had been established at the time of the prior year's evaluation and against the performance of the council against its annual plan of work. The CEO provides a written report of her accomplishments. This report is reviewed and discussed by the committee. The committee makes an initial evaluation of performance and drafts a written performance evaluation. The committee then meets with the CEO to further discuss her performance and provide her with the written performance appraisal. Any changes to the appraisal are documented in writing. The committee works with the compensation committee to determine the appropriate compensation increase for the CEO based on her performance, the organization's budget and industry standards. The compensation committee consists of three board members as well as the Chair. The board members may or may not be members

Name of the organization **Employer identification number** Girl Scouts of Central Maryland, Inc 52-0780207 of the performance evaluation committee. The compensation committee reviews information from Girl Scouts of the USA regarding compensation trends in Girl Scout councils nationwide, reports of the pay of other non-profit CEO's in the greater Baltimore area, information on non-profit pay nationwide from Guidestar and other organizations. The committee then discusses this information either in person or via conference call and documents its decision in writing. The compensation for other officers and key employees is determined by the CEO and her management team in accordance with salary guidelines that are reviewed on a periodic (usually every three years) basis by the finance committee of the Board of Directors. These salary guidelines for all staff positions are based on a review of compensation data from Girl Scouts of the USA for councils across the nation, information for salaries at other non-profits in the Baltimore area, and information from salary.com and similar resources for the Baltimore region. Form 990, Part VI, Section C, Line 19: The governing documents, conflict of interest policy, and financial statements are made available to the public upon request for the same period of disclosure as set forth in section 6104(d). Form 990, Part XII, Line 2c: The process has not changed from prior year. Form 990, Part VI, Section A, Line 1 The executive committee is comprised of the officers of the council and two members of the Board of Directors who shall be elected annually at

Name of the organization Girl Scouts of Central Maryland, Inc	Employer identification number 52-0780207
the board meeting following the annual council meeting and	who shall
serve no more than four consecutive one-year terms. The ex	ecutive
committee shall have, and may exercise, the powers of the	board in the
interim between board meetings, except that the executive	committee
shall not have the power to adopt the budget, to take any	action which
is contrary to, or a substantial departure from the direct	ion
established by the board, or which represents a major chan	ge in the
affairs, business, or policy of the council.	
Form 990, Part VI, Lines 10A & 10B	
The foundation of the Girl Scouts is the troops. The major	ity of our
girl members participate through the troop format. The Gir	1 Scouts of
Central Maryland("council") is chartered by the Girl Scout	s of USA and
therefore, must follow the guidelines and polices/procedur	es
established by them in order to maintain that charter. Al	1 aspects of
the council's operations are grounded in these policies/pr	ocedures
including the troop operations.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

• Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

Girl Scouts of Central Maryland, Inc

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

52-0780207

(a)	(b)	(c)	(d)	(e)			(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state o foreign country)	I	I		Direct c	ontrolling	J
4806 Seton Drive LLC								
4806 Seton Drive						Girl Scouts	of Cent	tral
Baltimore, MD 21215	Real Estate	Maryland		72	23,644. Maryland, In		ıc	
	-							
	-							
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization a	answered "Yes" on Form 990	, Part IV, line 34 b	ecause it had one	or more	related tax-exen	npt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	c charity Direct controlling		Section 5 contr	olled
		is sign seaminy		501(c)(3))			Yes	No

		0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	"\' "	D + N / 1' O / 1	9-1-1
D	Identification of Related Organizations Taxable as a Partnership.	Complete if the organization answered	"Yes" on Form 990.	. Part IV. line 34 because	it had one or more related
				,,	
	organizations treated as a partnership during the tax year.				
	organizations trouted as a partitioner up daining the tax year.				

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule	General managii partner	Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		tion b)(13) rolled tity?
		country)						Yes	No

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/			1a						
					1b						
С	Gift, grant, or capital contribution from related organization(s)				1c						
	Loans or loan guarantees to or for related organization(s)				1d						
	Loans or loan guarantees by related organization(s)				1e						
f	Dividends from related organization(s)				1f						
g	Sale of assets to related organization(s)				1g						
h	h Purchase of assets from related organization(s)										
i	Exchange of assets with related organization(s)				1i						
j	Lease of facilities, equipment, or other assets to related organization(s)				1j						
k Lease of facilities, equipment, or other assets from related organization(s)											
I Performance of services or membership or fundraising solicitations for related organization(s)											
m Performance of services or membership or fundraising solicitations by related organization(s)											
	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
o Sharing of paid employees with related organization(s)											
р	p Reimbursement paid to related organization(s) for expenses										
	Reimbursement paid by related organization(s) for expenses				1q						
r	Other transfer of cash or property to related organization(s)				1r						
	Other transfer of cash or property from related organization(s)				1s						
2	If the answer to any of the above is "Yes," see the instructions for information on w	ho must complete th	is line, including covered re	elationships and transaction thresholds.							
	(a) Name of related organization	(b)	(c)	(d)							
	Name of related organization	Transaction	Amount involved	Method of determining amount in	ivolved						
		type (a-s)									
1)											
2)											
3)											
4)											
5)											
6)											
3216	3 09-06-16			Schedule	R (Form	990) 2016					

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?		(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?		Genera manag partne	(k) Percentage ownership
		Country)	Sections 512-514)	Yes No	income	assets	Yes	No	(FORM 1065)	Yes I	lo
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Schedule R	(Form 990) 2016	Girl	Scouts	of	Central	Maryland,	Inc	52-0780207	Page 5
Part VII	(Form 990) 2016 Supplemental Infor	mation.				<u> </u>			
	Provide additional informa		sponses to qu	estion	s on Schedule I	R. See instructions.			