



Girl Scouts Heart of the Hudson, Inc. 30 Scott's Corners Drive Montgomery, NY 12549

Girl Scouts Heart of the Hudson, Inc.:

We have prepared the following tax returns:

2021 Form 990

2021 New York Form CHAR500

A copy of the Organization's tax returns, e-filing authorizations and estimated tax vouchers, if applicable, are being provided to you via our encrypted email system to ensure proper protection of the Organization's information. Please download all enclosures and save them to your computer or print them for future reference. If applicable, your package will include paper copies of tax returns required to be mailed directly by you to a taxing jurisdiction. Please follow the instructions provided for each return.

Please review the tax returns before filing to ensure there are no omissions or misstatements of material facts.

We prepared the tax returns from information you furnished us without verification. Upon examination of the return by tax authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such possible examinations.

PLEASE BE SURE TO PRINT, SIGN AND RETURN THE E-FILING AUTHORIZATION FORMS TO US VIA EMAIL OR FAX UPON RECEIPT TO ENSURE TIMELY PROCESSING.

We sincerely appreciate the opportunity to serve the Organization. Please contact us if you have any questions concerning the tax return.

Sincerely,

Paula Vuksic

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

September 30, 2022

Prepared For:

Girl Scouts Heart of the Hudson, Inc. 30 Scott's Corners Drive Montgomery, NY 12549

Prepared By:

Citrin Cooperman Advisors LLC 290 W. Mt. Pleasant Avenue #3310 Livingston, NJ 07039

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This copy of the return is provided ONLY for Public Disclosure purposes. Any confidential information regarding large donors has been removed.

This return has been prepared for electronic filing. Please sign, date, and return Form 8879-TE to our office via email to efilenj@citrincooperman.com, or fax (973)218-7176. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-TE to us by August 15, 2023.

Form 8879-T	E		IRS	e-file Si for a T	ignature A ax Exempt	uthorization t Entity	ł	ON	/IB No. 1545-0047
		For calendar year 2	2021, or fisc	al year beginning	OCT 1 , 202	21, and ending SEP 3	0 , 20 2 2	(2004
Department of the Treas	0.1171		►	Do not send	to the IRS. Keep f	or your records.			2021
Internal Revenue Servic			► Go t	to www.irs.gov	/Form8879TE for t	the latest information.			
Name of filer							EIN or SSN		
GI	IRL SC	COUTS HEA	ART C	OF THE HI	UDSON, INC	•	13-29	9858	98
Name and title of of	ficer or per	son subject to tax	MAI CF	RGARET P	ORTA				
Part I T	vpe of F	Return and R			1				
-						applicable amount, if an	, from the return	Eorm	9029 CD and
Form 5330 filers r or 10a below, and	may enter d the amo licable, bla	dollars and cent unt on that line t	its. For al for the re	ll other forms, e eturn being filed	enter whole dollars of with this form was	blank, then leave line 1 hen enter -0- on the appl	x on line 1a, 2a, b, 2b, 3b, 4b, 5b	3a, 4a, , 6b, 7t	, 5a, 6a, 7a, 8a, 9a, b, 8b, 9b, or 10b,
1a Form 990	0 check he	ere Þ <u>X</u>				art VIII, column (A), line ⁻			5,699,571.
2a Form 990	0-EZ chec	ck here 🛄 🕨 🗌				Z, line 9)			
3a Form 112	20-POL c	heck here 🕨 🗌	b	Total tax (Form	1120-POL, line 22)			3b _	
4a Form 990	0-PF chec	k here 🛄 🕨 🗌	b	Tax based on i	nvestment income	e (Form 990-PF, Part V, li	ine 5)		
5a Form 886	68 check l	here ►	bl	Balance due (F	orm 8868, line 3c)				
6a Form 990	0-T check	here ►				4)			
		here ►				1)			
		nere ►				(Form 5227, Item D)			
9a Form 533	30 check l	here	b 1	Tax due (Form s	5330, Part II, line 19	9)			
		eck here 🕨 🗌				sted (Form 8038-CP, Pa		10b	
Part II D	eclarati	on and Sign	ature /	Authorizatio	on of Officer or	Person Subject to	Tax		
Under penalties c	of perjury,	I declare that	X I am	an officer of the	e above entity or	I am a person subjec	ct to tax with resp	ect to	(name
						, N)			
financial institutio later than 2 busin payment of taxes	n to debit less days to receive ation num	the entry to this prior to the payr confidential inf	s accoun ment (set formatior	nt. To revoke a p ttlement) date. I n necessary to a	Dayment, I must cor also authorize the answer inquiries and	bayment of the federal ta htact the U.S. Treasury F financial institutions invo d resolve issues related to pplicable, the consent to	Financial Agent at plved in the proce to the payment. I	1-888- ssing o have se	353-4537 no of the electronic elected a
	,	TRIN COO	PERMZ	AN ADVIS	ORS LLC		to enter my F		85898
							to enter my P		er five numbers, but
				ERU II	irm name				not enter all zeros
with a s	state agen	•	ng charitie	es as part of the		cated within this return t ogram, I also authorize th			-
return.	If I have in	dicated within t	this retur	n that a copy of	•	ny PIN as my signature o filed with a state agency nt screen.	•		•
Signature of officer or p	erson subject	t to tax	h a 1	ation			Date		
Part III C	ertificat	tion and Aut	nentica	ation					
ERO's EFIN/PIN number (EFIN) fol	-	•		-		22908153 Do not enter all			
-	turn in ac					ectronically filed return in de-File (MeF) Information			
ERO's signature 🕨	PAUI	LA VUKSI	С			Date 🕨	08/15/23		
		Do Not				See Instructions ess Requested To	Do So		
LHA For Privacy	y act and	Paperwork Red	duction	Act Notice, see	e instructions.			Form	8879-TE (2021)
102521 01-11-22									

GIRL SCOUTS HEART OF THE HUDSON, INC. 30 SCOTT'S CORNERS DRIVE MONTGOMERY, NY 12549

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE CENTER OGDEN, UT 84201-0027

HalalahdhllaanHlladhaadhladhlad

(Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	Name of exempt organization or other filer, see instruct	ctions.	T	axpaye	r identification num	ıber (TIN)
print	GIRL SCOUTS HEART OF THE HU	NGON	TNC		13-29858	98
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, se 30 SCOTT'S CORNERS DRIVE				15 25050	<u> </u>
return. See instructions.	City, town or post office, state, and ZIP code. For a for MONTGOMERY, NY 12549	reign addı	ress, see instructions.			
Enter the	Return Code for the return that this application is for (file	a separat	te application for each return)			0 1
Applicati	on	Return	Application			Return
ls For		Code	Is For			Code
Form 990	or Form 990-EZ	01	Form 1041-A			08
Form 472	0 (individual)	03	Form 4720 (other than individual)			09
Form 990	PF	04	Form 5227			10
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above)	06	Form 8870			12
Form 990	-T (corporation)	07				
	MARGARET PORTA					
 The bool 	poks are in the care of \blacktriangleright 30 SCOTT'S CORN	IERS I	DRIVE - MONTGOMERY,	NY 1	12549	
the ▶│ ▶│	quest an automatic 6-month extension of time until organization named above. The extension is for the orga calendar year or X tax year beginning OCT 1 , 2021 ne tax year entered in line 1 is for less than 12 months, ch Change in accounting period	nization's	return for:	ne exen	npt organization ref	um for
	nis application is for Forms 990-PF, 990-T, 4720, or 6069, v nonrefundable credits. See instructions.	enter the	tentative tax, less	3a	\$	0.
	his application is for Forms 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and	<u> </u>	Ψ	
	imated tax payments made. Include any prior year overpa			3b	\$	0.
	ance due. Subtract line 3b from line 3a. Include your pay				Ψ	
	ng EFTPS (Electronic Federal Tax Payment System). See	•		30	\$	0.
	If you are going to make an electronic funds withdrawal (
LHA F	or Privacy Act and Paperwork Reduction Act Notice, s MAIL TO: DEPARTMENT INTERNAL R OGDEN, UT	' OF 'I EVENU	HE TREASURY JE SERVICE CENTER		Form 8868 (f	Rev. 1-2022)

123841 01-12-22

		PUB	LIC DISCLOSURE COPY - STATE REGISTRATI		
	Ω	00	Return of Organization Exempt From		OMB No. 1545-0047
Forr	n J	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (^{s)} 2021
Dena	rtment	of the Treasury	Do not enter social security numbers on this form as it ma		Open to Public
Interr	al Reve	enue Service	Go to www.irs.gov/Form990 for instructions and the late		Inspection
<u>A</u> F	or th	e 2021 calend	ar year, or tax year beginning $\operatorname{OCT} 1$, 2021 and ending	SEP 30, 2022	
	heck if pplicab	le: C Name of	forganization	D Employer identific	ation number
X	Addre	ge GIRL	SCOUTS HEART OF THE HUDSON, INC.		
	Name Chang	ge Doing b	usiness as	13-298589	8
	Initial	n Number	r and street (or P.O. box if mail is not delivered to street address) Room/su		
	Final		COTT'S CORNERS DRIVE	845-236-6	
	termi ated	City or t	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	9,142,254.
	Amer		GOMERY, NY 12549	H(a) Is this a group ret	
	Appli tion pend	F Name a	nd address of principal officer: MARGARET PORTA	for subordinates?	
		SAME	AS C ABOVE	H(b) Are all subordinates inc	
		empt status:			ist. See instructions
			GIRLSCOUTSHH.ORG	H(c) Group exemption	
KF	orm o	f organization:	X Corporation Trust Association Other ► L Y	ear of formation: 2007 M	State of legal domicile: NY
Pa	art I		CTDI (CO)		
ė	1		be the organization's mission or most significant activities: $\frac{\text{GIRL SCOU}}{10}$		
anc		INC. (G			
Governance	2		x if the organization discontinued its operations or disposed of m	1 1	
Š	3		ting members of the governing body (Part VI, line 1a)		<u> 14</u> 13
	4		dependent voting members of the governing body (Part VI, line 1b)		87
Activities &	5		of individuals employed in calendar year 2021 (Part V, line 2a)		3500
ti	6		of volunteers (estimate if necessary)		<u> </u>
Ac			d business revenue from Part VIII, column (C), line 12		0.
		Net unrelated	business taxable income from Form 990-T, Part I, line 11	· · · · ·	
		Contributions	and grants (Dart VIII, line 1b)	Prior Year 1,766,824.	<u>Current Year</u> 1,004,437.
Ine	8		and grants (Part VIII, line 1h) ce revenue (Part VIII, line 2g)	179,846.	211,094.
Revenue		•	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, and 7d)	134,871.	199,247.
Be			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,941,905.	5,284,793.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,023,446.	6,699,571.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)	6,533.	23,950.
			to or for members (Part IX, column (A), line 4)	0.	0.
6	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)	2,922,867.	2,942,455.
Expenses	16a		undraising fees (Part IX, column (A), line 11e)	0.	0.
per	Ь		ing expenses (Part IX, column (D), line 25) 137,875.		
ы	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	1,987,054.	2,499,981.
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,916,454.	5,466,386.
	19	Revenue less	expenses. Subtract line 18 from line 12	1,106,992.	1,233,185.
Net Assets or Fund Balances				Beginning of Current Year	End of Year
sets	20	Total assets (F	Part X, line 16)	12,150,438.	12,289,670.
t As: d B	21	Total liabilities	; (Part X, line 26)	1,515,036.	958,769.
Plat	22		fund balances. Subtract line 21 from line 20	10,635,402.	11,330,901.
Pa	art II	•			
Und	er pen	alties of perjury,	I declare that I have examined this return, including accompanying schedules and stat	ements, and to the best of my	knowledge and belief, it is
true,	corre	ct, and complete	. Declaration of preparer (other than officer) is based on all information of which prepa	arer has any knowledge.	

Sign	Signature of officer			Date
Here	MARGARET PORTA, CFO			
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN
Paid	PAULA VUKSIC			self-employed P00360739
Preparer	Firm's name 🕒 CITRIN COOPERMAN	ADVISORS LLC		Firm's EIN 🕨 87-2525370
Use Only	Firm's address 🖕 290 W. MT. PLEAS	ANT AVENUE #3310		
	LIVINGSTON, NJ 0	7039		Phone no. 973 - 218 - 0500
May the IF	RS discuss this return with the preparer shown abo	ve? See instructions		X Yes No
132001 12-09	9-21 LHA For Paperwork Reduction Act Notic	e, see the separate instructions.		Form 990 (2021)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

a	t III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III X
1	Briefly describe the organization's mission:
	GSHH'S MISSION IS TO BUILD 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
2	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 2,175,768 · including grants of \$) (Revenue \$
	MEMBERSHIP SERVICES:
	MEMBERSHIP SERVICES INCLUDING VOLUNTEER DEVELOPMENT AND PUBLIC
	RELATIONS
	GIRL SCOUTS HEART OF THE HUDSON SERVES APPROXIMATELY 13,000 GIRLS IN
	GRADES K-12 AND 8,000 ADULTS WHO BELIEVE IN THE POWER OF EVERY G.I.R.L.
	(GO-GETTER, INNOVATOR, RISK-TAXER, LEADER) TO CHANGE THE WORLD.
	OUR EXTRAORDINARY JOURNEY BEGAN MORE THAN 100 YEARS AGO WITH THE
	ORIGINAL G.I.R.L., JULIETTE GORDON "DAISY" LOW. ON MARCH 12, 1912, IN
	SAVANNAH, GEORGIA, SHE ORGANIZED THE VERY FIRST GIRL SCOUT TROOP, AND
4b	(Code:) (Expenses \$ 2,070,017. including grants of \$ 23,950.) (Revenue \$ 211,094.
	GIRL PROGRAM SERVICES - MOVING AT THE SPEED OF GIRLS:
	WE INTRODUCE GIRL SCOUTS OF EVERY AGE TO SCIENCE, TECHNOLOGY,
	ENGINEERING, AND MATH (STEM) TO HELP THEM SEE HOW THEY CAN IMPROVE THE
	WORLD. WHETHER THEY'RE DISCOVERING HOW A CAR'S ENGINE RUNS, LEARNING TO
	MANAGE FINANCES, OR CARING FOR ANIMALS, GIRL SCOUTS WORK HANDS-ON,
	BRINGING STEM TO LIFE.
	WE'D ITVE EVENY OTH TO EVELOPE DIREPENT ACDECTC OF CHEN EVENY VEND
	WE'D LIKE EVERY GIRL TO EXPLORE DIFFERENT ASPECTS OF STEM EVERY YEAR, SO WE'VE DEVELOPED A UNIQUE, "FUN WITH PURPOSE" K-12 CURRICULUM TO
	INSPIRE GIRLS TO EMBRACE AND CELEBRATE SCIENTIFIC DISCOVERY IN THEIR
	LIVES.
4c	(Code:) (Expenses \$142,425. including grants of \$) (Revenue \$)
	PUBLIC INFORMATION:
	PUBLIC INFORMATION SERVICES INCLUDES MEMBERSHIP, COMMUNICATION AND
	MARKETING SERVICES TO THE GIRL SCOUT MEMBERS AND VOLUNTEERS.
44	Other program services (Describe on Schedule O)
-ru	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 4,388,210.
	Form 990 (202 ⁻
	12-09-21 SEE SCHEDULE O FOR CONTINUATION(S)

Form 990 (2					OF	THE	HUDSON,	INC
Part IV	Checklist of F	Required	Schedules	;				

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
5	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i>	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	–		
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete			
	Schedule D, Part III	8		х
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 donor-restricted endowments			-
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			x
4	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	11d	x	
•	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e	X	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D. Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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			v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			х
17	or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i>	16		
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? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
.5	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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		Х
132003	3 12-09-21	Form	990 ((2021)

132003 12-09-21

Form	aan	(2021)
FUIII	330	(2021)

			Yes	No
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	Х	
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		
	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		
	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 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) 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 the Schedule L, Part IV,	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
a		28a		x
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	200		- 23
C		28c		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	- 23
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	- 23	
30		20		x
24	contributions? If "Yes," complete Schedule M	<u>30</u> 31		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
00	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			- v
	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			v
	Part V, line 1	34		X X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 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 on Schedule O for Part VI, lines 11b and 19?			
De	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			\square
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
132004	12-09-21	Form	990	(2021)
	6			

Form	990 (2021) GIRL SCOUTS HEART OF THE HUDSON, INC. 13-2985	898	Р	_{age} 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		_	_
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 87			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		X X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_		v
-	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X X
t	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	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			
0	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	00		
-		9a 9b		
ь 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	30		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
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 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			
	7	-	000	(0004)

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Form	990	(2021)
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GIRL SCOUTS HEART OF THE HUDSON, INC.

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

Section A. Governing Body and Management

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

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a1	Ŀ		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 13	3		
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
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	_	v	
	more members of the governing body?	<u>7a</u>	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	
b = 1 c	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		X
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		
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	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	110		
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
		12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	120	21	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10.	х	
	on Schedule O how this was done	12c	X	
	Did the organization have a written whistleblower policy?	13	A X	
	Did the organization have a written document retention and destruction policy?	14		
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	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		x
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	TUd		
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
		104		
Sar	exempt status with respect to such arrangements?	16b		
	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright NY	I A		- 1 -
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s oniy)	avallal	oie
	for public inspection. Indicate how you made these available. Check all that apply. X Own website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial	
	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			
	MARGARET PORTA - 845-236-6002			
				_
	30 SCOTT'S CORNERS DRIVE, MONTGOMERY, NY 12549			

Form 990 (2021)	GIRL SCOUTS	HEART OF	THE HUDSON,	INC.	13-2985898	Page 7			
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated									
Employees	, and Independent Co	ntractors							
Check if Scheo	dule O contains a response o	r note to any line in	this Part VII						
Section A. Officers, Dire	ectors, Trustees, Key Emplo	yees, and Highest	Compensated Emp	loyees					
1a Complete this table for	all persons required to be lis	ted. Report compe	nsation for the calend	ar year ending with	or within the organization's	s tax year.			
	ation's current officers, direc		ther individuals or org	ganizations), regardl	ess of amount of compens	ation.			
Enter -0- in columns (D), (E)	, and (F) if no compensation	was paid.							
 List all of the organization 	ation's current key employe	es, if any. See the ir	nstructions for definiti	on of "key employe	e."				

• 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	Position do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pei	rson i	s both	ı an	compensation	compensation	amount of
	week		cer ar I	nd a d I	irecto	r/trus I	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	trust		e	bens		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tr	ional		ploye	t com		1099-NEC)		and related organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) MARIE REGER	40.00				Ť	1 0	ш			
CEO-UNTIL 4/2022		х		x				70,756.	0.	370.
(2) HELEN WRONSKI	40.00									
INTERIM CEO		Х		X				0.	Ο.	0.
(3) GALE HAUCK	1.00									
PRESIDENT		Х		Х				0.	0.	0.
(4) CAROL VERGARA	1.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(5) KIM BARNETT	1.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(6) JOLENE BORELL	1.00									
TREASURER		Х		Х				0.	0.	0.
(7) KATIE DOYLE-BUNKER	1.00									
SECRETARY		Х		Х				0.	0.	0.
(8) ANNA MAY WIEDE	1.00									
DIRECTOR		Х						0.	0.	0.
(9) DONNA HALPERIN	1.00									
DIRECTOR		Х						0.	0.	0.
(10) CHRISTINE DRASBA	1.00									
DIRECTOR		Х						0.	0.	0.
(11) DONNA EAGAN	1.00									
DIRECTOR		Х						0.	0.	0.
(12) TAMARA HANLON	1.00									_
DIRECTOR		Х						0.	0.	0.
(13) JERI WESSBERG	1.00									_
DIRECTOR		Х						0.	0.	0.
(14) PATRICIA ALLEN	1.00									_
DIRECTOR		Х						0.	0.	0.
						<u> </u>				
					<u> </u>					
										Form 990 (2021)

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Form 990 (2021)

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Part V	Section A. Officers, Directors, Trus	stees, Key Em	ploy	ees,	and	Hig	ghest	t C	ompensated Employee	s (continued)				
	(A)	(B)			(C				(D)	(E)			(F)	
	Name and title	Average			Posit	tion			Reportable	Reportable		Est	imate	d
		hours per					than or s both :		compensation	compensation			ount o	
		week					r/truste		from	from related		C	other	
		(list any	ctor						the	organizations		comp	pensat	tion
		hours for	Individual trustee or director				eq		organization	(W-2/1099-MISC	C/	fro	om the	9
		related	tee oi	Institutional trustee			ensat		(W-2/1099-MISC/	1099-NEC)		orga	anizati	on
		organizations	trus	nal tr		oyee	dwo		1099-NEC)			and	l relate	ed
		below	vidua	tutio	er	Key employee	loyee	ner				orga	nizatio	ons
		line)	Indiv	Insti	Officer	Key	Highest compensated employee	Former						
											-			
			-											
			-											
											-			
			-											
			_											
											_			
1b Su	ubtotal						🕨		70,756.		0.		37	70.
c To	otal from continuation sheets to Part V	II, Section A					🕨		0.		0.			0.
d To	otal (add lines 1b and 1c)						🗎		70,756.		0.		37	70.
	otal number of individuals (including but r							o re	ceived more than \$100.	000 of reportable				
	ompensation from the organization					,	,		• • • • • • • • • • • • • • • • • • • •					1
0													Yes	No
0 D:	al the annual institute list own formany officer							la : a.			Г			
	d the organization list any former officer						·	0		,	- 1	•		v
	e 1a? If "Yes," complete Schedule J for s											3	_	X
	or any individual listed on line 1a, is the s										- 1			
ar	nd related organizations greater than \$15	0,000? If "Yes,	," со	mple	te S	Sche	dule	J f	or such individual		L	4		Х
5 Di	d any person listed on line 1a receive or	accrue comper	nsati	on fro	om a	any i	unrel	late	ed organization or individ	dual for services	- 1			
re	ndered to the organization? If "Yes," con	nplete Schedul	e J fo	or su	ch p	berso	on					5		Х
	n B. Independent Contractors	•												
1 Co	omplete this table for your five highest co	mpensated inc	depe	nden	t co	ontra	actors	s th	nat received more than \$	100.000 of compe	ensati	on fro	m	
	e organization. Report compensation for													
	(A)	the salendar y		- TGIIII	9			Ť	(B)			(C	<u>،</u>	
	Name and business	address	NO	ONE					Description of s	ervices	Co	ompen		ı
			TAC					-	2000				ounor	
								_						
								T						
								+						
		and and the state							- k					
	otal number of independent contractors (i	•	ot lir	nited	τo t	-		ed	above) who received me	bre than				
\$1	100,000 of compensation from the organi	zation 🕨				0	1						200	
											F	orm S	990 (2	2021)

		2021) GIRL SCOUTS H	EART OF	THE HUDSON	INC.	13-2985	898 Page 9
Pa	rt VII	I Statement of Revenue					
		Check if Schedule O contains a response of	or note to any li	((D)	(0)	
				(A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
				Total revenue		business revenue	from tax under
							sections 512 - 514
nts nts	1 a	Federated campaigns 1a		_			
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b		_			
s, C	С	Fundraising events 1c		4			
Gift Iar	d	Related organizations 1d		_			
ini, (е	Government grants (contributions) 1e	651,620.	<u>.</u>			
tion sr S	f	All other contributions, gifts, grants, and					
ibu		similar amounts not included above 1f	352,817.	-			
d O	g	Noncash contributions included in lines 1a-1f	25,797.				
an Co	h	Total. Add lines 1a-1f	🕨	1,004,437.			
			Business Code				
ė	2 a	GIRL SCOUT PROGRAM FEES	611710	211,094.	211,094.		
e vic	b						
Se	с						
am eve	d						
Program Service Revenue	е						
Pr	f	All other program service revenue					
	g	_ · · · · · · ·		211,094.			
	3	Investment income (including dividends, intere					
		other similar amounts)		134,453.			134,453.
	4	Income from investment of tax-exempt bond p					
	5	Royalties	►				
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a 129,400.					
	b	Less: rental expenses 6b 0.					
	с	Rental income or (loss) 6c 129,400.					
	d	Net rental income or (loss)	►	129,400.	129,400.		
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 135,673.					
	b	Less: cost or other basis					
ne		and sales expenses 7b 70,879.					
venue	с	Gain or (loss)					
		Net gain or (loss)	►	64,794.			64,794.
Other Re	8 a	Gross income from fundraising events (not					
đ		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	с	Net income or (loss) from fundraising events	>				
	9 a	Gross income from gaming activities. See					
		Part IV, line 19 9a					
	b	Less: direct expenses 9b					
	с	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10a	7,392,360.				
	b	Less: cost of goods sold 10b	2,371,804.				
		Net income or (loss) from sales of inventory		5,020,556.	5,020,556.		
			Business Code				
ŝno	11 a	REVENUE SHARE FROM GSUSA	900099	70,839.	70,839.		
ane	b	MISC REVENUE	900099	34,744.	34,744.		
sells: eve	с	GAIN ON INSURANCE CLAIM	900099	29,254.	29,254.		
Miscellaneous Revenue	d	All other revenue					
2		Total. Add lines 11a-11d		134,837.			
	12	Total revenue. See instructions	>	6,699,571.	5,495,887.	0.	199,247.
13200	9 12-09	-21					Form 990 (2021)

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GIRL SCOUTS HEART OF THE HUDSON, INC. Part IX Statement of Functional Expenses

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 respons			· · · · · · · · · · · · · · · · · · ·	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	23,950.	23,950.		
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,	205 915	170 550	07 101	0 1 4 0
~	trustees, and key employees	205,815.	170,552.	27,121.	8,142
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
7	persons described in section 4958(c)(3)(B) Other salaries and wages	2,040,159.	1,690,611.	268,840.	80,708
' 8	Pension plan accruals and contributions (include	2,010,10,100	-,	200,010	00,700
5	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	534,405.	226,049.	280,483.	27,873
0	Payroll taxes	162,076.	137,212.	18,605.	6,259
1	Fees for services (nonemployees):	•	,	,	•
а					
b		1,750.		1,750.	
с	•	42,508.		42,508.	
d					
е					
f	Investment management fees				
g					
	column (A), amount, list line 11g expenses on Sch 0.)	327,234.	268,007.	59,227.	
2	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties	111,758.	111,734.	24.	
16		101,593.	97,989.	3,491.	113
7 8	Travel Payments of travel or entertainment expenses	101,393.		J,491•	113
0	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	31,756.	26,810.	4,796.	150
20	Interest	01,1000	20,0201		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	480,000.	480,000.		
3	Insurance	233,029.	224,954.	8,075.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а		261,502.	259,779.	0.	1,723
b	LEGAL SETTLEMENT	200,000.		200,000.	,
c	SUPPLIES	198,784.	184,960.	13,739.	85
d		186,993.	184,059.	2,934.	0
е	All other expenses	323,074.	301,544.	8,708.	12,822
25	Total functional expenses. Add lines 1 through 24e	5,466,386.	4,388,210.	940,301.	137,875
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

12

09580815 790347 144474

Pledges and grants receivable, net 98,961. 44,367. Accounts receivable, net 4 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 7 370,999. 434,247. 8 Inventories for sale or use 8 27,530. 91,387. 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 18,151,526. basis. Complete Part VI of Schedule D _____ 10a b Less: accumulated depreciation 10b 12,263,530. 6,092,818. 10c 5,887,996. 1,735,818. 1,890,371. 11 11 Investments - publicly traded securities 12 12 Investments - other securities. See Part IV. line 11

				12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,007,293.	15	977,579.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	12,150,438.	16	12,289,670.
	17	Accounts payable and accrued expenses	401,714.	17	598,214.
	18	Grants payable		18	
	19	Deferred revenue	10,917.	19	9,410.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
abi		controlled entity or family member of any of these persons		22	
Ξ.	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	1,102,405.		351,145.
	26	Total liabilities. Add lines 17 through 25	1,515,036.	26	958,769.
		Organizations that follow FASB ASC 958, check here 🕨 🔀			
sec		and complete lines 27, 28, 32, and 33.			
and	27	Net assets without donor restrictions	9,343,668.		10,015,589.
Ba	28	Net assets with donor restrictions	1,291,734.	28	1,315,312.
nd		Organizations that do not follow FASB ASC 958, check here 🕨 📃			
ΓĽ		and complete lines 29 through 33.			
s ol	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net	32	Total net assets or fund balances	10,635,402.	32	11,330,901.
-	33	Total liabilities and net assets/fund balances	12,150,438.	33	12,289,670.
					Form 990 (2021

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

Cash - non-interest-bearing

Savings and temporary cash investments

(B) End of year

781,959.

2,336,317.

(A) Beginning of year

1,648,114.

1,014,352.

1

2 3

1

2

3

Assets

Part X | Balance Sheet

Form	GIRL SCOUTS HEART OF THE HUDSON, INC.	13-	2985898	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	6,699		
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,466	5,38	86.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,233	3,18	85.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	10,635		
5	Net unrealized gains (losses) on investments	5	-537	7,68	86.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	11,330),9(01.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			1
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Aud	it		1
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red aud	it 📔		I
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2021)

SCHEDULE A (Form 990) Department of the Treasury Internal Revenue Service		OMB No. 1545-0047 2021 Open to Public Inspection r identification number				
Name of the organizati	on					identification number
	GIRL SCOUTS HE					3-2985898
Part I Reason	for Public Charity Status.	(All organizations must c	omplete this	s part.) See instruction	ns.	
The organization is not a	a private foundation because it is: (I	For lines 1 through 12, cl	neck only o	ne box.)		
1 A church, co	nvention of churches, or associatio	n of churches described	in section	170(b)(1)(A)(i).		
2 A school des	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990).)			
3 A hospital or	a cooperative hospital service orga	anization described in se	ection 170(I	b)(1)(A)(iii).		
4 A medical res	search organization operated in cor	njunction with a hospital	described in	n section 170(b)(1)(A	(iii). Enter	the hospital's name,
city, and stat						
	on operated for the benefit of a col	llege or university owned	or operated	d by a governmental u	init describe	ed in
	(b)(1)(A)(iv). (Complete Part II.)					
	te, or local government or governm					
-	on that normally receives a substant	ntial part of its support fr	om a gover	nmental unit or from t	he general p	bublic described in
	b)(1)(A)(vi). (Complete Part II.)					
	r trust described in section 170(b)		-			
	al research organization described or a non-land-grant college of agric			•	°,	•
university:	of a non-land-grain college of agric			anie, city, and state o	the college	-OI
· · · ·	on that normally receives (1) more	than 33 1/3% of its supp	ort from co	ntributions members	nin fees and	aross receipts from
0	ted to its exempt functions, subjec				-	•
	Inrelated business taxable income					
	509(a)(2). (Complete Part III.)	(J	,
	on organized and operated exclusi	vely to test for public sat	ety. See se	ection 509(a)(4).		
	on organized and operated exclusi	•	-		arry out the	purposes of one or
-	supported organizations describe	•	-		-	
lines 12a thro	ough 12d that describes the type o	f supporting organizatior	and compl	lete lines 12e, 12f, and	d 12g.	
a 🗌 Type I. A s	upporting organization operated, s	upervised, or controlled	by its suppo	orted organization(s),	ypically by	giving
the suppor	ted organization(s) the power to req	gularly appoint or elect a	majority of	the directors or truste	es of the su	pporting
organizatio	n. You must complete Part IV, Se	ections A and B.				
b 🗌 Type II. A s	supporting organization supervised	or controlled in connect	ion with its	supported organizatio	on(s), by hav	ing
control or r	nanagement of the supporting orga	anization vested in the sa	ame persons	s that control or mana	ige the supp	orted
organizatio	n(s). You must complete Part IV,	Sections A and C.				
c 🔄 Type III fur	nctionally integrated. A supporting	g organization operated	in connectio	on with, and functiona	Illy integrate	d with,
its support	ed organization(s) (see instructions)). You must complete I	Part IV, Sec	tions A, D, and E.		
d 🔄 Type III no	n-functionally integrated. A supp	oorting organization oper	ated in conr	nection with its suppo	rted organiz	ation(s)
	functionally integrated. The organiz		-	-	d an attentiv	reness
	t (see instructions). You must con					
	box if the organization received a v			••••••	II, Type III	
	/ integrated, or Type III non-function	nally integrated supporting	ng organizat	tion.		[]
g Provide the follow (i) Name of supp	ing information about the supporte orted (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the organi	zation listed (v) Amount of	of monetary	(vi) Amount of other
organization		(described on lines 1-10	in your governing Yes	No support (see i	-	support (see instructions)
-		above (see instructions))	163			,

Schedule A (Form 990) 2021 GIRL SCOUTS HEART OF THE HUDSON, INC. 13-2985898 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Se	ction A. Public Support		-	-	_		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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)						
	Public support. Subtract line 5 from line 4. ction B. Total Support						
		(-) 0017	(1-) 0010	(-) 0010	(4) 0000	(-) 0001	(6) Tatal
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
-	Amounts from line 4 Gross income from interest,						
8	,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business						
9	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instructi	ons)			12	
	First 5 years. If the Form 990 is for th	,	,			· · · · ·	
	organization, check this box and stop	0		,	,	()()	
Se	ction C. Computation of Publi						, <u> </u>
	Public support percentage for 2021 (li			column (f))		14	%
15	Public support percentage from 2020	Schedule A, Part	II, line 14			15	%
16 a	33 1/3% support test - 2021. If the c	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				
k	33 1/3% support test - 2020. If the c	organization did no	ot check a box on I	ine 13 or 16a, and	d line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly	supported organiza	ation			
17a	10% -facts-and-circumstances test	- 2021. If the org	anization did not o	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the facts	s-and-circumstand	es test, check this	box and stop he	ere. Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	st. The organization	on qualifies as a pu	blicly supported o	organization		
k	10% -facts-and-circumstances test	- 2020. If the org	ganization did not o	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets th	e facts-and-circur	nstances test, che	ck this box and s	stop here. Explain	in Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	ne organization qua	alifies as a publicly	y supported organi	zation	▶□
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a		
						O - I I - I - A	(Form 990) 2021

Schedule A (Form 990) 2021

132022 01-04-22

GIRL SCOUTS HEART OF THE HUDSON, INC. 13-2985898 Page 3 Schedule A (Form 990) 2021 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	563,810.	542,925.	398,031.	1766824.	1004437.	4276027.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	8121202.	8081655.	6657875.	5776094.	5495887.	34132713.
3	Gross receipts from activities that						
Ū	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
5	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	8685012.	8624580.	7055906.	7542918.	6500324.	38408740.
7a	Amounts included on lines 1, 2, and	25,000.	34,980.	60,476.		25 797	146,253.
h	3 received from disqualified persons Amounts included on lines 2 and 3 received	23,000.	54,900.	00,470.		23,191.	140,233.
	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	25,000.	34,980.	60,476.		25,797.	146,253.
8	Public support. (Subtract line 7c from line 6.)						38262487.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	8685012.	8624580.	7055906.	7542918.	6500324.	38408740.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	394,485.	280,120.	218,303.	215,716.	33,178.	1141802.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b	394,485.	280,120.	218,303.	215,716.	33,178.	1141802.
11	Net income from unrelated business activities not included on line 10b, whether or not the business is	106 546	100 707				207 222
12	regularly carried on Other income. Do not include gain	100,540.	100,787.				207,333.
	or loss from the sale of capital assets (Explain in Part VI.)	101,595.	64,643.	110,385.	129,769.		406,392.
	Total support. (Add lines 9, 10c, 11, and 12.)	9287638.	9070130.	7384594.	7888403.		40164267.
14	First 5 years. If the Form 990 is for the	e organization's fir	st, second, third, f	ourth, or fifth tax y	vear as a section 50	01(c)(3) organizatio	on,
Sec	check this box and stop here	c Support Per		<u></u>			
	Public support percentage for 2021 (I			olumn (f))		15	95.26 %
16	Public support percentage from 2020	Schedule A, Part	III, line 15			16	94.60 %
Sec	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20)21 (line 10c, colun	nn (f), divided by lir	ne 13, column (f))		17	2.84 %
	Investment income percentage from					18	3.23 %
19a	33 1/3% support tests - 2021. If the	-					
	more than 33 1/3%, check this box ar	-	•				
b	33 1/3% support tests - 2020. If the	•					
	line 18 is not more than 33 1/3%, che			-		-	
	Private foundation. If the organizatio	n did not check a l	box on line 14, 19a	a, or 19b, check th	is box and see inst		
13202	23 01-04-22		17			Schedule A	A (Form 990) 2021

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

18

132024 01-04-21

13-2985898 Page 5 GIRL SCOUTS HEART OF THE HUDSON, INC. Schedule A (Form 990) 2021 Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i>		
•	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
2	Did the organization operate for the benefit of any supported organization other than the supported		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		
	supervised, or controlled the supporting organization.	2	
Sec	tion C. Type II Supporting Organizations		

			Yes			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors					
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control					

or management of the supporting organization was vested in the same persons that controlled or managed

	the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations	1 -		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		

supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year	(see instructions).
	C_{1}	

The organization satisfied the Activities Test. Complete line 2 below. а

b		The organization	is the parent of	f each of its support	ed organizations.	Complete line 3 below.
---	--	------------------	------------------	-----------------------	-------------------	------------------------

c 🗋	The organization supported a governmental entity	Describe in Part VI how you supported a governmental entity	/ (see instruction <u>s).</u>
-----	--	---	-------------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

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. 132025 01-04-22

3b Schedule A (Form 990) 2021

2a

2b

3a

Yes No

No

09580815 790347 144474

19

	dule A (Form 990) 2021 GIRL SCOUTS HEART OF TH			13-2985898 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifying		•	
	All other Type III non-functionally integrated supporting organizations must	complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	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 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ly integra	ted Type III supporting	organization (see

Schedule A (Form 990) 2021

132026 01-04-22

instructions).

GIRL	SCOUTS	HEART	\mathbf{OF}	THE	HUDSON,	INC.	
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	Schedule A (Form 990) 2021 GIRL SCOUTS HEART OF THE HUDSON, INC. 13-2985898 Page 7								
Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Secti	on D - Distributions				Current Ye	ar			
_1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1					
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported							
	organizations, in excess of income from activity			2					
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3					
4	Amounts paid to acquire exempt-use assets			4					
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5					
6	Other distributions (describe in Part VI). See instructions.		6						
_7	Total annual distributions. Add lines 1 through 6.			7					
8	Distributions to attentive supported organizations to which the	e organization is responsive							
	(provide details in Part VI). See instructions.			8					
9	Distributable amount for 2021 from Section C, line 6			9					
10	Line 8 amount divided by line 9 amount	[1	10					
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	าร	(iii) Distributab Amount for 2				
1	Distributable amount for 2021 from Section C, line 6								
2	Underdistributions, if any, for years prior to 2021 (reason-								
	able cause required - explain in Part VI). See instructions.								
3	Excess distributions carryover, if any, to 2021								
а	From 2016								
b	From 2017								
с	From 2018								
d	From 2019								
e	From 2020								
f	Total of lines 3a through 3e								
g	Applied to underdistributions of prior years								
h	Applied to 2021 distributable amount								
i	Carryover from 2016 not applied (see instructions)								
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.								
4	Distributions for 2021 from Section D,								
	line 7: \$								
a	Applied to underdistributions of prior years								
b	Applied to 2021 distributable amount								
C	Remainder. Subtract lines 4a and 4b from line 4.								
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h								
	and 4b from line 1. For result greater than zero, explain in								
	Part VI. See instructions.								
7	Excess distributions carryover to 2022. Add lines 3j								
	and 4c.								
8	Breakdown of line 7:								
a	Excess from 2017								
b	Excess from 2018								
C	Excess from 2019								
d	Excess from 2020								
e	Excess from 2021								

Schedule A (Form 990) 2021

132027 01-04-22

Schedule A	(Form 990) 2021	GIRL SCOU	TS HEART	OF THE H	UDSON, IN	NC. 13-29	85898 Page 8
Part VI	Supplemental Info Part IV, Section A, lines line 1; Part IV, Section D Section D, lines 5, 6, and	rmation. Provide th 1, 2, 3b, 3c, 4b, 4c, 5a , lines 2 and 3; Part IV	he explanations a, 6, 9a, 9b, 9c, /, Section E, line	required by Part 11a, 11b, and 11 s 1c, 2a, 2b, 3a, s	II, line 10; Part II, I c; Part IV, Section and 3b; Part V, lin	ine 17a or 17b; Part I B, lines 1 and 2; Part e 1; Part V, Section B	I, line 12; t IV, Section C, , line 1e; Part V,
	(See instructions.)						
132028 01-04-2	22					Schedul	e A (Form 990) 202
				22			. ,

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

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

2021

Employer identification number

C C		-
	GIRL SCOUTS HEART OF THE HUDSON, INC. 13	8-2985898
Organization type (ch	heck one):	
Filers of:	Section:	
Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under
sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one
contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h;
or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \dots b \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2021)

			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$60,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4_		\$ <u>20,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>45,407.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>15,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
123452 11-11	1-21		Schedule B (Form 990) (2021)

GIRL SCOUTS HEART OF THE HUDSON, INC.

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(b)

Name, address, and ZIP + 4

(b)

Name, address, and ZIP + 4

Schedule B (Form 990) (2021)	
Name of organization	

(a)

No.

(a)

No.

2

09580815 790347 144474

1

13-2985898

Person Payroll

Noncash

Person Payroll

Noncash

(Complete Part II for noncash contributions.)

> (d) Type of contribution

(c)

Total contributions

(c)

Total contributions

\$

\$

25,797.

20,000.

Page 2

Employer identification number

(d)

Type of contribution

X

X

X

(a)

No.

123452 11-11-21

GIRL	SCOUTS HEART OF THE HUDSON, INC.	1
Part I	Contributors (see instructions). Use duplicate copies of Part I if add	itional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions
7		
		\$651,620.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions
		\$
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions
		 \$
		*
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions
		 \$
		\
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions
		—

(b)

Name, address, and ZIP + 4

Schedule B	(Form	990)	(2021
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Name of organization

Person Payroll Noncash

Person Payroll Noncash (Complete Part II for noncash contributions.)

Person Payroll Noncash (Complete Part II for noncash contributions.)

Person Payroll Noncash (Complete Part II for noncash contributions.)

Person Payroll Noncash (Complete Part II for noncash contributions.)

(Complete Part II for noncash contributions.)

> (d) Type of contribution

13-2985898

Person Payroll Noncash (Complete Part II for noncash contributions.)

(d)

Type of contribution

Schedule B (Form 990) (2021)

 144474_{1}

(c)

Total contributions

\$

25 2021.06010 GIRL SCOUTS HEART OF THE

Employer identification number

(d) Type of contribution

X

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	SECURITIES		
1			
		\$25,797.	12/22/21
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of noncash property given	(See instructions.)	Date received
		\$	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
		— .	
		\$	
(a)			
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
		\$	
(a)			
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
Faiti			
		—	
		\$	
(a)			
No.	(b)	(c) EMV/ (or ostimato)	(d)
from	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
Part I			
		—	
		\$	

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Schedule B (Form 990) (2021) Name of organization

GIRL SCOUTS HEART OF THE HUDSON, INC.

123453 11-11-21

Schedule B (Form 990) (2021)

09580815 790347 144474

2021.06010 GIRL SCOUTS HEART OF THE 144474_{1}

Page 3

Employer identification number

13-2985898

Schedule E	3 (Form 990) (2021)			Page 4
Name of or	rganization			Employer identification number
GIRL S	SCOUTS HEART OF THE HUD	SON. INC.		13-2985898
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a	tions to organizations described in se	ection 501(c)(7), (8), or (10)	
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or	less for the year. (Enter this info. o	once.) > \$
(a) No.	Use duplicate copies of Part III if additional			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	scription of how gift is held
ļ				
		(e) Transfer of gif	t	
	Transferee's name, address, a	Ind ZIP + 4	Relationship of tr	ansferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held
Part I				
ŀ		(e) Transfer of gif	l	
ŀ	Transferee's name, address, a	Ind ZIP + 4	Relationship of tr	ansferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held
ŀ				
		(e) Transfer of gif	t	
L	Transferee's name, address, a	Ind ZIP + 4	Relationship of tr	ansferor to transferee
(-) N -				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held
F		(e) Transfer of gif	t '	
	T		Deletion dia 11	
ŀ	Transferee's name, address, a	ina ZIP + 4	Relationship of tr	ansferor to transferee
123454 11-11-	-21	I		Schedule B (Form 990) (2021)

09580815 790347 144474

SCHEDULE	D
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9 0)

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.



Department of the Treasury Internal Revenue Service

Name	e of the organization GIRL SCOUTS HEART OF THE HUDSON, INC.	Employer identification number 13-2985898
Par		
1 41	organization answered "Yes" on Form 990, Part IV, line 6.	Complete il the
		b) Funds and other accounts
	Total number at end of year	
	Aggregate value of contributions to (during year)	
	Aggregate value of grants from (during year)	
	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fund	
6	are the organization's property, subject to the organization's exclusive legal control?	
	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used or for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferm	
	impermissible private benefit?	•
Par		
	Purpose(s) of conservation easements held by the organization (check all that apply).	
•		rically important land area
	Preservation of natural habitat	
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a cor	servation essement on the last
2	day of the tax year.	Held at the End of the Tax Year
а		2a
		2a 2b
	I otal acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a)	20 2c
	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure	
d	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organiz	
3		
4	year ▶ Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	Yes No
6	violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation	
6	Stan and volunteer nours devoted to morntoning, inspecting, nandling of violations, and emorcing conservation	reasements during the year
7	Amount of expanses incurred in monitoring, increating, handling of violations, and enforcing concervation and	emente during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation eas	ements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(<i>i</i>)
0	· · · · · · · · · · · · · · · · · · ·	
0	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense stateme	
9		
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements tha	it describes the
Par	organization's accounting for conservation easements. t III Organizations Maintaining Collections of Art, Historical Treasures, or Other Si	imilar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
10	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and bala	nco shoot works
Ia	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtheran	
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
h	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance	shoot works of
b	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance	
	provide the following amounts relating to these items:	of public service,
	(i) Revenue included on Form 990, Part VIII, line 1	▶ \$
2	(II) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, p	
	the following amounts required to be reported under FASB ASC 958 relating to these items:	▶ \$
	Revenue included on Form 990, Part VIII, line 1	► \$
	Assets included in Form 990, Part X	
	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 202
132051	10-28-21 2 8	

28	5					
4	^	~	^	4	^	

	dule D (Form 990) 2021 GIRL SCC	UTS HEART					13-29 • A ssot			age 2
								• (contir	nued)	
3	Using the organization's acquisition, accession	n, and other records	, check any of the	following that	t make si	gnificant i	use of its			
	collection items (check all that apply):	_	<u> </u>							
а	Public exhibition	d		hange progr						
b	Scholarly research	е	Other							
с	Preservation for future generations									
4	Provide a description of the organization's col						se in Part	XIII.		
5	During the year, did the organization solicit or			-	er similar	assets		-		-
Dec	to be sold to raise funds rather than to be mai							Yes		No
Par	t IV Escrow and Custodial Arrang reported an amount on Form 990, Part		te if the organizatio	n answered	"Yes" on	Form 990), Part IV,	line 9, or		
12	Is the organization an agent, trustee, custodia		any for contribution	s or other as	sets not i	included				
Ia	on Form 990, Part X?							Yes		No
h	If "Yes," explain the arrangement in Part XIII a						······ ∟			
D			Swing table.					Amoun	t	
~	Beginning balance					1c		,	-	
	Additions during the year									
u 0	Distributions during the year									
f										
	Ending balance Did the organization include an amount on Fo							Yes		No
	If "Yes," explain the arrangement in Part XIII.					• • • • • • • • •				
Par										
		(a) Current year	(b) Prior year	(c) Two yea		(d) Three	/ears back	(e) Fou	r vears	back
1a	Beginning of year balance	876,989.	560,418.		3,957.	., ,	64,440.			926.
	Contributions	, -	, -		, .		,		,	
	Net investment earnings, gains, and losses	-43,829.	316,571.	11	6,461.	_	20,483.		2	514.
	Grants or scholarships	, -	, -		, .		,		,	
	Other expenditures for facilities									
e										
f										
	Administrative expenses	833,160.	876,989.	56	0,418.	4	43,957.		464	440.
g	End of year balance	,	,		•,110.		10,007.		101,	
2	Provide the estimated percentage of the curre Board designated or quasi-endowment		%	jj nelu as.						
	Permanent endowment \blacktriangleright 49.0000	%	_%							
C		-								
0-	The percentages on lines 2a, 2b, and 2c shou	•	ing the stars had a	:::						
Ja	Are there endowment funds not in the posses	sion of the organizat	ion that are held a	na administe	rea for th	e organiza	ation	1	Yes	No
	by:							0.0	103	X
	(i) Unrelated organizations							3a(i)		X
	(ii) Related organizations							3a(ii)		
	If "Yes" on line 3a(ii), are the related organizati							3b		L
4 Da	Describe in Part XIII the intended uses of the of t VI Land, Buildings, and Equipment		/ment funds.							
1 4	Complete if the organization answered		Part IV line 11a S	See Form 990) Part X	line 10				
	· · ·			t or other	· · ·	ccumulate		(d) Boo		
	Description of property	(a) Cost or ot basis (investm	.,	(other)		preciation		(u) 600	r valu	e
1a	Land	`	,	4,331.				25	4,3	31.
	Buildings			8,336.	9.3	235,7	50.	4,23		
	Leasehold improvements			3,498.		13,4		.,=9	.,.	0.
	Equipment			3,127.	1.	709,6		78	3,4	
	Other			2,234.		304,6			7,5	
	. Add lines 1a through 1e. (Column (d) must eq			-				5,88	-	
1010	in tea inteo na tri ougin ne. (Columni (a) must eq	uai runn 990, Parl X	, columni (p), line i				Cabadula			

Schedule D (Form 990) 2021

Schedu	le D (Form 990) 2021	GIRL	SCOUTS	HEART	OF THE	HUDSON,	INC.	13-2985898	Page 3
Part V	/II Investments -	Other Sec	urities.						
	Complete if the org	ganization ans	wered "Yes"	on Form 990	, Part IV, line	11b. See Form	990, Part X, line 1	2.	
(a) Des	scription of security or cate	gory (including na	ame of security)	(b) Boo	ok value	(c) Method	d of valuation: Cos	st or end-of-year market v	alue
(1) Fina	ncial derivatives								
	sely held equity interests								
(3) Oth									
(A)									
(B)									
(C)									
(D)									
(E)									
(F)									
(G)									
(H)									
	ol. (b) must equal Form 99	0. Part X. col. (I	3) line 12.) 🕨						
Part	/III Investments -	Program F	Related.			1			
	Complete if the org	ganization ans	wered "Yes"	on Form 990	, Part IV, line	11c. See Form	990, Part X, line 1	3.	
	(a) Description of			1	ok value			st or end-of-year market v	alue
(1)								· ·	
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
	ol. (b) must equal Form 99	0 Part X col (I	R) line 13) 🕨						
Part		0, 1 art X, 001. (1							
	Complete if the org	anization ans	wered "Yes"	on Form 990	. Part IV. line	11d. See Form	990. Part X. line 1	5.	
	1			Description	, , , ,		, ,	(b) Book va	alue
(1)	BENEFICIAL I	NTEREST	. ,	•	TRUST				,473.
	PROPERTY HEL				111001				,542.
	EMPLOYEE RET				ABLE				,564.
(4)			UNDEF	ILLOUI V				,	, 50 1 0
(5)									
<u>(6)</u> (7)									
(8)									
(9)									
	Column (b) must equal Fe	orm 000 Part	V col (P) lin	15)				▶ 977	,579.
Part		es.	л, сог. (Б) ште	- 15.)					, 5 / 5 .
	Complete if the org		wered "Yes"	on Form 990	. Part IV. line	11e or 11f. See	Form 990. Part X	. line 25.	
1.		escription of			,,		· - · · · · · · · · · · · · · · · · · ·	(b) Book va	alue
	Federal income taxes		,						
	PROGRAM CRED	TTS PAY	ABLE					351	,145.
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
<u>(9)</u>			V	05.)				251	,145.
	<u>Column (b) must equal Fo</u>	,	, , ,	,					, _ = J •
	pility for uncertain tax po					-		-	X
orga	anization S hability for UN	cenam tax po	shorts under	LAOD AOC I	r 40. OHECK N		the loothote has l	been provided in Part XIII	🕰

Schedule D (Form 990) 2021

132053 10-28-21

Sche	edule D (Form 990) 2021 GIRL SCOUTS HEART OF THE				2985898 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial State	ments With	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	6,161,885.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-537,686.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	-537,686.
3	Subtract line 2e from line 1			3	6,699,571.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
				5	6,699,571.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				
5 Ра	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial State	ements With	Expenses per F		
5 Pa	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line	ements With	Expenses per F		1.
5 Ра 1	rt XII Reconciliation of Expenses per Audited Financial State	ements With 12a.	Expenses per F		
Pa	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line	ements With 12a.	Expenses per F	Returi	1.
Pa 1	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements	ements With	Expenses per F	Returi	1.
Pa 1 2	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ements With 12a. 2a	Expenses per F	Returi	1.
Pa 1 2 a	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2a 2b 2b	Expenses per F	Returi	1.
Pa 1 2 a b	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c	Expenses per F	Returi	n. 5,266,386.
Pa 1 2 a b c d	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c 2d	Expenses per F	Returi	n. <u>5,266,386.</u> 0.
Pa 1 2 a b c d	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per F	1	n. 5,266,386.
Pa 1 2 b c d e	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	Expenses per F	1 2e	n. <u>5,266,386.</u> 0.
Pa 1 2 b c d 3	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	Expenses per F	1 2e	n. <u>5,266,386.</u> 0.
Pa 1 2 6 0 4	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	Expenses per F	1 2e	n. <u>5,266,386.</u> 0.
Pa 1 2 a b c d e 3 4 a	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a 4b	Expenses per F	1 2e	n. <u>5,266,386</u> . 0. <u>5,266,386</u> . 0.
Pa 1 2 a b c d e 3 4 a b c 5	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	Expenses per F	1 2e 3	n. <u>5,266,386.</u> 0.

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

PART V, LINE 4:

<u>GSHH CURRENTLY MAINTAINS VARIOUS DONOR-RESTRICTED ENDOWMENT FUNDS WHOSE</u> <u>PURPOSES ARE TO PROVIDE LONG TERM SUPPORT FOR THE PROGRAMS OF GIRL SCOUTS</u> <u>HEART OF THE HUDSON, INC. THE INCOME FROM THE ENDOWMENT FUNDS CAN BE USED</u> TO SUPPORT GIRL SCOUT PROGRAMS, TRAINING, AND CAPITAL IMPROVEMENT.

PART X, LINE 2:

THE ORGANIZATION IS A NOT-FOR-PROFIT ORGANIZATION AND IS EXEMPT FROM

FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE IRC, AND FROM STATE

INCOME TAXES.

THE	ORGANIZATION	RECOGNIZES	AND	MEASURES	ITS	UNRECOGNIZED	TAX	BENEFITS	IN
132054 10-28-21								Schedule D (Form	n 990) 2021

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Schedule D (Form 990) 2021 GIRL SCOUTS HEART OF THE HUDSON, INC. 13-2985898 Page 5 Part XIII Supplemental Information (continued) ACCORDANCE WITH FASB ASC 740, INCOME TAXES. UNDER THIS GUIDANCE, THE ORGANIZATION ASSESSES THE LIKELIHOOD, BASED ON THEIR TECHNICAL MERIT, THAT TAX POSITIONS WILL BE SUSTAINED UPON EXAMINATION BASED ON THE FACTS, CIRCUMSTANCES, AND INFORMATION AVAILABLE AT THE END OF EACH PERIOD. THE MEASUREMENT OF UNRECOGNIZED TAX BENEFITS IS ADJUSTED WHEN NEW INFORMATION IS AVAILABLE OR WHEN AN EVENT OCCURS THAT REQUIRES A CHANGE.

MANAGEMENT HAS EVALUATED THE ORGANIZATION'S TAX POSITIONS AND HAS

CONCLUDED THAT THE ORGANIZATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT

REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2021

132055 10-28-21

SCHEDULE I (Form 990)	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.										
Department of the Treasury Attach to Form 990. Open to Put Internal Revenue Service Go to www.irs.gov/Form990 for the latest information. Inspection											
Name of the organization GIRL SCOUTS HEART OF THE HUDSON, INC. Employer identification number 13-2985898											
Part I General Information on Grants and Assistance											
criteria used	 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 										
	and Other Assistance to					anization answered "Y	es" on Form 990 Par	t IV line 21 for any			
	nt that received more than \$	•			1 0						
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance			
3 Enter total n	umber of section 501(c)(3) and umber of other organizations	s listed in the line 1	table								

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

GIRL SCOUTS HEART OF THE HUDSON, INC. Schedule I (Form 990) 2021

13-2985898

Page 2

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III 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 TO MEMBERS AND TROOPS	0	10,019.	٥.		
MEMBERSHIPS	0	13,931.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

SCHEDULE I, PART IV

FINANCIAL ASSISTANCE IS AWARDED FOUR WAYS:

1. FUNDING OF GIRL SCOUTS MEMBERSHIP FEE AT \$25 EACH

2. ASSISTANCE WITH THE PURCHASE OF UNIFORM COMPONENTS, EARNED BADGES &

INSIGNIA

3. CAMPERSHIPS WHICH FUND ALL OR PART OF THE FEES FOR A GIRL TO ATTEND

SUMMER CAMP

4. ASSISTANCE WITH THE PAYMENT OF FEES TO ATTEND PROGRAMS

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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



Name of the	e organization
-------------	----------------

GIRL SCOUTS HEART OF THE HUDSON, INC.

Employer identification number
13-2985898

Par	tl	Types of Property								
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of deter noncash contributio	•	ts		
1	Art.	Works of art								
2		Works of art								
2		Historical treasures Fractional interests								
4		ks and publications								
5		hing and household goods								
6		and other vehicles								
7		ts and planes								
8		lectual property								
9		urities - Publicly traded	x	1	25,797.	FMV				
10		urities - Closely held stock								
11	Sec	urities - Partnership, LLC, or								
12										
13		lified conservation contribution -								
14 15		lified conservation contribution - Other								
15 16		estate - Residential								
16 17		estate - Commercial								
17 10		estate - Other								
18 10										
19 20										
20		gs and medical supplies								
21 22		dermy								
23		orical artifacts								
23 24		ntific specimens neological artifacts								
24 25										
26	Othe	· · · · · · · · · · · · · · · · · · ·								
27	Othe									
28	Othe									
29		hber of Forms 8283 received by the organiz	ration during	the tax year for co	ontributions					
20		which the organization completed Form 828	-	•						
	101 1		50, i uit i, b	onee / tertre meag			Yes	No		
30a	Duri	ng the year, did the organization receive by	/ contributio	n any property rep	orted in Part I, lines 1 throug	h 28. that it				
		t hold for at least three years from the date								
		npt purposes for the entire holding period?					Da	X		
b										
31		s the organization have a gift acceptance p	olicy that re	quires the review o	of any nonstandard contribut	ions?	1	X		
		s the organization hire or use third parties of								
				•	, p, c		2a	x		
b	lf "Y	es," describe in Part II.								
33	If the	e organization didn't report an amount in co	olumn (c) for	r a type of property	for which column (a) is cheo	ked,				

describe in Part II.

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

Schedule M (Form 990) 2021

132141 11-17-21

Schedule M	(Form 990) 2021	GIRL	SCOUTS	HEART	OF	THE	HUDS	ON,	INC.	1	3-298	35898	Page 2
Part II	Supplemental is reporting in Par	I Inform	ation. Provi	de the inforr	mation	require	d by Part I	, lines	30b, 32b, a	nd 33, and	whether	the organiza	ition
	this part for any a	t I, columr dditional ir	n (b), the numb nformation.	ber of contril	outions	s, the nu	imber of it	ems re	eceived, or a	a combinatio	on of bot	h. Also com	plete
	. ,												
1201/0 11 17 0	1										Schod	ule M (Form	990) 2021
132142 11-17-2	. 1										Sched		1 3 3 0 J 2 0 2 1

SCHEDULE O

(Form 990)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.

INC.



13-2985898

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

GIRL SCOUTS HEART OF THE HUDSON,

DIRECTORS AND AN EXPERIENCED MANAGEMENT STAFF. GSHH COVERS DUTCHESS,

ORANGE, PUTNAM, ROCKLAND, SULLIVAN, ULSTER, AND WESTCHESTER COUNTIES

SERVING URBAN, SUBURBAN, AND RURAL AREAS.

WITHIN THE 4,767 SQUARE MILE JURISDICTION, GSHH HAS REGIONAL OFFICES IN

NEW CITY, PLEASANTVILLE, MONTGOMERY AND POUGHKEEPSIE. IN ADDITION, GSHH

MAINTAINS NINE GIRL SCOUT HOUSES AND FOUR CAMP PROPERTIES.

WITHIN OUR FOOTPRINT, GSHH SERVES OVER 13,000 GIRLS IN GRADES K THROUGH 12. GIRL SCOUT TROOPS ARE THE PRIMARY METHOD THROUGH WHICH GIRLS PARTICIPATE. GSHH HAS OVER 2,000 TROOPS. IN ADDITION, GSHH SERVES

APPROXIMATELY 1,500 GIRLS IN UNDERSERVED COMMUNITIES.

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

EVERY YEAR SINCE, WE'VE HONORED HER VISION AND LEGACY, BUILDING GIRLS

OF COURAGE, CONFIDENCE, AND CHARACTER WHO MAKE THE WORLD A BETTER

PLACE.

IN 2021, 149 CADETTE GIRL SCOUTS EARNED THEIR SILVER AWARD, THE SECOND HIGHEST AWARD IN GIRL SCOUTING, BY DEDICATING OVER HOURS TO IMPROVE THEIR COMMUNITIES. ADDITIONALLY, 73 SENIOR AND AMBASSADOR GIRL SCOUTS EARNED THEIR GOLD AWARD, THE HIGHEST ACHIEVEMENT IN GIRL SCOUTING; COMBINED THESE OUTSTANDING YOUNG WOMEN WORKED OVER 16,250 HOURS TO MAKE THE WORLD A BETTER PLACE.

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Schedule O (Form 990) 2021 Page 2								
Name of the organization		Employer identification number						
	GIRL	SCOUTS HE	ART OF T	HE HUDSO	N, INC.	13-2985898		
FORM 990, PAR	Γ III,	LINE 4B,	PROGRAM	SERVICE	ACCOMPLISHMEN	TS:		

WE ALSO OFFER EXPERIENCES IN THE AREAS OF THE OUTDOORS, AND

ENTREPRENEURSHIP.

GIRLS WHO ARE UNABLE TO PARTICIPATE DUE TO FINANCIAL OR OTHER

CONSTRAINTS ARE SERVED VIA PROGRAM STAFF OF GSHH.

THEY ALSO CAN RECEIVE FINANCIAL ASSISTANCE WITH TRANSPORTATION, DUES,

UNIFORMS, AND PROGRAM MATERIALS. GIRL SCOUT HOUSES AND/OR PROPERTIES

ARE USED AS LOCATIONS WHENEVER POSSIBLE. GIRL SCOUTS HEART OF THE

HUDSON ALSO DELIVERS PROGRAMMING AT LOCAL SCHOOLS, HOUSES OF WORSHIP,

COMMUNITY CENTERS, AND HOUSING FACILITIES. WE ALSO PARTNER WITH OTHER

YOUTH SERVING AGENCIES ON PROGRAMS THAT PROMOTE LEADERSHIP DEVELOPMENT.

EVERY ATTEMPT IS MADE TO OFFER THESE GIRL SCOUTS A COMPLETE AND WELL-ROUNDED EXPERIENCES. THEREFORE, GIRL SCOUTS HEART OF THE HUDSON COVERS THE COSTS OF THESE PROGRAMS, INCLUDING, BUT NOT LIMITED TO, HIRING STAFF TO WORK WITH THE GIRLS IN THESE SETTINGS, UNIFORM PIECES, AND PROGRAM SUPPLIES.

THE BENEFITS OF GIRL SCOUTING ARE WELL-KNOWN AND WELL-DOCUMENTED. GIRL SCOUTS ARE GROUNDBREAKERS, BIG THINKERS, AND ROLE MODELS. THEY ARE GIRLS OF COURAGE, CONFIDENCE, AND CHARACTER WHO MAKE THE WORLD A BETTER PLACE. THEY FIND THE STRENGTH AND CONFIDENCE TO LEAD THE WAY, EVERY DAY - AND CREATE MEANINGFUL CHANGE IN THEMSELVES AND THEIR COMMUNITIES. OUR PROGRAMMING INTRODUCES GIRLS TO ESSENTIAL CONCEPTS SUCH AS FINANCIAL LITERACY AND PROBLEM SOLVING, PROMOTES SELF-ESTEEM AND GROUP 132212 11-11-21 Schedule O (Form 990) 2021

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TH	HEMSELVES AND OTHERS.
FC	DRM 990, PART VI, SECTION A, LINE 6:
AF	RTICLE II MEMBERSHIP SECTION 2.1 MEMBERSHIP. PERSONS WHO ARE MEMBERS OF
TH	HE GIRL SCOUT MOVEMENT AND ARE REGISTERED WITH THE COUNCIL ARE MEMBERS OF
TH	HE COUNCIL, BUT ONLY MEMBERS 16 YEARS OF AGE AND OLDER ARE ELIGIBLE TO BE
DE	ELEGATES. EMPLOYEES ARE NOT ELIGIBLE TO VOTE. ONLY THE FOLLOWING MEMBERS
SH	HALL BE ENTITLED TO VOTE AT THE ANNUAL MEETING AND SPECIAL MEETINGS OF THE
<u>cc</u>	DUNCIL (REFERRED TO HEREIN AS "DELEGATES"): A. EACH SERVICE UNIT MAY
SE	ELECT NO LESS THAN TWO DELEGATES AND SUCH ADDITIONAL DELEGATES AND
AI	TERNATIVE DELEGATES AS DETERMINED BY THE BOARD BASED UPON THE GIRL
ME	EMBERSHIP OF THE SERVICE UNIT AS OF SEPTEMBER 30 OF EACH YEAR. THE NUMBER
OF	F DELEGATES MAY BE ADJUSTED ANNUALLY TO ASSURE COMPLIANCE WITH SECTION
2.	1E BELOW. DELEGATES SHALL HAVE A TERM OF THREE YEARS AND UNTIL THEIR
SU	JCCESSORS ARE SELECTED. SERVICE UNITS MAY FILL THE UNEXPIRED TERMS OF
DE	ELEGATES WHO RESIGN OR DO NOT PERFORM THEIR DUTIES, OR ARE NO LONGER
ME	EMBERS OF THE GIRL SCOUT MOVEMENT THROUGH THE COUNCIL. B. UP TO FIVE (5)
DE	LEGATES-AT-LARGE SELECTED BY THE BOARD DEVELOPMENT COMMITTEE IF IT IS
DE	TERMINED THAT THERE IS A SEGMENT OF MEMBERSHIP THAT IS SUBSTANTIALLY
UN	REPRESENTED AMONG THE DELEGATES SELECTED BY THE SERVICE UNITS AND WOULD
TH	HEREFORE HAVE NO VOICE IN THE POLICY DECISIONS OF THE COUNCIL WITHOUT SUCH
DE	LEGATE-AT-LARGE REPRESENTATION. C. DIRECTORS OF THE BOARD AND MEMBERS OF
TH	HE BOARD DEVELOPMENT COMMITTEE, ALL OF WHOM SHALL BE EX-OFFICIO DELEGATES
WI	TH THE RIGHT TO VOTE. D. NATIONAL COUNCIL DELEGATES WHO ARE OF VOTING
AG	GE. E. THE TOTAL NUMBER OF DELEGATES SHALL NOT BE LESS THAN TWO (2)
DE	ELEGATES PER SERVICE UNIT. AT LEAST TWO-THIRDS (2/3) OF THE DELEGATES
SH	HALL BE SELECTED BY THE SERVICE 2 UNITS. ALL DELEGATES SHALL SERVE ONLY
	Schedule O (Form 990) 2021 39 0815 790347 144474 2021.06010 GIRL SCOUTS HEART OF THE 14447

GIRL SCOUTS HEART OF THE HUDSON, INC.

COLLABORATION, AND GIVES GIRLS THE TOOLS THEY NEED TO EMPOWER

Schedule O (Form 990) 2021

Name of the organization

Page **2**

Employer identification number

13-2985898

Schedule O (Form 990) 2021	Page 2
Name of the organization GIRL SCOUTS HEART OF THE HUDSON, INC.	Employer identification number 13-2985898
FOR THE TERM TO WHICH THEY HAVE BEEN SELECTED AND ONLY FOR	AS LONG AS THEY
ARE REGISTERED WITH THE GIRL SCOUT MOVEMENT THROUGH THE CO	UNCIL. A RECORD
OF THE NAMES OF THE DELEGATES SHALL BE PREPARED BY THE SEC	RETARY OF THE
COUNCIL, REFERRED TO HEREIN AS THE SECRETARY, NO MORE THAN	FIFTY (50) AND
NO LESS THAN THEN (10) DAYS PRIOR TO THE DATE OF THE ANNUA	L MEETING (HEREIN
"RECORD DATE").	

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

THE VOTING MEMBERS OF THE CORPORATION:

- ELECT THE OFFICERS OF THE COUNCIL, THE MEMBERS-AT-LARGE OF THE BOARD OF DIRECTORS, THE MEMBERS OF THE COUNCIL BOARD DEVELOPMENT COMMITTEE, THE DELEGATES TO THE NATIONAL COUNCIL OF GIRL SCOUTS OF THE UNITED STATES OF AMERICA AND, IF VACANCIES OCCUR, PERSONS TO

FILL VACANCIES AMONG THOSE DELEGATES.

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

THE VOTING MEMBERS OF THE CORPORATION:

- DETERMINE GENERAL LINES OF DIRECTION FOR GIRL SCOUTING WITHIN THE

JURISDICTION OF THE COUNCIL BY RECEIVING AND RESPONDING TO REPORTS AND

INFORMATION FROM THE BOARD OF DIRECTORS.

- AMEND THE ARTICLES OF INCORPORATION AND BYLAWS.

- TAKE ALL OTHER ACTION REQUIRING A MEMBERSHIP VOTE AS DEFINED IN THE

BYLAWS.

- ATTEND AND PARTICIPATE IN DELEGATE MEETINGS.

- REPORT ON DELEGATE DISCUSSION TO THE COMMUNITIES.

- CONDUCT SUCH OTHER BUSINESS AS MAY, FROM TIME TO TIME, COME BEFORE THE 132212 11-11-21 Schedule O (Form 990) 2021 40

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Schedule O (Form 990) 202	21							Page 2
Name of the organization	GIRL	SCOUTS	HEART	OF	THE	HUDSON,	INC.	Employer identification number 13-2985898
								·

MEMBERS.

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

GIRL SCOUTS HEART OF THE HUDSON INC. HAS ITS FORM 990 PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND HAS ESTABLISHED THE FOLLOWING REVIEW PROCESS TO ENSURE THAT THE INFORMATION REPORTED IS COMPLETE AND ACCURATE. AFTER THE FORM 990 HAS BEEN PREPARED, IT IS REVIEWED BY THE CEO, AND AUDIT COMMITTEE. BEFORE THE 990 IS FILED WITH THE INTERNAL REVENUE SERVICE, IT IS SUBMITTED TO THE BOARD MEMBERS FOR COMMENTS AND A SPECIALLY CALLED MEETING IS HELD BY THE BOARD OF DIRECTORS TO REVIEW THE FORM 990. AFTER THE 990 IS APPROVED BY ALL MEMBERS OF THE BOARD OF DIRECTORS, THE 990 IS ELECTRONICALLY FILED.

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

ANNUAL DISCLOSURES ARE MADE BY ALL MEMBERS OF THE EMPLOYEES, BOARD, BOARD STANDING COMMITTEES, AND THE BOARD DEVELOPMENT COMMITTEE OF ANY DIRECT OR INDIRECT BENEFITS THEY OR MEMBERS OF THEIR FAMILY ARE RECEIVING, OR WILL RECEIVE, AS THE RESULT OF AN AGREEMENT BY THE COUNCIL WITH ANY OUTSIDE PARTY.

ANY POTENTIAL CONFLICT OF INTEREST, NO MATTER HOW INSIGNIFICANT, SHALL BE DISCLOSED IN WRITING TO THE BOARD CHAIR BY THE PERSON CONCERNED PRIOR TO ENGAGING IN A 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 BOARD CHAIR OR, WHEN IT ARISES DURING THE COMMITTEE MEETING, TO THE CHAIR OF THE COMMITTEE, AND SUCH PERSON SHALL NOT VOTE ON THE MATTER. MOREOVER, THE PERSON HAVING THE CONFLICT SHALL RETIRE FROM THE ROOM IN WHICH THE 132212 11-11-21 Schedule O (Form 990) 2021 41

09580815 790347 144474

Schedule O (Form 990) 2021	Page 2
Name of the organization GIRL SCOUTS HEART OF THE HUDSON, INC.	Employer identification number 13-2985898
BOARD OR COMMITTEE IS MEETING AND SHALL NOT PARTICIPATE IN	THE FINAL
DELIBERATIONS OR DECISION REGARDING THE MATTER UNDER CONSI	DERATION. THE
MINUTES OF THE MEETING OF THE BOARD OR COMMITTEE SHALL REF	LECT THAT A
CONFLICT OF INTEREST WAS DISCLOSED AND THAT THE INTERESTED	PERSON WAS NOT
PRESENT DURING THE FINAL DISCUSSION OR VOTE AND DID NOT VO	TE. WHEN THERE IS
A DOUBT AS TO WHETHER A CONFLICT OF INTEREST EXISTS. THE M	ATTER SHALL BE
RESOLVED BY VOTE OF THE BOARD OR COMMITTEE, EXCLUDING THE	INTERESTED
PERSON.	

ANY MATTER THAT ARISES INVOLVING A QUESTION OR INTERPRETATION RELATING TO THIS CONFLICT OF INTEREST SHOULD BE SUBMITTED IN WRITING TO THE BOARD CHAIR FOR DECISION OR REFERRAL TO THE BOARD OR ITS EXECUTIVE COMMITTEE FOR DECISION, WHERE APPROPRIATE.

IN THE EVENT THAT A POTENTIAL CONFLICT OF INTEREST IS NOT DISCLOSED, THE MATTER SHALL BE REFERRED TO THE BOARD OR ITS EXECUTIVE COMMITTEE FOR DETERMINATION OF CONTINUED MEMBERSHIP OF THE INDIVIDUAL CONCERNED ON THE BOARD OF DIRECTORS, A BOARD STANDING COMMITTEE, OR THE BOARD DEVELOPMENT COMMITTEE.

AN EMPLOYEE WHO HAS AN ACTUAL OR POTENTIAL CONFLICT MUST DISCLOSE THIS INFORMATION TO THE ORGANIZATION AS SOON AS POSSIBLE SO THAT THE ORGANIZATION CAN PUT SAFEGUARDS IN PLACE TO PROTECT ALL PARTIES.

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

CEO COMPENSATION

COMPENSATION	FOR	THE	CEO	IS	UNDER	THE	RESPONSIBILITY	\mathbf{OF}	\mathbf{THE}	BOARD	OF	

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Schedule O (Form 990) 202	.1	Page 2
Name of the organization	GIRL SCOUTS HEART OF THE HUDSON, INC.	Employer identification number
DIRECTORS (BOD). EACH YEAR, THE BOD ESTABLISHES A CE	O PERFORMANCE
EVALUATION COM	MITTEE. THIS COMMITTEE REVIEWS THE PERI	FORMANCE OF THE CEO,
AND INCLUDES A	REVIEW BY SELECT MANAGEMENT AND/OR LEA	ADERSHIP LEVEL STAFF
WHO REPORT DIF	ECTLY TO THE CEO, AS SELECTED BY THE BO	OD.
ALL SALARY CHA	NGES, BONUS OR INCENTIVE PAY GRANTED TO	O THE CEO ARE AT THE
RECOMMENDATION	I AND APPROVAL OF THE BOD.	
KEY EMPLOYEE A	ND OFFICERS COMPENSATION	
GIRL SCOUTS HE	CART OF THE HUDSON, INC. HAS A CUSTOMIZ	ED SALARY STRUCTURE
THAT WAS DEVEL	OPED IN CONJUNCTION WITH THE GIRL SCOU	TS USA (GSUSA)
COMPENSATION I	EAM. IT IS BASED ON OUR COUNCIL SIZE,	THE COST OF THE LABOR

MARKET (ABOVE NATIONAL AVERAGE FOR THE NORTHEASTERN US) AND STAFFING

STRUCTURES RELEVANT TO GIRL SCOUT COUNCILS.

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

THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS
REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. IT IS POSTED ON
GUIDESTAR.ORG AND OTHER SIMILAR TYPES OF WEBSITES. GSHH ALSO MAKES THEIR
FORM 990 AVAILABLE ON THEIR WEBSITE AND UPON REQUEST. IN ADDITION, THE
FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, ARTICLES OF
INCORPORATION AND BY-LAWS ARE ALSO AVAILABLE UPON WRITTEN REQUEST AT OR BY
CALLING THE ORGANIZATION DIRECTLY.

132212 11-11-21

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

STATE COPY

GIRL SCOUTS HEART OF THE HUDSON, INC. 30 SCOTT'S CORNERS DRIVE MONTGOMERY, NY 12549

> NYS OFFICE OF ATTORNEY GENERAL CHARITIES BUREAU REGISTRATION SECTION 28 LIBERTY STREET NEW YORK, NY 10005

> > FORM CHAR500

126340 04-01-21

TAX RETURN FILING INSTRUCTIONS

NEW YORK FORM CHAR500

FOR THE YEAR ENDING

September 30, 2022

Prepared For:

Girl Scouts Heart of the Hudson, Inc. 30 Scott's Corners Drive Montgomery, NY 12549

Prepared By:

Citrin Cooperman Advisors LLC 290 W. Mt. Pleasant Avenue #3310 Livingston, NJ 07039

Amount of Tax:

Balance due of \$775

Make Check Payable To:

Not applicable

Mail Tax Return To:

The New York Form Form CHAR500 should be filed via the web at: https://charitiesnys.com/annual_filing.html

Return Must Be Mailed On Or Before:

Please mail as soon as possible.

Special Instructions:

CHAR500

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Open to Public Inspection

Fau Fissel Vesu Desimina	on			
For Fiscal Year Beginning	(mm/dd/yyyy) 10/01/	and Ending (mm/dd/yyyy) 09/30/	2022
Check if Applicable: X Address Change	Name of Organization: GIRL SCOUTS HE	ART OF THE HUI	SON, INC.	Employer Identification Number (EIN): 13-2985898
Name Change	Mailing Address: 30 SCOTT'S COR		NY Registration Number: 02-51-44	
Final Filing	City / State / ZIP: MONTGOMERY, NY	12549		Telephone: 914 7473080
Reg ID Pending	Website: WWW.GIRLSCOUTS	HH.ORG		Email: PPORTA@GIRLSCOUTSHH
Check your organization's registration category:	; 7A only EPTL	only X DUAL (7A &		Confirm your Registration Category in the Charities Registry at <u>www.CharitiesNYS.com</u> .
2. Certification				
See instructions for certifities two signatories.	cation requirements. Imprope	r certification is a violation of	of law that may be subject	to penalties. The certification requires
	enalties of perjury that we rev e true, correct and complete i			best of our knowledge and belief, oplicable to this report.
President or Authorized	Officer:			
	Signature		Print Name MARGARET PO	
Chief Financial Officer or			CFO	
	Signature		Print Name	e and Title Date
3. Annual Reporting	Exemption			
	-	organization is claiming an	exemption under one cate	gory (7A or EPTL only filers) or both
categories (DUAL filers) th			nd 3. and submit the certifie	
	at apply to your registration,	complete only parts 1, 2, ar		ed Char500. No fee, schedules, or
additional attachments ar	at apply to your registration,	complete only parts 1, 2, ar		
additional attachments ar schedules and attachmer <u>3a. 7A filir</u> exceed \$2	at apply to your registration, e required. If you cannot clain ts and pay applicable fees. <u>g exemption</u> : Total contributio	complete only parts 1, 2, ar n an exemption or are a DU ons from NY State including	AL filer that claims only one	ed Char500. No fee, schedules, or
additional attachments ar schedules and attachmer <u>3a. 7A filir</u> exceed \$2 contribution <u>3b. EPTL 1</u>	at apply to your registration, e required. If you cannot clain ts and pay applicable fees. <u>g exemption</u> : Total contributio 5,000 <u>and</u> the organization di ns during the fiscal year.	complete only parts 1, 2, ar n an exemption or are a DU ons from NY State including d not engage a professiona	AL filer that claims only one residents, foundations, go I fund raiser (PFR) or fund r	ed Char500. No fee, schedules, or e exemption, you must file applicable overnment agencies, etc. did not
additional attachments ar schedules and attachmer <u>3a. 7A filir</u> exceed \$2 contribution <u>3b. EPTL 1</u>	at apply to your registration, e required. If you cannot clain ts and pay applicable fees. <u>g exemption</u> : Total contributio 5,000 <u>and</u> the organization di ons during the fiscal year. <u>illing exemption:</u> Gross receip fiscal year.	complete only parts 1, 2, ar n an exemption or are a DU ons from NY State including d not engage a professiona	AL filer that claims only one residents, foundations, go I fund raiser (PFR) or fund r	ed Char500. No fee, schedules, or e exemption, you must file applicable overnment agencies, etc. did not raising counsel (FRC) to solicit
additional attachments ar schedules and attachmer <u>3a. 7A filir</u> exceed \$2 contribution <u>3b. EPTL t</u> during the	at apply to your registration, e required. If you cannot clain ts and pay applicable fees. <u>g exemption</u> : Total contributio 5,000 <u>and</u> the organization di ins during the fiscal year. <u>illing exemption:</u> Gross receip fiscal year.	complete only parts 1, 2, ar n an exemption or are a DU ons from NY State including d not engage a professiona ts did not exceed \$25,000 a	AL filer that claims only one presidents, foundations, go I fund raiser (PFR) or fund r and the market value of ass	ed Char500. No fee, schedules, or e exemption, you must file applicable overnment agencies, etc. did not raising counsel (FRC) to solicit
additional attachments ar schedules and attachmer <u>3a. 7A filir</u> exceed \$2 contribution <u>3b. EPTL t</u> during the 4. Schedules and A See the following page	at apply to your registration, e required. If you cannot clain ts and pay applicable fees. <u>g exemption</u> : Total contribution of the organization di the organization di the second the fiscal year. <u>illing exemption</u> : Gross receips fiscal year. <u>ttachments</u> Yes X No 4a. Did y	complete only parts 1, 2, ar n an exemption or are a DU ons from NY State including d not engage a professiona ts did not exceed \$25,000 a	AL filer that claims only one presidents, foundations, go I fund raiser (PFR) or fund r and the market value of ass essional fund raiser, fund r	ed Char500. No fee, schedules, or e exemption, you must file applicable overnment agencies, etc. did not raising counsel (FRC) to solicit sets did not exceed \$25,000 at any time
additional attachments ar schedules and attachment <u>3a. 7A filir</u> exceed \$2 contribution <u>3b. EPTL 1</u> during the 4. Schedules and A See the following page for a checklist of schedules and attachments to	at apply to your registration, e required. If you cannot clain ts and pay applicable fees. <u>g exemption</u> : Total contribution 5,000 <u>and</u> the organization di the organization di the second the fiscal year. <u>illing exemption</u> : Gross receip fiscal year. <u>ttachments</u> Yes X No 4a. Did y for fund	complete only parts 1, 2, ar n an exemption or are a DU ons from NY State including d not engage a professiona ts did not exceed \$25,000 a	AL filer that claims only one presidents, foundations, go I fund raiser (PFR) or fund r and the market value of ass essional fund raiser, fund r	ed Char500. No fee, schedules, or e exemption, you must file applicable overnment agencies, etc. did not raising counsel (FRC) to solicit sets did not exceed \$25,000 at any time
additional attachments ar schedules and attachment <u>3a. 7A filir</u> exceed \$2 contribution <u>3b. EPTL f</u> during the 4. Schedules and A See the following page for a checklist of schedules and attachments to complete your filing.	at apply to your registration, e required. If you cannot clain ts and pay applicable fees. <u>g exemption</u> : Total contributio 5,000 <u>and</u> the organization di ins during the fiscal year. <u>illing exemption</u> : Gross receip fiscal year. Itachments Yes X No 4a. Did y for fund	complete only parts 1, 2, ar n an exemption or are a DU ons from NY State including d not engage a professiona ts did not exceed \$25,000 a	AL filer that claims only one residents, foundations, go fund raiser (PFR) or fund r and the market value of ass essional fund raiser, fund r ? If yes, complete Schedule	ed Char500. No fee, schedules, or e exemption, you must file applicable overnment agencies, etc. did not raising counsel (FRC) to solicit sets did not exceed \$25,000 at any time aising counsel or commercial co-venturer e 4a.
additional attachments ar schedules and attachment <u>3a. 7A filir</u> exceed \$2 contribution <u>3b. EPTL 1</u> during the 4. Schedules and A See the following page for a checklist of schedules and attachments to	at apply to your registration, e required. If you cannot clain ts and pay applicable fees. <u>g exemption</u> : Total contributio 5,000 <u>and</u> the organization di ins during the fiscal year. <u>illing exemption</u> : Gross receip fiscal year. Itachments Yes X No 4a. Did y for fund	complete only parts 1, 2, ar n an exemption or are a DU ons from NY State including d not engage a professiona ts did not exceed \$25,000 a vour organization use a prof raising activity in NY State?	AL filer that claims only one residents, foundations, go fund raiser (PFR) or fund r and the market value of ass essional fund raiser, fund r ? If yes, complete Schedule	ed Char500. No fee, schedules, or e exemption, you must file applicable overnment agencies, etc. did not raising counsel (FRC) to solicit sets did not exceed \$25,000 at any time aising counsel or commercial co-venturer e 4a.
additional attachments ar schedules and attachment <u>3a. 7A filir</u> exceed \$2 contribution <u>3b. EPTL f</u> during the 4. Schedules and A See the following page for a checklist of schedules and attachments to complete your filing.	at apply to your registration, e required. If you cannot clain ts and pay applicable fees. g exemption: Total contribution 5,000 and the organization diates and pay the fiscal year. illing exemption: Gross receip fiscal year. ttachments Yes X No 4a. Did yor fund X Yes No 4b. Did to 7A filing fee:	complete only parts 1, 2, ar n an exemption or are a DU ons from NY State including d not engage a professiona ts did not exceed \$25,000 a vour organization use a prof raising activity in NY State?	AL filer that claims only one residents, foundations, go fund raiser (PFR) or fund r and the market value of ass essional fund raiser, fund r ? If yes, complete Schedule	ed Char500. No fee, schedules, or e exemption, you must file applicable overnment agencies, etc. did not raising counsel (FRC) to solicit sets did not exceed \$25,000 at any time aising counsel or commercial co-venturer e 4a.

CHAR500 Annual Filing for Charitable Organizations (Updated January 2022)

*The "Exempt" category refers to an organization's NYS registration status. It does not refer to its IRS tax designation.

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Page 1

GIRL SCOUTS HEART OF THE HUDSON, INC.

CHAR500 Annual Filing Checklist	Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF: - Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3. - Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3. - Your organization is registered as DUAL and you marked <u>both</u> the 7A and EPTL filing exemption in Part 3.
Checklist of Schedules an	d Attachments
If you answered "yes" in Part	mit with your CHAR500 as described in Part 4: 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV) 4b, submit Schedule 4b: Government Grants
disclosure and will not be ava	PF, and 990-T if applicable chedules, including Schedule B (Schedule of Contributors). Schedule B of public charities is exempt from
 Review Report if you received X Audit Report if you received to If the fiscal year begins before No Review Report or Audit Report 	ubmit the applicable independent Certified Public Accountant's Review or Audit Report: I total revenue and support greater than \$250,000 and up to \$1,000,000 otal revenue and support greater than \$1,000,000 and the fiscal year begins on or after July 1, 2021. That date, an Audit Report is required if total revenue and support is greater than \$750,000 eport is required because total revenue and support is less than \$250,000 lead her 20, no Review Depart or Audit Report is required.

We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required

Calculate Your Fee

For 7A and DUAL filers, calculate the 7A fee:

- \$0, if you checked the 7A exemption in Part 3a
- X \$25, if you did not check the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:

\$0, if you checked the EPTL exemption in Part 3b
\$25, if the NET WORTH is less than \$50,000
\$50, if the NET WORTH is \$50,000 or more but less than \$250,000
\$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000
\$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000
X \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000
1500, if the NET WORTH is \$50,000,000 or more

Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General Charities Bureau Registration Section 28 Liberty Street New York, NY 10005

Need Assistance?

Visit: www.CharitiesNYS.com Call: (212) 416-8401 Email: Charities.Bureau@ag.ny.gov *Is my Registration Category 7A, EPTL, DUAL or EXEMPT?* Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:

7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")

EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.

DUAL filers are registered under both 7A and EPTL.

EXEMPT filers have registered with the NY Charities Bureau and meet conditions in <u>Schedule E - Registration</u> <u>Exemption for Charitable Organizations</u>. These organizations are not required to file annual financial reports but may do so voluntarily.

Confirm your Registration Category and learn more about NY law at <u>www.CharitiesNYS.com.</u>

Where do I find my organization's NET WORTH? NET WORTH for fee purposes is calculated on:

- IRS Form 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

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CHAR500

Open to Public Inspection

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If you checked the box in question 4b in Part 4, complete this schedule and list EACH government grant award by a domestic (federal, state or local) agency; interstate or intergovernmental agency (for example Port Authority of New York and New Jersey); and state or local authorities. **Use additional pages if necessary.** Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations.

1. Organization Information Name of Organization: GIRL SCOUTS HEART OF THE HUDSON, INC. 02-51-44

2. Government Grants

Name of Government Agency	Amount of Grant
1. SMALL BUSINESS ADMINISTRATION	1. 651,620.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.
11.	11.
12.	12.
13.	13.
14.	14.
15.	15.
Total Government Grants:	Total: 651,620.

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		PUB	LIC DISCLOSURE COPY - STATE REGISTRATI		
	Ω	00	Return of Organization Exempt From		OMB No. 1545-0047
Forr	n J	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (^{s)} 2021
Dena	rtment	of the Treasury	Do not enter social security numbers on this form as it ma		Open to Public
Interr	al Reve	enue Service	Go to www.irs.gov/Form990 for instructions and the late		Inspection
<u>A</u> F	or th	e 2021 calend	ar year, or tax year beginning $\operatorname{OCT} 1$, 2021 and ending	SEP 30, 2022	
	heck if pplicab	le: C Name of	forganization	D Employer identific	ation number
X	Addre	ge GIRL	SCOUTS HEART OF THE HUDSON, INC.		
	Name Chang	ge Doing b	usiness as	13-298589	8
	Initial	n Number	r and street (or P.O. box if mail is not delivered to street address) Room/su		
	Final		COTT'S CORNERS DRIVE	845-236-6	
	termi ated	City or t	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	9,142,254.
	Amer		GOMERY, NY 12549	H(a) Is this a group ret	
	Appli tion pend	F Name a	nd address of principal officer: MARGARET PORTA	for subordinates?	
		SAME	AS C ABOVE	H(b) Are all subordinates inc	
		empt status:			ist. See instructions
			GIRLSCOUTSHH.ORG	H(c) Group exemption	
KF	orm o	f organization:	X Corporation Trust Association Other ► L Y	ear of formation: 2007 M	State of legal domicile: NY
Pa	art I		CTDI (CO)		
ė	1		be the organization's mission or most significant activities: $\frac{\text{GIRL SCOU}}{10}$		
anc		INC. (G			
Governance	2		x if the organization discontinued its operations or disposed of m	1 1	
Š	3		ting members of the governing body (Part VI, line 1a)		<u> 14</u> 13
	4		dependent voting members of the governing body (Part VI, line 1b)		87
Activities &	5		of individuals employed in calendar year 2021 (Part V, line 2a)		3500
ti	6		of volunteers (estimate if necessary)		<u> </u>
Ac			d business revenue from Part VIII, column (C), line 12		0.
		Net unrelated	business taxable income from Form 990-T, Part I, line 11	· · · · ·	
		Contributions	and grants (Dart VIII, line 1b)	Prior Year 1,766,824.	<u>Current Year</u> 1,004,437.
Ine	8		and grants (Part VIII, line 1h) ce revenue (Part VIII, line 2g)	179,846.	211,094.
Revenue		•	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, and 7d)	134,871.	199,247.
Be			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,941,905.	5,284,793.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,023,446.	6,699,571.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)	6,533.	23,950.
			to or for members (Part IX, column (A), line 4)	0.	0.
6	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)	2,922,867.	2,942,455.
Expenses	16a		undraising fees (Part IX, column (A), line 11e)	0.	0.
per	Ь		ing expenses (Part IX, column (D), line 25) 137,875.		
ы	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	1,987,054.	2,499,981.
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,916,454.	5,466,386.
	19	Revenue less	expenses. Subtract line 18 from line 12	1,106,992.	1,233,185.
Net Assets or Fund Balances				Beginning of Current Year	End of Year
sets	20	Total assets (F	Part X, line 16)	12,150,438.	12,289,670.
t As: d B	21	Total liabilities	; (Part X, line 26)	1,515,036.	958,769.
Plat	22		fund balances. Subtract line 21 from line 20	10,635,402.	11,330,901.
Pa	art II	•			
Und	er pen	alties of perjury,	I declare that I have examined this return, including accompanying schedules and stat	ements, and to the best of my	knowledge and belief, it is
true,	corre	ct, and complete	. Declaration of preparer (other than officer) is based on all information of which prepa	arer has any knowledge.	

Sign	Signature of officer			Date
Here	MARGARET PORTA, CFO			
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN
Paid	PAULA VUKSIC			self-employed P00360739
Preparer	Firm's name 🕒 CITRIN COOPERMAN	ADVISORS LLC		Firm's EIN 🕨 87-2525370
Use Only	Firm's address 🖕 290 W. MT. PLEAS	ANT AVENUE #3310		
	LIVINGSTON, NJ 0	7039		Phone no. 973 - 218 - 0500
May the IF	RS discuss this return with the preparer shown abo	ve? See instructions		X Yes No
132001 12-09	9-21 LHA For Paperwork Reduction Act Notic	e, see the separate instructions.		Form 990 (2021)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	t III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III X
1	Briefly describe the organization's mission:
	GSHH'S MISSION IS TO BUILD 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?
	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?
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$2, 175, 768. including grants of \$) (Revenue \$)
	MEMBERSHIP SERVICES:
	MEMBERSHIP SERVICES INCLUDING VOLUNTEER DEVELOPMENT AND PUBLIC
	RELATIONS
	GIRL SCOUTS HEART OF THE HUDSON SERVES APPROXIMATELY 13,000 GIRLS IN
	GRADES K-12 AND 8,000 ADULTS WHO BELIEVE IN THE POWER OF EVERY G.I.R.L.
	(GO-GETTER, INNOVATOR, RISK-TAXER, LEADER) TO CHANGE THE WORLD.
	OUR EXTRAORDINARY JOURNEY BEGAN MORE THAN 100 YEARS AGO WITH THE
	ORIGINAL G.I.R.L., JULIETTE GORDON "DAISY" LOW. ON MARCH 12, 1912, IN
	SAVANNAH, GEORGIA, SHE ORGANIZED THE VERY FIRST GIRL SCOUT TROOP, AND
4b	(Code:) (Expenses \$2,070,017. including grants of \$23,950.) (Revenue \$11,094.
	GIRL PROGRAM SERVICES - MOVING AT THE SPEED OF GIRLS:
	WE INTRODUCE CIDI COUTE OF EVERY ACE TO COTENCE TECHNOLOCY
	WE INTRODUCE GIRL SCOUTS OF EVERY AGE TO SCIENCE, TECHNOLOGY, ENGINEERING, AND MATH (STEM) TO HELP THEM SEE HOW THEY CAN IMPROVE THE
	WORLD. WHETHER THEY'RE DISCOVERING HOW A CAR'S ENGINE RUNS, LEARNING TO
	MANAGE FINANCES, OR CARING FOR ANIMALS, GIRL SCOUTS WORK HANDS-ON,
	BRINGING STEM TO LIFE.
	WE'D LIKE EVERY GIRL TO EXPLORE DIFFERENT ASPECTS OF STEM EVERY YEAR,
	SO WE'VE DEVELOPED A UNIQUE, "FUN WITH PURPOSE" K-12 CURRICULUM TO INSPIRE GIRLS TO EMBRACE AND CELEBRATE SCIENTIFIC DISCOVERY IN THEIR
	LIVES.
4c	(Code:) (Expenses \$142,425. including grants of \$) (Revenue \$)
	PUBLIC INFORMATION:
	PUBLIC INFORMATION SERVICES INCLUDES MEMBERSHIP, COMMUNICATION AND
	MARKETING SERVICES TO THE GIRL SCOUT MEMBERS AND VOLUNTEERS.
4d	Other program services (Describe on Schedule O.)
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 4,388,210.
	Form 990 (202
	12-09-21 SEE SCHEDULE O FOR CONTINUATION(S)

Form 990 (2					OF	THE	HUDSON,	INC.
Part IV	Checklist o	of Required	Schedules	;				

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	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			37
	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	_		37
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		х
~	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8		х
0	Schedule D, Part III	°		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		х
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D.			
	Part VI	11a	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		_X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			х
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-		х
40	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10		х
10	1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"	18		- 23
19		19		Х
20-2	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21		х
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			Yes	No
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		<u> </u>
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
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
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		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
L	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	05h		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		<u> </u>
26	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		<u> </u>
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
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
	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			37
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v	
Pa	Note: All Form 990 filers are required to complete Schedule O ttv Statements Regarding Other IRS Filings and Tax Compliance	38	Х	<u> </u>
	Check if Schedule O contains a response or note to any line in this Part V			
	טוופטת זו סטוופטעוב ט כטווגמווז מ ובשטטושב טו זוטגב גט מוזץ ווויב ווז גרווש דמוג ע		 Vc-	
1	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
ia b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1a17Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b0			
с С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
U	(gambling) winnings to prize winners?	1c	х	
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Form	990 (2021) GIRL SCOUTS HEART OF THE HUDSON, INC. 13-2985	898	Р	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 87		v	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
20	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e - <i>file</i> . See instructions. Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? <i>If</i> "No" <i>to line 3b, provide an explanation on Schedule O</i>	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	55		\vdash
Tu	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.		x
-I	to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7e		x
-	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
fg	If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
-	If the organization received a contribution of qualified intellectual property, did the organization meriod of a storage of the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the			
b	organization is licensed to issue qualified health plans			
<u>د</u>	Enter the amount of reserves on hand			
14a		14a		x
	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedule O</i>	14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.	_		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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Form **990** (2021) 2021.06010 GIRL SCOUTS HEART OF THE 144474_1

Form	990	(2021)
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GIRL SCOUTS HEART OF THE HUDSON, INC.

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

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

_		14	_	Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year 1a	14			
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.	13			
b	Enter the number of voting members included on line 1a, above, who are independent 1b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		•		Х
•	officer, director, trustee, or key employee?	·····	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision		•		х
	of officers, directors, trustees, or key employees to a management company or other person?	······ —	3 4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	····· –	-		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5 6	x	<u></u>
6 70	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	·····	0		
7a		.	7a	x	
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or		<i>i</i> a		
b		.	7b	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		10		
a	The governing body?		8a	х	
b	Each committee with authority to act on behalf of the governing body?		8b	x	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	····· 🗗	0.0		
Ŭ	organization's mailing address? If "Yes," provide the names and addresses on 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?	1	l0a		Х
	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?	1	0b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	m? 1	l1a	Х	
b	Describe on 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	1	l2a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?				
		1	2b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	1	12b	X	
С			12b 12c	x x	
с 13	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			x x	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i>	1	12c	x	
13	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i>	1	12c 13	x x	
13 14	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i>	1	12c 13	X X X	
13 14 15 a	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	····· 1	12c 13	X X X X	
13 14 15 a	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	····· 1	12c 13 14	X X X	
13 14 15 a	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	····· 1	12c 13 14 15a	X X X X	
13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	····· 1	12c 13 14 15a	X X X X	
13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	1 1 1	12c 13 14 15a	X X X X	
13 14 15 b 16a	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	1 1 1	12c 13 14 15a 15b	X X X X	
13 14 15 b 16a	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i>	1 1 1	12c 13 14 15a 15b	X X X X	
13 14 15 b 16a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i>	1 1 1	12c 13 14 15a 15b	X X X X	
13 14 15 b 16a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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 <u>exempt status with respect to such arrangements?</u> tion C. Disclosure	1 1 1	12c 13 14 15a 15b	X X X X	x
13 14 15 b 16a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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 <i>exempt status with respect to such arrangements</i> ? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY	1 1 1	12c 13 14 15a 15b	X X X X	
13 14 15 a b 16a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>on Schedule O how this was done</i> Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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 <u>exempt status with respect to such arrangements?</u> tion C. Disclosure	1 1 1	12c 13 14 15a 15b	X X X X	

X Own website X Another's website X Upon request Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20	State the name, address, and telephone number of the person who possesses the organization's books and records	
	MARGARET PORTA - 845-236-6002	
	30 SCOTT'S CORNERS DRIVE, MONTGOMERY, NY 12549	

0	SCOTT '	S	CORNERS	DRIVE,	MONTGOMERY	, NY	12549
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Form 990 (2021)

132006 12-09-21

Form 990 (2021)	GIRL SCOUTS	HEART OF	THE HUDSON,	INC.	13-2985898	Page 7
Part VII Compensa	tion of Officers, Direc	tors, Trustees	, Key Employees,	Highest Compe	nsated	
Employees	, and Independent Co	ontractors				
Check if Scheo	lule O contains a response o	or note to any line	n this Part VII			
Section A. Officers, Dire	ctors, Trustees, Key Empl	oyees, and Highe	st Compensated Emp	loyees		
1a Complete this table for	all persons required to be lis	sted. Report comp	ensation for the calend	ar year ending with o	r within the organization's	s tax year.
	ation's current officers, dire , and (F) if no compensation		nether individuals or org	ganizations), regardles	s of amount of compens	ation.
 List all of the organiz 	ation's current key employe	es, if any. See the	instructions for definiti	on of "key employee.	u	
I ist the organization'	s five current highest compe	nsated employees	(other than an officer.	director, trustee, or ke	ev emplovee) who receive	ed report-

• 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	ition) than d	ne	Reportable	Reportable	Estimated
	hours per	box,	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of
	week			luau	reciu	i/irus	lee)	from	from related	other
	(list any hours for	Individual trustee or director						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or d	tee			sated		(W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	organization
	organizations	truste	al trus		yee	mper		1099-NEC)	1000 NEO	and related
	below	idual 1	Institutional trustee	5	Key employee	Highest compensated employee	er			organizations
	line)	Indiv	Instit	Officer	Keye	High	Former			-
(1) MARIE REGER	40.00									
CEO-UNTIL 4/2022		X		Х				70,756.	Ο.	370.
(2) HELEN WRONSKI	40.00									
INTERIM CEO		X		Х				0.	Ο.	0.
(3) GALE HAUCK	1.00									
PRESIDENT		Х		х				0.	Ο.	0.
(4) CAROL VERGARA	1.00									
VICE PRESIDENT		Х		х				0.	Ο.	0.
(5) KIM BARNETT	1.00									
VICE PRESIDENT		Х		х				0.	Ο.	0.
(6) JOLENE BORELL	1.00									
TREASURER		Х		х				0.	Ο.	0.
(7) KATIE DOYLE-BUNKER	1.00									
SECRETARY		X		Х				0.	Ο.	0.
(8) ANNA MAY WIEDE	1.00									
DIRECTOR		X						0.	Ο.	0.
(9) DONNA HALPERIN	1.00									
DIRECTOR		Х						0.	Ο.	0.
(10) CHRISTINE DRASBA	1.00									
DIRECTOR		Х						0.	0.	0.
(11) DONNA EAGAN	1.00									
DIRECTOR		Х						0.	0.	0.
(12) TAMARA HANLON	1.00									
DIRECTOR		Х						0.	0.	0.
(13) JERI WESSBERG	1.00									
DIRECTOR		Х						0.	0.	0.
(14) PATRICIA ALLEN	1.00									
DIRECTOR		Х						0.	0.	0.

132007 12-09-21

Form 990 (2021)

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Form 990		JTS HEAF	۲ſ	OF	Т	ΗE	H	UD	SON, INC	•	13-29	985	898	Pa	age 8
Part VI	Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated En	nployee	s (continued)				
	(A)	(B)			(0				(D)		(E)			(F)	
	Name and title	Average			Posi	ition			Reportab	le	Reportable		Fs	timate	d
		hours per					than o s both		compensat		compensatio			nount	
		week					r/trust		from		from related			other	
		(list any	ctor						the		organizations	s	com	pensa	tion
		hours for	Individual trustee or director				eg		organizatio	on	(W-2/1099-MIS	SC/	fr	om the	э
		related	tee ol	ustee			ensat		(W-2/1099-M	ISC/	1099-NEC)		org	anizati	ion
		organizations	trus	nal tri		oyee	d mo		1099-NEC	C)			and	d relate	ed
		below	/idua	Institutional trustee	er	Key employee	lest c	ner					orga	nizatio	ons
		line)	Indi	Insti	Officer	Key	Highest compensated employee	Former							
1h Sul	ototal								70 '	756.		0.		3'	70.
	al from continuation sheets to Part VI									0.		0.			0.
							ا		70 7	756.		0.		3.	70.
	al (add lines 1b and 1c)						····· \		· · ·					5	/0•
	al number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) who	o re	eceived more tha	in \$100,	000 of reportable	•			1
cor	npensation from the organization													Vee	1
												ſ		Yes	No
3 Did	the organization list any former officer,	director, trust	ee, k	ey e	mple	oyee	e, or	hig	hest compensat	ed emp	loyee on				
line	1a? If "Yes," complete Schedule J for s	uch individual											3		X
4 For	any individual listed on line 1a, is the su	im of reportabl	e co	mpe	ensat	tion	and	oth	ner compensation	n from tl	he organization				
and	related organizations greater than \$150	0,000? If "Yes,	" со	mple	ete S	Sche	dule	Jf	or such individua	al			4		Х
	any person listed on line 1a receive or a														
ren	dered to the organization? If "Yes." com	nlete Schedule	ə.lf	or su	ich r	oers	on .		-				5		Х
	B. Independent Contractors	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>					<u>v</u>								
1 Co	mplete this table for your five highest co	mpensated inc	lepe	nder	nt co	ontra	actor	s th	nat received more	e than \$	100.000 of comp	pensat	ion fro	m	
	organization. Report compensation for														
	(A)	ine calendar ye		- Tom	<u>g</u>				the organization	(B)			(C	י י	
	Name and business	address	NC	ONE	2				Descript		ervices	С	omper		า
				/111	-				•						
								_							
								-+							
								$ \rightarrow$							
2 Tot	al number of independent contractors (ir	ncludina but no	ot lin	nited	to t	thos	se list	ted	above) who rece	eived mo	ore than				
	00,000 of compensation from the organiz					C			,						
ψι													Form	990 r	2021)
														(4	

		(2021) GIRL SCOUTS H	EART OF	THE HUDSON	, INC.	13-2985	898 Page 9
Pa	rt VII	Statement of Revenue					
		Check if Schedule O contains a response	or note to any li	((B)	(C)	
				(A) Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
s s	1 a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b		1			
Ū, Č	с	Fundraising events		1			
àifts ar A	d	Related organizations 11]			
s, G Mila	е	Government grants (contributions)	651,620.				
rion	f	All other contributions, gifts, grants, and					
ibut		similar amounts not included above 1f	352,817.	-			
ant of	g	Noncash contributions included in lines 1a-1f	25,797.				
<u>ਹ ਸ</u>	h	Total. Add lines 1a-1f		1,004,437.			
	•	CIDI CONTA DOCONNETEC	Business Code 611710		211 094		
/ice	2 a		611/10	211,094.	211,094.		
Serv	b c						
E S	d						
Program Service Revenue	e						
Pro	f	All other program service revenue					
	g	_ · · · · · · · · · · · · · · · · · · ·		211,094.			
	3	Investment income (including dividends, intere	est, and				
		other similar amounts)		134,453.			134,453.
	4	Income from investment of tax-exempt bond p					
	5	Royalties					
	6 -		(ii) Personal	-			
	o a b			-			
	c			-			
		Net rental income or (loss)	<u> </u>	129,400.	129,400.		
		Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 135,673.					
	b	Less: cost or other basis					
venue		and sales expenses		_			
		Gain or (loss)					
Other Re		Net gain or (loss)	····· •	64,794.			64,794.
the	8 a	Gross income from fundraising events (not					
0		including \$ of contributions reported on line 1c). See					
		Part IV, line 18					
	b			1			
	с	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See					
		Part IV, line 19 9a					
	b	Less: direct expenses 9b					
	С	Net income or (loss) from gaming activities	<u></u>				
	то а	Gross sales of inventory, less returns	7,392,360.				
	~	and allowances 10a Less: cost of goods sold 10b		-			
		Net income or (loss) from sales of inventory		5,020,556.	5,020,556.		
			Business Code	, , , .	, , , .		
sno	11 a	REVENUE SHARE FROM GSUSA	900099	70,839.	70,839.		
ane	b		900099	34,744.	34,744.		
Sells	с	GAIN ON INSURANCE CLAIM	900099	29,254.	29,254.		
Miscellaneous Revenue	d	All other revenue					
-	е	Total. Add lines 11a-11d	►	134,837.			
	12	Total revenue. See instructions	►	6,699,571.	5,495,887.	0.	199,247.
13200	9 12-09	-21					Form 990 (2021)

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С

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GIRL SCOUTS HEART OF THE HUDSON, INC. Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses (B) (A) Do not include amounts reported on lines 6b, Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 23,950. 23,950. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 170,552. 205,815. 27,121. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 2,040,159. 1,690,611. 268,840. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 534,405. 226,049. 280,483. Other employee benefits 162,076. 137,212. 18,605. Payroll taxes Fees for services (nonemployees): Management 1,750. 1,750. Legal 42,508. 42,508. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 327,234. 268,007. 59,227. column (A), amount, list line 11g expenses on Sch 0.) Advertising and promotion Office expenses Information technology Royalties

15 24. 111,758. 111,734. 16 Occupancy 97,989. 101,593. 3,491. 113. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials ... 4,796. 31,756. 26,810. 150. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 480,000. 480,000. Depreciation, depletion, and amortization 22 233,029. 224,954. 8,075. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) 261,502. 259,779. 1,723. BLDG MAINTENANCE & REPA 0. а LEGAL SETTLEMENT 200,000. 200,000. h 198,784. 184,960. 13,739. 85. SUPPLIES С 2,934. 186,993. 184,059. UTILITIES 0. d 8,708. 323,074. 301,544. 12,822. All other expenses е 5,466,386. 4,388,210. 940,301. 137,875. Total functional expenses. Add lines 1 through 24e 25 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2021) Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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(D) Fundraising

expenses

8,142.

80,708.

27,873.

6,259.

Form 990 (2021)

Form 990 (2021)

Part X Balance Sheet

GIRL SCOUTS HEART OF THE HUDSON, INC. 13-2985898 Page 11

		Check if Schedule O contains a response or not	e to any	Ine in this Part X				
					(A) Beginning of y	rear		(B) End of year
	1	Cash - non-interest-bearing			1,648,	114.	1	781,959.
	2	Savings and temporary cash investments	1,014,	352.	2	781,959. 2,336,317.		
	3	Pledges and grants receivable, net					3	, , .
	4	Accounts receivable, net			98,	961.	4	44,367.
	5	Loans and other receivables from any current or	former	officer director				,
		trustee, key employee, creator or founder, subst						
		controlled entity or family member of any of thes					5	
	6	Loans and other receivables from other disqualif			-			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)					6	
6	7	Notes and loans receivable, net		F			7	
Assets	8	Inventories for sale or use			370,	999.	8	434,247.
As	9	· · · · · · · ·			370,9	530.	9	434,247. 91,387.
	10a							
		basis. Complete Part VI of Schedule D	10a	18,151,526.				
	b	Less: accumulated depreciation	10b	18,151,526. 12,263,530.	6,092,	818.	10c	5,887,996.
	11	Investments - publicly traded securities			1,890,	371.	11	5,887,996. 1,735,818.
	12	Investments - other securities. See Part IV, line 1					12	
	13	Investments - program-related. See Part IV, line -					13	
	14	Intangible assets					14	
	15	Other assets. See Part IV, line 11			1,007,2	293.	15	977,579.
	16	Total assets. Add lines 1 through 15 (must equa			12,150,4	438.	16	12,289,670.
	17	Accounts payable and accrued expenses	401,	714.	17	598,214.		
	18	Grants payable			18			
	19	Deferred revenue			10,	917.	19	9,410.
	20	Tax-exempt bond liabilities					20	
	21	Escrow or custodial account liability. Complete F	Part IV o	of Schedule D			21	
Se	22	Loans and other payables to any current or form	er office	er, director,				
Liabilities		trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%				
iabi		controlled entity or family member of any of thes	se perso	ons			22	
	23	Secured mortgages and notes payable to unrela	ted thir	d parties			23	
	24	Unsecured notes and loans payable to unrelated		F			24	
	25	Other liabilities (including federal income tax, page	-					
		parties, and other liabilities not included on lines	; 17-24).	Complete Part X	1 1 0 0	405		251 145
		of Schedule D			1,102,4	405.	25	351,145.
	26	Total liabilities. Add lines 17 through 25			1,515,	030.	26	958,769.
ş		Organizations that follow FASB ASC 958, che	ck here					
nce	07	and complete lines 27, 28, 32, and 33.			0 3/3	668	07	10 015 590
alaı	27			····· -	9,343,0	731	27	<u>10,015,589</u> . 1,315,312.
Fund Balances	28			-li h -u - N	1,291,	/ 54.	28	1,515,512.
-un		Organizations that do not follow FASB ASC 9	56, che					
orF	29	and complete lines 29 through 33.					29	
Net Assets or	29 30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or eq					29 30	
Ass	31	Retained earnings, endowment, accumulated inc					31	
let /	32	Total net assets or fund balances		F	10,635,4	402.	32	11,330,901.
Ž	33	Total liabilities and net assets/fund balances	12,150,4		33	12,289,670.		

Form 990 (2021)

Form	GIRL SCOUTS HEART OF THE HUDSON, INC.	13-	2985898	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	6,69		
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,46		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,23	3,1	85.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	10,63	5,4	02.
5	Net unrealized gains (losses) on investments	5	-53	7,6	86.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	11,33	0,9	01.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Aud	it		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audi	t		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	

Form **990** (2021)

SCHEDULE A (Form 990) Department of the Treasury Internal Revenue Service	Complete if the organ 494 ►	rity Status an ization is a section 501 47(a)(1) nonexempt cha Attach to Form 990 or F //Form990 for instructio	(c)(3) orgar ritable trus orm 990-E	nization or a section t. Z.		OMB No. 1545-0047
Name of the organizati	on					identification number
	GIRL SCOUTS HE					3-2985898
Part I Reason	for Public Charity Status.	(All organizations must c	omplete this	s part.) See instruction	ns.	
The organization is not a	a private foundation because it is: (I	For lines 1 through 12, cl	neck only o	ne box.)		
1 A church, co	nvention of churches, or associatio	n of churches described	in section	170(b)(1)(A)(i).		
2 A school des	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990).)			
3 A hospital or	a cooperative hospital service orga	anization described in se	ection 170(I	b)(1)(A)(iii).		
4 A medical res	search organization operated in cor	njunction with a hospital	described in	n section 170(b)(1)(A	(iii). Enter	the hospital's name,
city, and stat						
	on operated for the benefit of a col	llege or university owned	or operated	d by a governmental u	init describe	ed in
	(b)(1)(A)(iv). (Complete Part II.)					
	te, or local government or governm					
-	on that normally receives a substant	ntial part of its support fr	om a gover	nmental unit or from t	he general p	bublic described in
	b)(1)(A)(vi). (Complete Part II.)					
	r trust described in section 170(b)		-			
•	al research organization described or a non-land-grant college of agric			•	•	•
university:	of a non-land-grain college of agric			anie, city, and state o	the college	-OI
· · · ·	on that normally receives (1) more	than 33 1/3% of its supp	ort from co	ntributions members	nin fees and	aross receipts from
0	ted to its exempt functions, subjec				-	•
	Inrelated business taxable income					
	509(a)(2). (Complete Part III.)	(J	,
	on organized and operated exclusi	vely to test for public sat	ety. See se	ection 509(a)(4).		
	on organized and operated exclusi	•	-		arry out the	purposes of one or
-	supported organizations describe	•	-		-	
lines 12a thro	ough 12d that describes the type o	f supporting organizatior	and compl	lete lines 12e, 12f, and	d 12g.	
a 🗌 Type I. A s	upporting organization operated, s	upervised, or controlled	by its suppo	orted organization(s),	ypically by	giving
the suppor	ted organization(s) the power to req	gularly appoint or elect a	majority of	the directors or truste	es of the su	pporting
organizatio	n. You must complete Part IV, Se	ections A and B.				
b 🗌 Type II. A s	supporting organization supervised	or controlled in connect	ion with its	supported organizatio	on(s), by hav	ing
control or r	nanagement of the supporting orga	anization vested in the sa	ame persons	s that control or mana	ige the supp	orted
organizatio	n(s). You must complete Part IV,	Sections A and C.				
c Type III fur	nctionally integrated. A supporting	g organization operated	in connectio	on with, and functiona	Illy integrate	d with,
its support	ed organization(s) (see instructions)). You must complete I	Part IV, Sec	tions A, D, and E.		
d 🔄 Type III no	n-functionally integrated. A supp	oorting organization oper	ated in conr	nection with its suppo	rted organiz	ation(s)
	functionally integrated. The organiz		-	-	d an attentiv	reness
	t (see instructions). You must con					
	box if the organization received a v			••••••	II, Type III	
	/ integrated, or Type III non-function	nally integrated supporting	ng organizat	tion.		[]
g Provide the follow (i) Name of supp	ing information about the supporte orted (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the organi	zation listed (v) Amount of	of monetary	(vi) Amount of other
organization		(described on lines 1-10	in your governing Yes	No support (see i	-	support (see instructions)
-		above (see instructions))	163			,

Schedule A (Form 990) 2021 GIRL SCOUTS HEART OF THE HUDSON, INC. 13-2985898 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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.						
	ction B. Total Support	1			L	•	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	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						
	Gross receipts from related activities,	etc. (see instruction	ons)			12	
	First 5 years. If the Form 990 is for th	i i	,			· · · ·	
	organization, check this box and stop	U U					
See	ction C. Computation of Publi						·
14	Public support percentage for 2021 (I	ine 6, column (f), c	livided by line 11, o	column (f))		14	%
15	Public support percentage from 2020	Schedule A, Part	II, line 14			15	%
	33 1/3% support test - 2021. If the o					ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				
b	33 1/3% support test - 2020. If the o	organization did no	ot check a box on I	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-			
b	10% -facts-and-circumstances test	-		• • • •	-		
_	more, and if the organization meets th	-					
	organization meets the facts-and-circu						
18	Private foundation. If the organization						s ►
			· · ·				(Eorm 990) 2021

Schedule A (Form 990) 2021

132022 01-04-22

Schedule A (Form 990) 2021 GIRL SCOUTS HEART OF THE HUDSON, INC. 13-2985898 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support (b) 2018 (c) 2019 (d) 2020 Calendar year (or fiscal year beginning in) (a) 2017 (e) 2021 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 563,810 542,925. 398,031. 1766824. 1004437. 4276027. include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 5495887.34132713. 8081655. 6657875. 5776094. 8121202. organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6500324.38408740. 8685012. 8624580. 7055906. 7542918. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 34,980. 60,476. 25,797. 146,253. 25,000. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Ο. c Add lines 7a and 7b 25,000. 34,980. 60,476. 25,797. 146 253 38262487 Public support. (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (e) 2021 (a) 2017 (b) 2018 (c) 2019 (d) 2020 (f) Total 9 Amounts from line 6 8685012. 7542918. 6500324.38408740. 8624580. 7055906. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, 280,120. 218,303. 215,716. 33,178. 394,485. 1141802. and income from similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 394,485. 280,120. 218,303. 215,716. 33,178. 1141802. c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b, whether or not the business is 106,546. 100,787. 207,333. regularly carried on 12 Other income. Do not include gain or loss from the sale of capital 129,769. 101,595. 64,643. 110,385. 406,392. assets (Explain in Part VI.) 9287638. 9070130. 7384594. 7888403. 6533502.40164267. 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** Section C. Computation of Public Support Percentage 95.26 % Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15 15 94.60 Public support percentage from 2020 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 2.84 17 17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) % 3.23 18 18 Investment income percentage from 2020 Schedule A, Part III, line 17 % 19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not ► X more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990) 2021 132023 01-04-22

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.	1	
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).	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer		
	lines 3b and 3c below.	3a	
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.	3b	
с	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.	3c	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If		
	"Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a	
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.	4b	
с	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.	4c	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes."	10	
	answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN		
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;		
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action		
	was accomplished (such as by amendment to the organizing document).	5a	
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?	5b	
с	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
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.	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor		
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with		
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?		
	If "Yes," complete Part I of Schedule L (Form 990).	8	
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.	9a	
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which		
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	
с	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit		_
2	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section		_
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated		
	supporting organizations)? If "Yes," answer line 10b below.	10a	

10b Schedule A (Form 990) 2021

09580815 790347 144474

2021.06010 GIRL SCOUTS HEART OF THE 144474_{1}

Yes No

Schedule A (Form 990) 2021 Part IV Supporting Organizations

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

Section A. All Supporting Organizations

13-2985898 Page 5 GIRL SCOUTS HEART OF THE HUDSON, INC. Schedule A (Form 990) 2021 Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i>			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised or controlled the supporting organization	2		

Section C. Type I	I Supporting Organizations	6

1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	
	or management of the supporting organization was vested in the same persons that controlled or managed	
	the supported organization(s)	

Section D.	All Type	III Supporting	g Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the	e Integral Part Test during the year	(see instructions).
•			

The organization satisfied the Activities Test. Complete line 2 below. а

b		The organization	is the parent of	of each of its s	supported organ	nizations. Comple	te line 3 below.
---	--	------------------	------------------	------------------	-----------------	-------------------	------------------

с		The organization	supported a	governmental entity.	Describe in Part V	how y	ou supported a g	governmental entity	, (see instruction <u>s)</u>	
---	--	------------------	-------------	----------------------	--------------------	-------	------------------	---------------------	------------------------------	--

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

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.

Yes No 2a 2b 3a 3b Schedule A (Form 990) 2021

Yes No

1

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_	dule A (Form 990) 2021 GIRL SCOUTS HEART OF THE			13-2985898 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifying		•	n in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	complet	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	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 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	/ integra	ted Type III supporting of	organization (see

Schedule A (Form 990) 2021

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instructions).

GIRL	SCOUTS	HEART	OF	THE	HUDSON,	INC.	
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Par	t V Type III Non-Functionally Integrated 509	9(a)(3) Supporting Orga	anizations _{(contine}	ued)	
Secti	ion D - Distributions		Current Year		
1	Amounts paid to supported organizations to accomplish ex		1		
2	Amounts paid to perform activity that directly furthers exem				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpos	s	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is responsive)		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	-	(i)	(ii)		(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2021	ns	Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
C	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				
	Excess from 2018				
с	Excess from 2019				
	Excess from 2020				
е	Excess from 2021				

Schedule A (Form 990) 2021

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Schedule A (Form 990) 2021

Schedule A	(Form 990) 2021	GTRL	SCOUTS	HEART	ОГ ТНЕ	HUDSON	TNC.	13-2985898	Page 8
Part VI	Supplemental Info Part IV, Section A, lines line 1; Part IV, Section D Section D, lines 5, 6, and (See instructions.)	r mation. 1, 2, 3b, 3c, - , lines 2 and	Provide the e 4b, 4c, 5a, 6, 3; Part IV, Se	xplanations 9a, 9b, 9c, ection E, line	required by F 11a, 11b, and s 1c, 2a, 2b, 3	Part II, line 10; P d 11c; Part IV, S 3a, and 3b; Par	art II, line 17a c ection B, lines t V, line 1; Part	or 17b; Part III, line 12; 1 and 2; Part IV, Section V, Section B, line 1e; Pa	n C, art V,

Schedule A (Form 990) 2021

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Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

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

2021

Employer identification number

C C		-
	GIRL SCOUTS HEART OF THE HUDSON, INC. 13	8-2985898
Organization type (ch	heck one):	
Filers of:	Section:	
Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under
sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one
contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h;
or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \dots b \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2021)

15,000.

(c)

Total contributions

\$

(b)	(c)
Name, address, and ZIP + 4	Total contributions
	\$ <u>20,000.</u>
(b) Name, address, and ZIP + 4	(c) Total contributions
	\$60,000.
(b) Name, address, and ZIP + 4	(c) Total contributions
	\$20,000.
(b) Name, address, and ZIP + 4	(c) Total contributions
	\$ <u>45,407.</u>

GIRL SCOUTS HEART OF THE HUDSON, INC.

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(b)

Name, address, and ZIP + 4

(a)

No.

(a)

No.

(a)

No.

(a) No.

4

(a)

No.

(a)

No.

5

3

2

1

Employer identification number

(d)

Type of contribution

X

X

X

X

X

X

X

13-2985898

Person Payroll

Noncash

Person Payroll Noncash (Complete Part II for noncash contributions.)

Person

Payroll Noncash (Complete Part II for noncash contributions.)

Person

Payroll Noncash (Complete Part II for noncash contributions.)

Person Payroll Noncash (Complete Part II for noncash contributions.)

> Person Payroll

Noncash

(Complete Part II for noncash contributions.)

(Complete Part II for noncash contributions.)

> (d) Type of contribution

> (d) Type of contribution

> > (d)

Type of contribution

(d)

Type of contribution

(d)

Type of contribution

(c)

Total contributions

\$

25,797.

Page 2

Schedule B (Form 990) (2021)

123452 11-11-21

09580815 790347 144474

6

(b)

Name, address, and ZIP + 4

No.	Name, address, and ZIP + 4
7	
(a)	(b)

GIRL SCOUTS HEART OF THE HUDSON, INC. Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(b)

 		\$651,620.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No	Name, address, and ZIP + 4	Total contributions \$	Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
452 11-11-21		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2021) Name of organization

(a)

Employer identification number

(d)

Type of contribution

13-2985898

(c)

Total contributions

09580815 790347 144474

raitii	(see instructions). Use duplicate copies of Part	ii ii additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	SECURITIES	_	
		\$25,797.	12/22/21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Schedule B (Form 990) (2021)

Employer identification number

13-2985898

Schedule B (Form 990) (2021)

GIRL SCOUTS HEART OF THE HUDSON, INC.

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

09580815 790347 144474

123453 11-11-21

Schedule I	B (Form 990) (2021)			Page 4			
Name of o	rganization			Employer identification number			
GIRL	SCOUTS HEART OF THE HUD	SON, INC.		13-2985898			
Part III		ions to organizations described in se	ction 501(c)(7), (8), or (10)				
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or le	ess for the year. (Enter this info. or	nce.) ► \$			
(a) No.	Use duplicate copies of Part III if additional	space is needed.					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held			
		(e) Transfer of gift					
			B 1 11 11 11				
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee			
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held			
		(e) Transfer of gift					
	Transferee's name, address, a	nd 7 IP + 4	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held			
Part I							
		e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee			
(a) No							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held			
		(e) Transfer of gift					
	T		Deletienelde of te				
	Transferee's name, address, a	ווע בוץ + 4	Relationship of tra	ansferor to transferee			
	·						

Schedule B (Form 990) (2021)

SCHEDU	LE D
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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.



No

epartment of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number GIRL SCOUTS HEART OF THE HUDSON, 13-2985898 INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of 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 in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? No Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year. Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990. Part VIII. line 1 ¢

			Ψ.			
	(ii) Assets included in Form 990, Part X		\$			
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pro	ovid	е			
	the following amounts required to be reported under FASB ASC 958 relating to these items:					
а	Revenue included on Form 990, Part VIII, line 1		\$			
b	Assets included in Form 990, Part X		\$			

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Schedule D (Form 990) 2021

Sche Par		JTS HEART				r Sin			8589		_{age} 2
									(contii	nued)	
3	Using the organization's acquisition, accession	and other records	, check any of th	e follow	ing that make s	signific	ant use	of its			
	collection items (check all that apply):		<u> </u>								
а	Public exhibition d Loan or exchange program										
b	Scholarly research e Other										
С	Preservation for future generations										
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.										
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets										-
Dec	to be sold to raise funds rather than to be main						<u></u>		Yes		No
Par	t IV Escrow and Custodial Arrange reported an amount on Form 990, Part >		te if the organiza	tion ans	swered "Yes" or	n Form	990, Pa	art IV, li	ne 9, or		
1a	Is the organization an agent, trustee, custodian	or other intermedia	arv for contributi	ons or o	ther assets not	incluc	ed				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII an										
	, i S		5			Г			Amoun	t	
с	Beginning balance						1c				
	Additions during the year						1d				
	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Forr						•		Yes		No
	If "Yes," explain the arrangement in Part XIII. Cl								_]
Par	t V Endowment Funds. Complete if the	ne organization ans	wered "Yes" on	Form 99	90, Part IV, line						
		a) Current year	(b) Prior year	(c)	Two years back	(d) Ti	nree years	back	(e) Four	r years	back
1a	Beginning of year balance	876,989.	560,41	8.	443,957.		464,	440.		461,	926.
b	Contributions										
	Net investment earnings, gains, and losses	-43,829.	316,57	1.	116,461.		-20,	483.		2,	514.
	Grants or scholarships										
	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
	End of year balance	833,160.	876,98	9.	560,418.		443,	443,957.		464,	440.
2	Provide the estimated percentage of the curren	,	,	-	,	1	,				
		51.0000	%	(4)) 11010							
	Permanent endowment ► 49.0000	%									
	Term endowment > %	/0									
Ŭ	The percentages on lines 2a, 2b, and 2c should	equal 100%									
39	Are there endowment funds not in the possessi	•	ion that are held	and ad	ministered for t	he ora	anizatior	.			
ou	by:	on on the organizat				ne org	anization		1	Yes	No
	(i) Unrelated organizations								3a(i)		X
									3a(ii)		X
h	(ii) Related organizations	ne listed as require	d on Schedule F	 22					3b		
4	Describe in Part XIII the intended uses of the or								00		
Par			ment lunus.								
	Complete if the organization answered "		Part IV, line 11a	. See Fo	orm 990, Part X	, line 1	0.				
	Description of property	(a) Cost or ot		ost or ot			ulated		(d) Boo	k valu	ρ
		basis (investm	• • •	sis (other		eprecia			(4) 200	it valu	0
1a	Land			254,3	331.				25	4,3	31.
	Buildings			68,3		235	,750		4,23		
	Leasehold improvements			13,4			,498				0.
	Equipment		2.4	93,1			,632		78	3,4	-
	Other			22,2			,650			7,5	
	. Add lines 1a through 1e. (Column (d) must equ								5,88	-	
		an onn 330. Fail A	<u>, colamit (D), III (</u>	. 100./ .			····· 🚩	`	<u>,</u>	, - ,	0004

Schedule D (Form 990) 2021

Complete if the organization answerd "Vet" on Form 980, Part X, line 110. See Form 980, Part X, line 12. (a) Biochystal sociality or alloging instantiation answerd instantiation (b) Book value (c) Method of valuation: Cost or end-of-year market value (c) Method of valuation: Cost or end-of-year market value (c) Method of valuation: Cost or end-of-year market value (c) Method of valuation: Cost or end-of-year market value (c) Method of valuation: Cost or end-of-year market value (c) Method of valuation: Cost or end-of-year market value (c) Method of valuation: Cost or end-of-year market value (c) (c) (c) Method of valuation: Cost or end-of-year market value (c) (c) Method of valuation: Cost or end-of-year market value (c) (c) Method o	Schedu Part	VII Investments - Other Securities.	HEART OF THE			13-2985898 Page 3
(1) Francisk derivatives	(a) De	-				
(2) Obsery held equity interests			((-,		
(3) Other (4) (9) (9) (9) (9) (10) (10) (11) (11) (12) (11) (13) Other anal form 990, Part X, col. (13) line 12.) (11) (14) Other analysis form 990, Part X, col. (15) line 12.) (11) (15) (11) (16) (12) (17) (11) (18) (11) (19) (11) (10) (11) (2) (2) (30) (11) (11) (11) (2) (2) (30) (12) (11) (12) (12) (11) (13) (11) (14) (11) (15) (11) (16) (11) (17) (11) (12) (11) (13) (11) (14) (11) (15) (11) (16) (11) (17) (12) (11) PROPERTY	• •					
(A) (A) (B) (A) (C) (A) (B) (A) (A) (B) (B) (B) (A) (B) (B)	• •					
ICD ICD ICD						
(D) (E) (E) (E) (F) (E) (G) ((B)					
(E) (G) (G)	(C)					
(F) (G) (IG) (G)	(D)					
(G) (G) (H) (G) (Part Vill) Investments - Program Related. Complete if the organization answered Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (a) (c) Method of valuation: Cost or end-of-year market value (1) (c) (c) Method of valuation: Cost or end-of-year market value (1) (c) (c) (a) (c) (c) Method of valuation: Cost or end-of-year market value (1) (c) (c) (a) (c) (c) (d) (c) (c) (e) (c) (c) (f) (c) (c) (f) (c) (c) (f) (f) (f) (f) (f) (f) (f) BENEFICIAL INTEREST INTEREST INTEREST 1007, 473. (g) (f) (f) (g) (f) (f) (g) (f) (f) (g) (f) (f) (g) (f						
(h) Total. (Col. (b) must equal Form 980, Part X, col. (b) line 12.) ► Total. (Col. (b) must equal Form 980, Part X, col. (b) line 12.) ► (c) Method of valuation: Cost or end of year market value (a) Description of investment (b) Book value (c) Method of valuation: Cost or end of year market value (d) (e) Method of valuation: Cost or end of year market value (f) (d) (f) (f) (e) (f) (f) (f) (f) (f) (f) (f) (f) (g) (f) (f) <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
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. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (a) (b) Book value (c) Method of valuation: Cost or end-of-year market value (c) (c) Method of valuation: Cost or end-of-year market value (c) (c) Method of valuation: Cost or end-of-year market value (c) (c) Method of valuation: Cost or end-of-year market value (c) (c) Method of valuation: Cost or end-of-year market value (c) (c) (c) Method of valuation: Cost or end-of-year market value (c)						
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. (a) Description of investment (b) Book value (c) Method of valuation. Cost or end-of-year market value (a) (c) Method of valuation. Cost or end-of-year market value (b) (c) Method of valuation. Cost or end-of-year market value (c) (c) (d) (c) (e) (c) (f) (c) (g) Depart X, col. (g) line 13.) (f) Part IX Other Assets. (g) EMPLOYEE RETENTION CREDIT RECEIVABLE (f) (f) (f) (g) (f) (g) (f) (g) (f) (g) (f) (g) (f)		Col. (b) must squal Form 000. Part V. col. (D) line 10.)				
(a) Description of investment (b) Book value (c) Method of valuation: Cost or end of year market value (1) (2) (3) (3) (4) (4) (4) (5) (6) (6) (7) (7) (9) (9) (9) (10) (11) (12) (11) (12) (13) (12) (13) (14) (14) (15) (16) (17) (16) (17) (18) (19) (11) (19) (11) (11) (10) (12) (12) (11) (12) (12) (12) (12) PROFERTY HELD FOR SALE – NET (10) (10) (12) PROFERTY HELD FOR SALE – NET (10) (10) (16) (10) (10) (10) (10) (10) (11) (12) (12) (13) (14) (12) PROFERTY HELD FOR SALE – NET (10) (10) (10) (16) (16) (16) (16) (16)		VIII Investments - Program Related.	on Form 990, Part IV, line	1 11c. See Form §	990, Part X, line 13.	
[2] [3] [3] [4] [4] [5] [6] [6] [6] [6] [7] [6] [9] [7] [9] [7] [9] [9] [10] [10] [10] [10] [11] [12] [12] Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. [12] Complete if the organization answered "Yes" on Form 990, Part X line 15. [13] PROPERTY HELD FOR SALE - NET [14] [10] [15] [10] [16] [10] [16] [16] [17] [16] [16] [16] [17] [16] [18] [19] [19] Description of liability [10] [10] [11] Federal income taxes [22] PROGRAM CREDITS PAYABLE [31] [4] [4] [4] [5] [5] [6] <td< td=""><td></td><td></td><td></td><td>1</td><td></td><td></td></td<>				1		
[2] [3] [3] [4] [4] [5] [6] [6] [6] [6] [7] [6] [9] [7] [9] [7] [9] [9] [10] [10] [10] [10] [11] [12] [12] Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. [12] Complete if the organization answered "Yes" on Form 990, Part X line 15. [13] PROPERTY HELD FOR SALE - NET [14] [10] [15] [10] [16] [10] [16] [16] [17] [16] [16] [16] [17] [16] [18] [19] [19] Description of liability [10] [10] [11] Federal income taxes [22] PROGRAM CREDITS PAYABLE [31] [4] [4] [4] [5] [5] [6] <td< td=""><td>(1)</td><td></td><td></td><td></td><td></td><td></td></td<>	(1)					
(4) (5) (6) (7) (8) (9) Otlat. (Col. (b) must equal form 990, Part X, col. (B) line 13.) ▶ (9) Part X Other Assets. (a) Description (b) Book value (1) BENEFICIAL INTEREST IN PERPETUAL TRUST 107, 473. (2) PROPERTY HELD FOR SALE - NET 104, 542. (3) EMPLOYEE RETENTION CREDIT RECEIVABLE 765, 564. (4) (6) (7) (6) (8) (9) (9) (9) Inst equal form 990, Part X, col. (B) line 15.) PPart 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. (a) Description of liability (b) Book value (1) Federationcome taxes (c) (2) PROGRAM CREDITS PAYABLE 351, 145. (3) (6) (4) (5) (6) (7) (7) (9) (8) (9) (9) PROGRAM CREDITS PAYABLE 351, 145. (9) (9) (1) Federations taxes (1) (2) PROGRAM CREDI						
(6) (7) (8) (9) (9) (10) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (1) BENEFICIAL INTEREST IN PERPETUAL TRUST (2) PROPERTY HELD FOR SALE - NET (3) EMPLOYEE RETENTION CREDIT RECEIVABLE (6) (7) (8) (9) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) (1) Federal income taxes (2) PROGRAM CREDITS PAYABLE (3) (1) (1) Federal income taxes (2) PROGRAM CREDITS PAYABLE (3) (9) (6) (1) (6) (2)	(3)					
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Schedule	D ((Form	990)	2021

132053 10-28-21

Sche	dule D (Form 990) 2021 GIRL SCOUTS HEART OF THE				2985898 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stater	ments With	Revenue per Re	eturn.	
	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	6,161,885.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-537,686.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	-537,686.
3	Subtract line 2e from line 1			3	6,699,571.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
					6 600 571
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	6,699,571.
	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12,</i>) rt XII Reconciliation of Expenses per Audited Financial State	ements With	Expenses per		
	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line ¹	ements With	Expenses per		า.
	rt XII Reconciliation of Expenses per Audited Financial State	ements With 12a.	I Expenses per ∣		
Pa	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line	ements With 12a.	I Expenses per ∣	Retur	า.
Pa	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements	ements With	I Expenses per ∣	Retur	า.
Pa 1 2	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ements With 12a	I Expenses per ∣	Retur	า.
Pa 1 2 a	Image: Second state in the second s	2a 2a 2b 2b	I Expenses per ∣	Retur	า.
Pa 1 2 a b	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 12a. 2a 2b 2c	I Expenses per ∣	Retur	n. <u>5,266,386.</u>
Pa 1 2 b c d	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 12a. 2a 2b 2c 2d	I Expenses per l	Retur	n. <u>5,266,386.</u> 0.
Pa 1 2 b c d	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 12a. 2a 2b 2c 2d	I Expenses per l		n. <u>5,266,386.</u>
Pa 1 2 a b c d e	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 12a. 2a 2b 2c 2d	I Expenses per l	1 2e	n. <u>5,266,386.</u> 0.
Pa 1 2 b c d e 3	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 12a. 2b 2c 2d	I Expenses per l	1 2e	n. <u>5,266,386.</u> 0.
Pa 1 2 a b c d e 3 4	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 12a. 2b 2c 2d 2d	I Expenses per l	1 2e	n. <u>5,266,386.</u> 0.
Pa 1 2 a b c d e 3 4 a	T XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 12a. 2b 2b 2c 2d	I Expenses per l	1 2e	n. <u>5,266,386.</u> 0. <u>5,266,386.</u> 0.
Pa 1 2 a b c d a b c d a b c 3 4 b c 5	XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 12a. 2b 2c 2d 2d	I Expenses per l	1 2e 3	n. <u>5,266,386.</u> 0.

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

PART V, LINE 4:

GSHH CURRENTLY MAINTAINS VARIOUS DONOR-RESTRICTED ENDOWMENT FUNDS WHOSE PURPOSES ARE TO PROVIDE LONG TERM SUPPORT FOR THE PROGRAMS OF GIRL SCOUTS HEART OF THE HUDSON, INC. THE INCOME FROM THE ENDOWMENT FUNDS CAN BE USED

TO SUPPORT GIRL SCOUT PROGRAMS, TRAINING, AND CAPITAL IMPROVEMENT.

PART X, LINE 2:

THE ORGANIZATION IS A NOT-FOR-PROFIT ORGANIZATION AND IS EXEMPT FROM

FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE IRC, AND FROM STATE

INCOME TAXES.

THE ORGANIZATION RECOGNIZES AND MEASURES ITS UNRECOGNIZED TAX BENEFITS IN
132054 10-28-21 Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 GIRL SCOUTS HEART OF THE HUDSON, INC. 13-2985898 Page 5 Part XIII Supplemental Information (continued) ACCORDANCE WITH FASB ASC 740, INCOME TAXES. UNDER THIS GUIDANCE, THE ORGANIZATION ASSESSES THE LIKELIHOOD, BASED ON THEIR TECHNICAL MERIT, THAT TAX POSITIONS WILL BE SUSTAINED UPON EXAMINATION BASED ON THE FACTS, CIRCUMSTANCES, AND INFORMATION AVAILABLE AT THE END OF EACH PERIOD. THE MEASUREMENT OF UNRECOGNIZED TAX BENEFITS IS ADJUSTED WHEN NEW INFORMATION IS AVAILABLE OR WHEN AN EVENT OCCURS THAT REQUIRES A CHANGE.

MANAGEMENT HAS EVALUATED THE ORGANIZATION'S TAX POSITIONS AND HAS

CONCLUDED THAT THE ORGANIZATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT

REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2021

132055 10-28-21

SCHEDULE I		G	irants and Oth	er Assistan	ce to Organ	izations,			OMB No. 154	5-0047
(Form 990)		Go	vernments, an ete if the organizatio	nd Individua	ls in the Ŭni	ted States			202	71
Department of the Treasury		Comple		Attach to For		11 IV, III e 21 OF 22.			Open to F	Public
Internal Revenue Service			Go to www.ir	s.gov/Form990 fo	or the latest inform	nation.			Inspect	ion
Name of the organizati		TS HEART (OF THE HUDS	ON, INC.				Employer id	entification 13-298	
Part I General Ir	nformation on Grants a	nd Assistance						•		
-	zation maintain records t ward the grants or assis		-			-		_	X Yes	No
2 Describe in Part	IV the organization's pro	ocedures for monitor	oring the use of grant	funds in the United	d States.			····· -		
Part II Grants an	d Other Assistance to hat received more than S	Domestic Organiz	ations and Domestic	Governments. (Complete if the org	anization answered "Y	/es" on Form 990, Par	t IV, line 21, fo	r any	
	dress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance		rpose of gra assistance	ant
2 Enter total numb	per of section 501(c)(3) a	nd government ord	anizations listed in the	e line 1 table	•	I	I	· · · · · · · · · · · · · · · · · · ·		
	er of other organization			·····				·····		
LHA For Paperwork	Reduction Act Notice	, see the Instruction	ons for Form 990.					Schedul	e I (Form 99	90) 2021

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Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
FINANCIAL ASSISTANCE TO MEMBERS AND TROOPS	0	10,019.	0.		
MEMBERSHIPS	0	13,931.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

SCHEDULE I, PART IV

FINANCIAL ASSISTANCE IS AWARDED FOUR WAYS:

1. FUNDING OF GIRL SCOUTS MEMBERSHIP FEE AT \$25 EACH

2. ASSISTANCE WITH THE PURCHASE OF UNIFORM COMPONENTS, EARNED BADGES &

INSIGNIA

3. CAMPERSHIPS WHICH FUND ALL OR PART OF THE FEES FOR A GIRL TO ATTEND

SUMMER CAMP

4. ASSISTANCE WITH THE PAYMENT OF FEES TO ATTEND PROGRAMS

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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



Name of the	e organization
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GIRL SCOUTS HEART OF THE HUDSON, INC.

Employer identification number
13-2985898

Par	ιı	туре	es of Property							
				(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 10	(d) Method of de noncash contribu	etermin	•	s
1	Art -	Works	of art							
2			al treasures							
3			nal interests							
4			publications							
- 5			household goods							
6			ner vehicles							
7										
8			lanes property							
		-			1	25,797	FMV			
9 10			Publicly traded		_	25,151				
10			Closely held stock							
11		t interest	Partnership, LLC, or ts							
12	Sec	urities - N	Viscellaneous							
13	Qua	lified cor	nservation contribution -							
	Hist	oric strue	ctures							
14	Qua	lified cor	nservation contribution - Other							
15	Rea	l estate -	Residential							
16	Rea	l estate -	Commercial							
17	Rea	l estate -	Other							
18										
19			ory							
20			nedical supplies							
21	Тахі	dermy								
22			tifacts							
23			ecimens							
24			al artifacts							
25		er 🕨	()							
26	Oth	er 🕨	()							
27	Oth	er 🕨	()							
28	Oth	er 🕨	()							
29	Nun	nber of F	orms 8283 received by the organ	ization during	g the tax year for co	ontributions				
	for v	vhich the	e organization completed Form 82	283, Part V, D	onee Acknowledg	ement 29				
									Yes	No
30a	Duri	ng the ye	ear, did the organization receive t	by contributio	n any property rep	orted in Part I, lines 1 throu	gh 28, that it			
	mus	t hold fo	r at least three years from the dat	te of the initia	I contribution, and	which isn't required to be	used for			
	exer	npt purp	ooses for the entire holding period	l?				30a		X
b	lf "Y	′es," des	cribe the arrangement in Part II.							
31	Doe	s the org	ganization have a gift acceptance	policy that re	equires the review o	of any nonstandard contrib	utions?	31		X
32a	Doe	s the org	ganization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash	I			
	con	tributions	s?					32a		Х
b	lf "Y	′es," des	cribe in Part II.							
33	lf th	e organiz	zation didn't report an amount in o	column (c) fo	r a type of property	for which column (a) is ch	ecked,			
		cribe in F			-					

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Schedule M (Form 990) 2021

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Schedule M	(Form 990) 2021	GIRL	SCOUTS	HEART	OF	THE	HUDSON,	INC.	13-2985898	Page 2
Part II	Supplemental	Inform	ation. Provi	de the inforr	mation	reauirea	d by Part I. line:	s 30b. 32b. a	nd 33, and whether the organizat combination of both. Also comp	tion
	this part for any a	dditional ir	formation.			,				
	Control Soft Sectors Supplemental Information. Provide the information or their Holds, Six, Bix, Bix, Bix, Bix, Bix, Bix, Bix, B									
	art II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete									
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SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

INC.



13-2985898

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

GIRL SCOUTS HEART OF THE HUDSON,

DIRECTORS AND AN EXPERIENCED MANAGEMENT STAFF. GSHH COVERS DUTCHESS,

ORANGE, PUTNAM, ROCKLAND, SULLIVAN, ULSTER, AND WESTCHESTER COUNTIES

AND RURAL AREAS. SERVING URBAN, SUBURBAN,

WITHIN THE 4,767 SQUARE MILE JURISDICTION, GSHH HAS REGIONAL OFFICES IN

MONTGOMERY AND POUGHKEEPSIE. IN ADDITION, GSHH PLEASANTVILLE, NEW CITY,

MAINTAINS NINE GIRL SCOUT HOUSES AND FOUR CAMP PROPERTIES.

WITHIN OUR FOOTPRINT, GSHH SERVES OVER 13,000 GIRLS IN GRADES K THROUGH 12. GIRL SCOUT TROOPS ARE THE PRIMARY METHOD THROUGH WHICH GIRLS PARTICIPATE. GSHH HAS OVER 2,000 TROOPS. IN ADDITION, GSHH SERVES APPROXIMATELY 1,500 GIRLS IN UNDERSERVED COMMUNITIES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: EVERY YEAR SINCE, WE'VE HONORED HER VISION AND LEGACY, BUILDING GIRLS OF COURAGE, CONFIDENCE, AND CHARACTER WHO MAKE THE WORLD A BETTER

PLACE.

IN 2021, 149 CADETTE GIRL SCOUTS EARNED THEIR SILVER AWARD, THE SECOND HIGHEST AWARD IN GIRL SCOUTING, BY DEDICATING OVER HOURS TO IMPROVE THEIR COMMUNITIES. ADDITIONALLY, 73 SENIOR AND AMBASSADOR GIRL SCOUTS EARNED THEIR GOLD AWARD, THE HIGHEST ACHIEVEMENT IN GIRL SCOUTING; COMBINED THESE OUTSTANDING YOUNG WOMEN WORKED OVER 16,250 HOURS TO MAKE THE WORLD A BETTER PLACE.

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Schedule O (Form 990) 2021

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Name of the organization						Employer identification number
	GIRL	SCOUTS HE	ART OF TH	E HUDSO	N, INC.	13-2985898
FORM 990, PAR	Γ III,	LINE 4B,	PROGRAM	SERVICE	ACCOMPLISHMEN	TS:

WE ALSO OFFER EXPERIENCES IN THE AREAS OF THE OUTDOORS, AND

ENTREPRENEURSHIP.

GIRLS WHO ARE UNABLE TO PARTICIPATE DUE TO FINANCIAL OR OTHER

CONSTRAINTS ARE SERVED VIA PROGRAM STAFF OF GSHH.

THEY ALSO CAN RECEIVE FINANCIAL ASSISTANCE WITH TRANSPORTATION, DUES,

UNIFORMS, AND PROGRAM MATERIALS. GIRL SCOUT HOUSES AND/OR PROPERTIES

ARE USED AS LOCATIONS WHENEVER POSSIBLE. GIRL SCOUTS HEART OF THE

HUDSON ALSO DELIVERS PROGRAMMING AT LOCAL SCHOOLS, HOUSES OF WORSHIP,

COMMUNITY CENTERS, AND HOUSING FACILITIES. WE ALSO PARTNER WITH OTHER

YOUTH SERVING AGENCIES ON PROGRAMS THAT PROMOTE LEADERSHIP DEVELOPMENT.

EVERY ATTEMPT IS MADE TO OFFER THESE GIRL SCOUTS A COMPLETE AND WELL-ROUNDED EXPERIENCES. THEREFORE, GIRL SCOUTS HEART OF THE HUDSON COVERS THE COSTS OF THESE PROGRAMS, INCLUDING, BUT NOT LIMITED TO, HIRING STAFF TO WORK WITH THE GIRLS IN THESE SETTINGS, UNIFORM PIECES, AND PROGRAM SUPPLIES.

THE BENEFITS OF GIRL SCOUTING ARE WELL-KNOWN AND WELL-DOCUMENTED. GIRL SCOUTS ARE GROUNDBREAKERS, BIG THINKERS, AND ROLE MODELS. THEY ARE GIRLS OF COURAGE, CONFIDENCE, AND CHARACTER WHO MAKE THE WORLD A BETTER PLACE. THEY FIND THE STRENGTH AND CONFIDENCE TO LEAD THE WAY, EVERY DAY - AND CREATE MEANINGFUL CHANGE IN THEMSELVES AND THEIR COMMUNITIES. OUR PROGRAMMING INTRODUCES GIRLS TO ESSENTIAL CONCEPTS SUCH AS FINANCIAL LITERACY AND PROBLEM SOLVING, PROMOTES SELF-ESTEEM AND GROUP 132212 11-11-21 Schedule O (Form 990) 2021

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<u>TH</u>	LLABORATION, AND GIVES GIRLS THE TOOLS THEY NEED TO EMPOWER EMSELVES AND OTHERS.
FO	RM 990, PART VI, SECTION A, LINE 6:
AR	TICLE II MEMBERSHIP SECTION 2.1 MEMBERSHIP. PERSONS WHO ARE MEMBERS OF
TH	E GIRL SCOUT MOVEMENT AND ARE REGISTERED WITH THE COUNCIL ARE MEMBERS OF
TH	E COUNCIL, BUT ONLY MEMBERS 16 YEARS OF AGE AND OLDER ARE ELIGIBLE TO BE
DE	LEGATES. EMPLOYEES ARE NOT ELIGIBLE TO VOTE. ONLY THE FOLLOWING MEMBERS
SH.	ALL BE ENTITLED TO VOTE AT THE ANNUAL MEETING AND SPECIAL MEETINGS OF THE
<u>C0</u>	UNCIL (REFERRED TO HEREIN AS "DELEGATES"): A. EACH SERVICE UNIT MAY
SE	LECT NO LESS THAN TWO DELEGATES AND SUCH ADDITIONAL DELEGATES AND
AL	TERNATIVE DELEGATES AS DETERMINED BY THE BOARD BASED UPON THE GIRL
ME	MBERSHIP OF THE SERVICE UNIT AS OF SEPTEMBER 30 OF EACH YEAR. THE NUMBER
<u>OF</u>	DELEGATES MAY BE ADJUSTED ANNUALLY TO ASSURE COMPLIANCE WITH SECTION
2.	1E BELOW. DELEGATES SHALL HAVE A TERM OF THREE YEARS AND UNTIL THEIR
SU	CCESSORS ARE SELECTED. SERVICE UNITS MAY FILL THE UNEXPIRED TERMS OF
DE	LEGATES WHO RESIGN OR DO NOT PERFORM THEIR DUTIES, OR ARE NO LONGER
ME	MBERS OF THE GIRL SCOUT MOVEMENT THROUGH THE COUNCIL. B. UP TO FIVE (5)
DE	LEGATES-AT-LARGE SELECTED BY THE BOARD DEVELOPMENT COMMITTEE IF IT IS
<u>DE</u>	TERMINED THAT THERE IS A SEGMENT OF MEMBERSHIP THAT IS SUBSTANTIALLY
UN	REPRESENTED AMONG THE DELEGATES SELECTED BY THE SERVICE UNITS AND WOULD
TH	EREFORE HAVE NO VOICE IN THE POLICY DECISIONS OF THE COUNCIL WITHOUT SUCH
DE	LEGATE-AT-LARGE REPRESENTATION. C. DIRECTORS OF THE BOARD AND MEMBERS OF
TH	E BOARD DEVELOPMENT COMMITTEE, ALL OF WHOM SHALL BE EX-OFFICIO DELEGATES
WI	TH THE RIGHT TO VOTE. D. NATIONAL COUNCIL DELEGATES WHO ARE OF VOTING
AG	E. E. THE TOTAL NUMBER OF DELEGATES SHALL NOT BE LESS THAN TWO (2)
DE	LEGATES PER SERVICE UNIT. AT LEAST TWO-THIRDS (2/3) OF THE DELEGATES
	ALL BE SELECTED BY THE SERVICE 2 UNITS. ALL DELEGATES SHALL SERVE ONLY
	Schedule O (Form 990) 2021 815 790347 144474 2021.06010 GIRL SCOUTS HEART OF THE 14447

GIRL SCOUTS HEART OF THE HUDSON, INC.

COLLABORATION, AND GIVES GIRLS THE TOOLS THEY NEED TO EMPOWER

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Name of the organization GIRL SCOUTS HEART OF THE HUDSON, INC.	Employer identification number 13-2985898
FOR THE TERM TO WHICH THEY HAVE BEEN SELECTED AND ONLY FOR	AS LONG AS THEY
ARE REGISTERED WITH THE GIRL SCOUT MOVEMENT THROUGH THE CO	UNCIL. A RECORD
OF THE NAMES OF THE DELEGATES SHALL BE PREPARED BY THE SEC	RETARY OF THE
COUNCIL, REFERRED TO HEREIN AS THE SECRETARY, NO MORE THAN	FIFTY (50) AND
NO LESS THAN THEN (10) DAYS PRIOR TO THE DATE OF THE ANNUA	L MEETING (HEREIN
"RECORD DATE").	

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

THE VOTING MEMBERS OF THE CORPORATION:

- ELECT THE OFFICERS OF THE COUNCIL, THE MEMBERS-AT-LARGE OF THE BOARD OF DIRECTORS, THE MEMBERS OF THE COUNCIL BOARD DEVELOPMENT COMMITTEE, THE DELEGATES TO THE NATIONAL COUNCIL OF GIRL SCOUTS OF THE UNITED STATES OF AMERICA AND, IF VACANCIES OCCUR, PERSONS TO

FILL VACANCIES AMONG THOSE DELEGATES.

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

THE VOTING MEMBERS OF THE CORPORATION:

- DETERMINE GENERAL LINES OF DIRECTION FOR GIRL SCOUTING WITHIN THE

JURISDICTION OF THE COUNCIL BY RECEIVING AND RESPONDING TO REPORTS AND

INFORMATION FROM THE BOARD OF DIRECTORS.

- AMEND THE ARTICLES OF INCORPORATION AND BYLAWS.

- TAKE ALL OTHER ACTION REQUIRING A MEMBERSHIP VOTE AS DEFINED IN THE

BYLAWS.

- ATTEND AND PARTICIPATE IN DELEGATE MEETINGS.

- REPORT ON DELEGATE DISCUSSION TO THE COMMUNITIES.

- CONDUCT SUCH OTHER BUSINESS AS MAY, FROM TIME TO TIME, COME BEFORE THE 132212 11-11-21 Schedule O (Form 990) 2021

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Name of the organization	GIRL	SCOUTS	HEART	OF	THE	HUDSON,	INC.	Employer identification number 13-2985898

MEMBERS.

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

GIRL SCOUTS HEART OF THE HUDSON INC. HAS ITS FORM 990 PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND HAS ESTABLISHED THE FOLLOWING REVIEW PROCESS TO ENSURE THAT THE INFORMATION REPORTED IS COMPLETE AND ACCURATE. AFTER THE FORM 990 HAS BEEN PREPARED, IT IS REVIEWED BY THE CEO, AND AUDIT COMMITTEE. BEFORE THE 990 IS FILED WITH THE INTERNAL REVENUE SERVICE, IT IS SUBMITTED TO THE BOARD MEMBERS FOR COMMENTS AND A SPECIALLY CALLED MEETING IS HELD BY THE BOARD OF DIRECTORS TO REVIEW THE FORM 990. AFTER THE 990 IS APPROVED BY ALL MEMBERS OF THE BOARD OF DIRECTORS, THE 990 IS ELECTRONICALLY FILED.

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

ANNUAL DISCLOSURES ARE MADE BY ALL MEMBERS OF THE EMPLOYEES, BOARD, BOARD STANDING COMMITTEES, AND THE BOARD DEVELOPMENT COMMITTEE OF ANY DIRECT OR INDIRECT BENEFITS THEY OR MEMBERS OF THEIR FAMILY ARE RECEIVING, OR WILL RECEIVE, AS THE RESULT OF AN AGREEMENT BY THE COUNCIL WITH ANY OUTSIDE PARTY.

ANY POTENTIAL CONFLICT OF INTEREST, NO MATTER HOW INSIGNIFICANT, SHALL BE DISCLOSED IN WRITING TO THE BOARD CHAIR BY THE PERSON CONCERNED PRIOR TO ENGAGING IN A 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 BOARD CHAIR OR, WHEN IT ARISES DURING THE COMMITTEE MEETING, TO THE CHAIR OF THE COMMITTEE, AND SUCH PERSON SHALL NOT VOTE ON THE MATTER. MOREOVER, THE PERSON HAVING THE CONFLICT SHALL RETIRE FROM THE ROOM IN WHICH THE

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Name of the organization GIRL SCOUTS HEART OF THE HUDSON, INC.	Employer identification number 13-2985898
BOARD OR COMMITTEE IS MEETING AND SHALL NOT PARTICIPATE IN	THE FINAL
DELIBERATIONS OR DECISION REGARDING THE MATTER UNDER CONSI	DERATION. THE
MINUTES OF THE MEETING OF THE BOARD OR COMMITTEE SHALL REF	LECT THAT A
CONFLICT OF INTEREST WAS DISCLOSED AND THAT THE INTERESTED	PERSON WAS NOT
PRESENT DURING THE FINAL DISCUSSION OR VOTE AND DID NOT VO	TE. WHEN THERE IS
A DOUBT AS TO WHETHER A CONFLICT OF INTEREST EXISTS. THE M	ATTER SHALL BE
RESOLVED BY VOTE OF THE BOARD OR COMMITTEE, EXCLUDING THE	INTERESTED
PERSON.	

ANY MATTER THAT ARISES INVOLVING A QUESTION OR INTERPRETATION RELATING TO THIS CONFLICT OF INTEREST SHOULD BE SUBMITTED IN WRITING TO THE BOARD CHAIR FOR DECISION OR REFERRAL TO THE BOARD OR ITS EXECUTIVE COMMITTEE FOR DECISION, WHERE APPROPRIATE.

IN THE EVENT THAT A POTENTIAL CONFLICT OF INTEREST IS NOT DISCLOSED, THE MATTER SHALL BE REFERRED TO THE BOARD OR ITS EXECUTIVE COMMITTEE FOR DETERMINATION OF CONTINUED MEMBERSHIP OF THE INDIVIDUAL CONCERNED ON THE BOARD OF DIRECTORS, A BOARD STANDING COMMITTEE, OR THE BOARD DEVELOPMENT COMMITTEE.

AN EMPLOYEE WHO HAS AN ACTUAL OR POTENTIAL CONFLICT MUST DISCLOSE THIS INFORMATION TO THE ORGANIZATION AS SOON AS POSSIBLE SO THAT THE ORGANIZATION CAN PUT SAFEGUARDS IN PLACE TO PROTECT ALL PARTIES.

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

CEO COMPENSATION

COMPENSATION FOR THE CEO IS UNDER THE RESPONSIBILITY OF THE BOARD OF
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Name of the organization GIRL SCOUTS HEART OF THE HUDSON, INC.	Employer identification number 13-2985898			
DIRECTORS (BOD). EACH YEAR, THE BOD ESTABLISHES A CEO PERF	ORMANCE			
EVALUATION COMMITTEE. THIS COMMITTEE REVIEWS THE PERFORMAN	CE OF THE CEO,			
AND INCLUDES A REVIEW BY SELECT MANAGEMENT AND/OR LEADERSH	IP LEVEL STAFF			
WHO REPORT DIRECTLY TO THE CEO, AS SELECTED BY THE BOD.				
ALL SALARY CHANGES, BONUS OR INCENTIVE PAY GRANTED TO THE	CEO ARE AT THE			
RECOMMENDATION AND APPROVAL OF THE BOD.				
KEY EMPLOYEE AND OFFICERS COMPENSATION				

GIRL SCOUTS HEART OF THE HUDSON, INC. HAS A CUSTOMIZED SALARY STRUCTURE THAT WAS DEVELOPED IN CONJUNCTION WITH THE GIRL SCOUTS USA (GSUSA) COMPENSATION TEAM. IT IS BASED ON OUR COUNCIL SIZE, THE COST OF THE LABOR MARKET (ABOVE NATIONAL AVERAGE FOR THE NORTHEASTERN US) AND STAFFING STRUCTURES RELEVANT TO GIRL SCOUT COUNCILS.

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

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THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS
REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. IT IS POSTED ON
GUIDESTAR.ORG AND OTHER SIMILAR TYPES OF WEBSITES. GSHH ALSO MAKES THEIR
FORM 990 AVAILABLE ON THEIR WEBSITE AND UPON REQUEST. IN ADDITION, THE
FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, ARTICLES OF
INCORPORATION AND BY-LAWS ARE ALSO AVAILABLE UPON WRITTEN REQUEST AT OR BY
CALLING THE ORGANIZATION DIRECTLY.
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