Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047 2005

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

Α	For the 2005 calendar year, or tax year beginning $10/01$, 2005, and ending $9/30$, 2006
В		ployer Identification Number
	Address change Please use GIRL SCOUT COUNCIL OF CUMBERLAND VALLEY 62	2-0589380
	Name change or print or type. 4522 GRANNY WHITE PIKE	phone number
		15-383-0490
		ounting Cash X Accrual
	Amended return	Other (specify)
	Application pending • Section 501(c)(3) organizations and 4947(a)(1) nonexempt H and I are not applicable to s	
	charitable tructs must attach a completed Schodule A	
	(Form 990 or 990-EZ).	
G	Web site: ► WWW.GIRLSCOUTSOFCV.ORG	
J	Organization type (If No. attach a list S	
J	(check only one) X 501(c) 3 ◀ (insert no.) 4947(a)(1) or 527	•
ĸ	Check here If the organization's gross receipts are normally not more than H (d) is this a separate return	
••	\$25,000. The organization need not file a return with the IRS; but if the organization	by a group ruling? Yes X No
	chooses to file a return, be sure to file a complete return. Some states require a I Group Exemption	n Number ►
		ne organization is not required
L	Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ► 11,004,268.	(Form 990, 990-EZ, or 990-PF).
Pa	Irt I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions)
	1 Contributions, gifts, grants, and similar amounts received:	
	a Direct public support	1 11 11 11 11 11 11 11 11 11 11 11 11 1
	b Indirect public support	
	c Government contributions (grants) 1c	
	d Total (add lines \$ 1,140,995. noncash \$ 32,695.)	1d 1,173,690.
	2 Program service revenue including government fees and contracts (from Part VII, line 93).	2 462,817.
		3
		
	4 Interest on savings and temporary cash investments	4
	5 Dividends and interest from securities. 6a Gross rents. 6 b Less: rental expenses. 6 c Net rental income or (loss) (subtract the St from It and It	5 286, 934.
	6a Gross rents	- 1: [\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	b Less: rental expenses	<u>_</u> -
	c Net rental income or (loss) (subtract the 6b from life 2)	6c
R	7 Other investment income (describe)	7
REVENU	8a Gross amount from sales of assets other (A) Securities (B) Other	
E	than inventory	
Ü	b Less: cost or other basis and sales expenses 2,791,089. 8b 44,679.	
-	c Gain or (loss) (attach schedule) STATEMENT . 1114, 423 8c 186, 833	7: 4
	d Net gain or (loss) (combine line 8c, columns (A) and (B)).	8d 72,410.
	9 Special events and activities (attach schedule). If any amount is from gaming, check here	74,1201
		<u>.</u>
		
		 [
	10a Gross sales of inventory, less returns and allowances	
	b Less: cost of goods sold	
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	
	11 Other revenue (from Part VII, line 103)	
	12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	
E	13 Program services (from line 44, column (B))	
EXPENSES	14 Management and general (from line 44, column (C))	
E N	15 Fundraising (from line 44, column (D))	15 363,974.
Ş	16 Payments to affiliates (attach schedule)	16
Š	17 Total expenses (add lines 16 and 44, column (A))	17 4,808,991.
	18 Excess or (deficit) for the year (subtract line 17 from line 12)	
N S		
N S E E T T	20 Other changes in net assets or fund balances (attach explanation)	
' T		

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising		
22	Grants and allocations (att sch)					1 mm mm		
	(cash \$							
	non-cash \$)							
	If this amount includes							
23	foreign grants, check here	22	59,818.	59,818.				
24	Benefits paid to or for members (att sch)	24	33,010.	37,010.				
25	Compensation of officers, directors, etc	25	341,417.	282,022.	27,550.	31,845.		
26	Other salaries and wages	26	2,116,020.	1,747,899.	170,751.	197,370.		
27	Pension plan contributions	27	43,173.	35,666.	3,481.	4,026.		
28	Other employee benefits	28	277,414.	229,176.	22,366.	25,872.		
29	Payroll taxes	29	237,191.	195,947.	19,124.	22,120.		
30	Professional fundraising fees	30						
31	Accounting fees	31	14,000.	12,167.	1,080.	753.		
32	Legal fees	32						
33	Supplies	33	154,693.	144,015.	2,390.	8,288.		
34	Telephone	34	68,625.	62,521.	2,426.	3,678.		
35	Postage and shipping	35	32,542.	24,461.	1,540.	6,541.		
36	Occupancy	36	386,107.	369,989.	6,315.	9,803.		
37	Equipment rental and maintenance	37	67,742.	59,937.	3,498.	4,307.		
38	Printing and publications	38	55,028.	46,110.	274.	8,644.		
39	Travel	39	100,311.	90,672.	3,076.	6,563.		
40	Conferences, conventions, and meetings	40	137,958.	124,716.	4,609.	8,633.		
41	Interest	41						
42	Depreciation, depletion, etc (attach schedule)	42	337,332.	322,954.	8,985.	5,393.		
43	Other expenses not covered above (itemize):			- 1				
	SEE STATEMENT 6	43 a	379,620.	301, 602	58,880.	20,138.		
	b	43 b		יטי				
		43 c	. 1					
	_ 	43 d						
		43e	THE					
1		18		-	·			
		3g						
44	Total functional expenses. Add lines 22 through	3				 -		
	43. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	4,808,991.	4,108,672.	336,345.	363,974.		
Join	t Costs. Check. If you are following			1,200,014.		000,211		
	any joint costs from a combined educational			licitation reported in (B)	Program services?	. ► Yes X No		
	If 'Yes,' enter (i) the aggregate amount of these joint costs \$; (ii) the amount allocated to Program services							
\$			to Management and ge		; and (iv) th			
-	undraising \$.							
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organization. How the public pe	erceives an organization in	people, serves as the primary or sole source of information about such cases may be determined by the information presented on I fully describes, in Part III, the organization's programs and acc	its return. Therefore,
What is the organization's prim All organizations must describe clients served, publications issi izations and 4947(a)(1) nonexe		SEE STATEMENT 7 everents in a clear and concise manner. State the number of ents that are not measurable. (Section 501(c)(3) and (4) organalso enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)
a SEE STATEMENT 8			
Grants and allocations) If this amount includes foreign grants, check here	4,108,672.
b) It this amount includes loreign grants, check here 2	4,100,072.
(Grants and allocations	\$) If this amount includes foreign grants, check here	
(Grants and allocations	\$) If this amount includes foreign grants, check here	
		Yac	
(Grants and allocations	\$) If this am unt include where presents, check here	
e Other program services		the amount includes foreign grants, check here	
(Grants and allocations f Total of Program Service	Expenses (should blue! li	e 44, column (B), Program services)	4,108,672.

Part IV Balance Sheets (See Instructions)

(B) End of year (A) Beginning of year Where required, attached schedules and amounts within the description column should be for end-of-year amounts only. Note: 2,663,580 45 3,669,699. Cash — non-interest-bearing..... 46 Savings and temporary cash investments..... 46 47 a 47 a Accounts receivable 101,828. 47 c 32,404. **b** Less: allowance for doubtful accounts 47 b 369,284 48 a 369,284. 506,431 48 c 48 b 49 49 Grants receivable..... Receivables from officers, directors, trustees, and key employees (attach schedule) 50 51 a 51 c 111,896. 124,064. 52 52 Inventories for sale or use...... 94,968. 61,855. 53 53 Prepaid expenses and deferred charges $5,556,\overline{370}$. 5,181,511 54 Investments – securities (attach schedule). ..SEE..ST. 9. ► Cost X FMV 54 11,715,595 55 a Investments - land, buildings, & equipment: basis. 55 a b Less: accumulated depreciation (attach schedule)...........STATEMENT . 10... 5,796,610. 6,046,452 55 0 5,918,985 56 56 Investments — other (attach schedule)..... 57a Land, buildings, and equipment: basis..... b Less: accumulated depreciation 570 (attach schedule)..... 57b 58 Other assets (describe BLICC 706,666 15,610,286. Total assets (must equal line 74). Add lines 45 through 58 59 152,438. 206,023. 60 Accounts payable and accrued expenses 61 Grants pavable..... 175,095. 46,532 62 Deferred revenue..... 63 63 Loans from officers, directors, trustees, and 64 a 64a Tax-exempt bond liabilities (attach 9,805. 19,611 64 b SEE STATEMENT 11 b Mortgages and other notes payable (attach schedule). 29,068. 31,332. 65 Other liabilities (describe ►. SEE STATEMENT 12 65 419,991. 249,913. 66 66 Total liabilities. Add lines 60 through 65 X and complete lines 67 Organizations that follow SFAS 117, check here ▶ through 69 and lines 73 and 74. 13,624,701. 12,801,922 67 414,724. 68 Temporarily restricted..... 515,871 68 1,138,960. 1,150,870. 69 69 Permanently restricted..... Organizations that do not follow SFAS 117, check here ► and complete lines R 70 through 74. 70 70 Capital stock, trust principal, or current funds 71 71 Paid-in or capital surplus, or land, building, and equipment fund..... 72 72 Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)......... 15,190,295. 14,456,753 73 15,610,286. 14,706,666. 74 74 Total liabilities and net assets/fund balances. Add lines 66 and 73..... Form 990 (2005) BAA

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_	art V-A Reconciliation of Reven instructions.)	ue per Audited Financia		Revenue per Re		
— а	Total revenue, gains, and other support		nts		а	5,547,585.
b	Amounts included on line a but not on F	•	1 1			
	1 Net unrealized gains on investments		 	344,950.		
	2Donated services and use of facilities			5,667.		
	3Recoveries of prior year grants					
	4Other (specify):					
		- 				050 615
_	Add lines b1 through b4				b	350,617.
c d	Subtract line b from line a				С	5,196,968.
a	Amounts included on Part I, line 12, but		امر ا	1		
	1 Investment expenses not included on Pa	art i, line 60	d1			
	2Other (specify): SEE STM 13		1 1	C1.F		
	Add lines d1 and d2		d2	615.		C1 F
_					d	615.
e D	Total revenue (Part I, line 12). Add line art IV-B Reconciliation of Expen	ses per Audited Financi	al Statoments with	Evnences new I	e Dot	5,197,583.
	artiv-ba Reconciliation of Expen	ses per Auditeu Filialici	iai Statements with	Expenses per r	Tel	urn
а	Total expenses and losses per audited to	financial statements			a	A 01A 0A2
b	Amounts included on line a but not on F		• • • • • • • • • • • • • • • • • • • •		a	4,814,043.
U	1 Donated services and use of facilities		ь1	5 667		
	2Prior year adjustments reported on Part			5,667.		
	3Losses reported on Part I, line 20					
	400					
			ا د ا	_1		
	Add lines b1 through b4				ь	5,667.
С	Subtract line b from line a				-	4,808,376.
d	Amounts included on Part I, line 17, but	t not on line as	_ ('.U'	,	-	4,000,370.
u	1 Investment expenses not included on P	art Line 6h				
		art i, line ob	······ ··· ··· ··· ··· ··· ···			
	2Other (specify): SEE STMT 14	ニュナトント		C1 E	-	
	Add lines d1 and d2			615.		C1 F
_					d	615.
е	Total expenses (Part I, line 17). Add lin				е	4,808,991.
	art V-A Current Officers, Director or key employee at any time du	ors, Trustees, and Key E uring the year even if they were	-mployees (List eacle not compensated.) <i>(S</i>	h person who was an ee the instructions.)	offi	cer, director, trustee,
	(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plan	,	(E) Expense account and other allowances
				compensation plan		
SE	E STATEMENT 15	_	341,418.	24,888	۱	0.
		_	312, 123.	21/000	-	
_	- 	-				
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		-				
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		1				

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	005) GIRL SCOUT COUNCIL				62-03893	BBU Fage 8
RESERVING.	Analysis of Income-Produc				C10 E10 E14	
Note: Enter otherwise in:	gross amounts unless dicated.	Unrelated busing (A) Business code	ness Income (B) Amount	Excluded by Section (C) Exclusion code	on 512, 513, or 514 (D) Amount	(E) Related or exempt function income
a <u>CAM</u> b	ram service revenue: IPING & PROGRAMS					462,817.
t Medi g Fees l 94 Mem 95 Intere 96 Divid	icaro/Medicald payments			14	286,934.	
a debt b not d lon d 98 Not ro 99 Otho Gain onto	-financed property			18	72,410. 184,636.	
102 Gross 103 Othe b	ncome or (loss) from special events profit or (loss) from sales of inventory er revenue: a					3,017,096.
104 Subic 105 Tota Note: Line	olal (add columns (B), (D), and (E)),	and (E))	line 12. Part I.			3,479,913. 4,023,893.
	Relationship of Activities to Explain how each activity for whice of the organization's exempt purp SEE STATEMENT 16					
ाइम्बासः <u>वि</u>	Information Regarding Tax (A)	able Subsidiar	ies and Disrec		(See the instructions	(E)
Name, parl	address, and EIN of corporation, nership, or disregarded entity		Nature of	activilles	Total income	End-of-year assels
		do the				
a Did the b Did th	Information Regarding Tra enganization, during the year, receive any fune organization, during the year, pa of 'Yes' to (b), file Form 8870 and F	inds, directly or indirect by promiums, direct orm 4720 (see insti	ly, to pay premiums or tly or indirectly, or ructions).	i a personal benefit con n a personal benef	iraci?	Yes X No
Please Sign Here	Under penelling of periory, t becare that I had rue, correct, and confuses. Becaretion of produce the state of the state o	e.		a achedulas and staleme alion of which ntaparer t	0/-39-	07
Paid Pre- parer's	Propher's signature Figure game (or FRASIER, DE	LP &	PLIC	1-24-07		reparer's SSN or PTIN (See charal instruction W)
Use Only	numployed). > 3310 WEST El		TE. 550		Phone no. ► (61	5) 383-6592

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),

501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.) ► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ. 2005

OMB No. 1545-0047

Name of the organization Employer identification number SCOUT COUNCIL OF CUMBERLAND VALLEY 62-0589380 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See instructions. List each one. If there are none, enter 'None.') (b) Title and average hours per week (a) Name and address of each (d) Contributions (c) Compensation (e) Expense account and other employee paid more than \$50,000 to employee benefit plans and deferred devoted to position allowances compensation SUSAN CHAPMAN NASHVILLE, TN VP COMM/VOL REL 40 62,700. 6,883 0. MARY FISCHER NASHVILLE, TN VP SALES 40 57,774. 6,715 0. LINDE PFLAUM BRENTWOOD, TN 40 0. DIR MEM MKT SUP 57,603 4,558 EDNA NEPRUD 6,447 0. FRANKLIN, DIR MEMBERSHIP 40 51,000 Total number of other employees paid over \$50,000 Part II — A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions. List each one (whether individuals or firms). If there are none, enter 'None.') (a) Name and address of each independent contractor paid more than \$50,000 Lype of service (c) Compensation UBLICCC NONE Total number of others receiving over \$50,000 for professional services. Part II B Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None.' See instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (c) Compensation (b) Type of service

Total number of other contractors receiving

over \$50,000 for other services.

Note	: You may use the worksheet in the	e instructions for conv	erting from the accru	al to the cash method	of accounting.	
begi	ndar year (or fiscal year nning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,424,767.	1,695,426.	2,230,235.	1,904,903.	7,255,331.
16	Membership fees received					0.
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose	6,838,847.	7,016,164.	6,323,245.	6,672,078.	26,850,334.
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975.	158,788.	105,450.	144,762.	46,705.	455,705.
19	Net income from unrelated business activities not included in line 18					0.
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0.
	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					0.
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets SEE. STMT. 17.	20,323.	21,500.	-OP'	1	41,823.
23	Total of lines 15 through 22	8,442,725.	8,838,540.	8, 98, 242.	8,623,686.	34,603,193.
24	Line 23 minus line 17		1,822 376.	4 ,374,997.	1,951,608.	7,752,859.
25	Enter 1% of line 23		8, 3.	86,982.	86,237.	
26	Organizations described on lines			olumn (e), line 24		
	Prepare a list for your records to show the supported organization) whose total gifts for return. Enter the total of all these excess	or 2001 thre igh 2004 exceed amounts	ded the amount shown in lir	ne 26a. Do not file this list	with your ≥ 26 b	
	Total support for section 509(a)(1) test: Enter line 24, o	column (e)		▶ 26c	
(Add: Amounts from column (e) fo	r lines: 18		19 26 b		
	Public support (line 26c minus lin					
	Public support (line 26c minus line 26c minus line 2	•				%
	Organizations described on line		ed by life 200 (defior	illiator),	201	0
	a For amounts included in lines 15, name of, and total amounts recei such amounts for each year:		received from a 'disq , each 'disqualified pe	ualified person,' prepa erson.' Do not file this	are a list for your reco s list with your return	rds to show the Enter the sum of
	(2004) 23,495.	(2003)	<u>41,624.</u> (2002)_	22,840	. (2001)	19,143.
	bFor any amount included in line 1 to show the name of, and amoun \$5,000. (Include in the list organi After computing the difference be differences (the excess amounts)	t received for each year zations described in li tween the amount rec	ar, that was more tha nes 5 through 11b, as eived and the larger	n the larger of (1) the s well as individuals.) amount described in (amount on line 25 for a second to the court of the court	or the year or (2) th your return. m of these
	(2004) 0. Add: Amounts from column (e) for 26, Add: Line 27a total Public support (line 27c total min total support for section 509(a)(2)	(2003)	<u>0</u> . (2002) _	0	(2001)	
•	17 26.	850,334. 20	.,200,001.	21		34,105,665.
,	Add: Line 27a total	107,102. ar	nd line 27b total		0. 27d	107,102.
	Public support (line 27c total min	us line 27d total)			▶ 27e	33,998,563.
1	Total support for section 509(a)(2	2) test: Enter amount f	rom line 23, column	(e) ► 27f 34	,603,193.	
	g Public Support percentage (line a	27e (numerator) divid	ea by line 271 (aenon	ппаtor))	2/9	30.23 6
	i investment income percentage (line 18, column (e) (ni	imerator) divided by	line 2/1 (denominator))	1.32 6
28	Unusual Grants: For an organiza list for your records to show, for enature of the grant. Do not file the	each year, the name o	of the contributor, the	date and amount of th	nts during 2001 through ne grant, and a brief d	gh 2004, prepare a escription of the

Schedule A (Form 990 or 990-EZ) 2005 GIRL SCOUT COUNCIL OF CUMBERLAND VA Part V Private School Questionnaire (See instructions.)

	(To be completed ONLY by Schools that checked the box on line of in Part 19)	N/A			
			Yes	No	_
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	20 11 -		_
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30			
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during	30		-	-
	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31			-
	Does the organization maintain the following: a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a			
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b			
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32 c			
	d Copies of all material used by the organization or on its behalf to solicit contributions?	32 d			-
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)				
33	Does the organization discriminate by race in any way with respect to: a Students' rights or privileges?	And Andrews			
	a Students' rights or privileges?	33a	1755. Acc		_
	b Admissions policies?			-	_
		33c		+	
	d Scholarships or other financial assistance?	33d		-	_
	e Educational policies?	33e		-	_
	f Use of facilities?	33f		+	_
	g Athletic programs?			+-	_
	h Other extracurricular activities?	33h			- 2
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)				
34	a Does the organization receive any financial aid or assistance from a governmental agency?	34a	in karten		
	b Has the organization's right to such aid ever been revoked or suspended?	34 b			
35	If you answered 'Yes' to either 34a or b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of				
J	sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.	35			

							 -
F) // A		Per 11.				(See instructions.)	
Part VI-A	Lobbund	i le voonditurec	hv blactin	a Dublic ('havitiac	(Can instructions)	
I CIL VI M	LUUUVIIIU	i Expendicules	DV EICCHIII	u rubiic c	mainies.	coee instructions.)	
				9		(Toda or or or or	
	(To be come	pleted ONLY by an	Aligible organ	ization that f	ilod Form F	7691	

	(To be completed ONLY by an eligible organization that filed Form 5768)		,	N/A
Chec	k ► a if the organization belongs to an affiliated group. Check ► b if you of	checke	ed 'a' and 'limited conti	rol' provisions apply.
	Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		Organizations
37 38	Total lobbying expenditures to influence a legislative body (direct lobbying)	37 38		
39 40	Other exempt purpose expenditures Total exempt purpose expenditures (add lines 38 and 39)	39 40		
41	Lobbying nontaxable amount. Enter the amount from the following table – If the amount on line 40 is – The lobbying nontaxable amount is –	FVI		
	Not over \$500,000	The state of the s		
	Over \$1,000,000 but not over \$1,500,000. \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000. \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000. \$1,000,000.	41		
42 43	Grassroots nontaxable amount (enter 25% of line 41)	42 43		
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		
	Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.			

4 -Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the instructions for lines 45 through 50.)

		Lobbying Expenditures During 4 -Year Averaging Period							
-	Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2004	(c) (200.	(d) 2002	(e) Total			
45	Lobbying nontaxable amount		121						
46	Lobbying ceiling amount (150% of line 45(e))	The second secon	00-		1				
47	Total lobbying expenditures								
48	Grassroots non-taxable amount								
49	Grassroots ceiling amount (150% of line 48(e))								
50	Grassroots lobbying expenditures								

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See instructions.)			N/A		
During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:		No	Amount		
a Volunteers					
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			1		
c Media advertisements					
d Mailings to members, legislators, or the public					
e Publications, or published or broadcast statements					
f Grants to other organizations for lobbying purposes		_			
g Direct contact with legislators, their staffs, government officials, or a legislative body					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means					
i Total lobbying expenditures (add lines c through h.)					
If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities	5.				

Schedule A (Form 990 or 990-EZ) 2005

Schedule A (Form 990 or 990-EZ) 2005 GIRL SCOUT COUNCIL OF CUMBERLAND VA 62-0589380 Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the	e reporting organization d	lirectly or inc	lirectly engage in any of the following ganizations) or in section 527, relatin	with any other organization described in	n section	501 (c	:)
	•		a noncharitable exempt organization			Yes	No
		-	, ,		51 a (i)	103	X
					a (ii)		X
• •	transactions:				- (.)		
(i) Sa	ales or exchanges of asse	ets with a no	ncharitable exempt organization		b (i)		Х
(ii) Ρι	urchases of assets from a	noncharitat	le exempt organization		b (ii)		X
(iii)Re	ental of facilities, equipme	ent, or other	assets		b (iii)		X
(iv)Re	eimbursement arrangeme	nts			b (iv)		X
(v) Lo	ans or loan guarantees.				b (v)		X
(vi)Pe	erformance of services or	membership	or fundraising solicitations		b (vi)		X
					С		X
d If the a the go	answer to any of the abov ods, other assets, or serv	ve is 'Yes,' c vices given b	omplete the following schedule. Colu y the reporting organization. If the or	mn (b) should always show the fair mark ganization received less than fair marke ds, other assets, or services received:	ket value t value ir	of 1	
(a)	ansaction or sharing arrai	ngement, sh	ow in column (d) the value of the god (c)	ds, other assets, or services received: (d)			
Line no.	Amount involved	Name of	noncharitable exempt organization	Description of transfers, transactions, and sh	aring arrar	igeme n t	s
N/A							
				API			
			IBLIC	> () (
				, —			
			121				
			1110-				
			70			_	
		\	<u> </u>				
52a Is the	organization directly or in	ndirectly affil	iated with, or related to, one or more	tax-exempt organizations on 527?	- [] v.	s X	. M
	s,' complete the following	· ·	ier than section 501(c)(5)) or in section	011 527 7		s <u>n</u>	No
	(a)		(b)	(c) Description of relations			
	Name of organization		Type of organization	Description of relations	ship		
N/A							
		-					
					-		
						•	
	 						
						-	
							
BAA				Schedule A (Form	990 or 9	90-EZ	2005

2005

FEDERAL STATEMENTS

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GIRL SCOUT COUNCIL OF CUMBERLAND VALLEY

62-0589380

STATEMENT 1 FORM 990, PART I, LINE 8 **NET GAIN (LOSS) FROM NONINVENTORY SALES**

PUBLICLY TRADED SECURITIES

GROSS SALES PRICE: COST OR OTHER BASIS:

2,676,666. 2,791,089.

TOTAL GAIN (LOSS) PUBLICLY TRADED SECURITIES \$ -114,423.

OTHER ASSETS

DESCRIPTION: DATE ACQUIRED:

HOW ACQUIRED: DATE SOLD: TO WHOM SOLD:

DESCRIPTION:

DATE ACQUIRED:

GROSS SALES PRICE: COST OR OTHER BASIS:

DEPRECIATION:

SYCAMORE BLDG. & EQUIP. VARIOUS

PURCHASE VARIOUS

115,074. 42,103. 37,655.

GAIN (LOSS) 110,626.

WALLING BLDG. & EQUIP. 116,4381C COPY 136,4381C COPY VARIOUS **PURCHASE** VARIOUS

HOW ACQUIRED: DATE SÕLD: TO WHOM SOLD: GROSS SALES PRICE:

COST OR OTHER BASIS: DEPRECIATION:

DESCRIPTION: DATE ACQUIRED: HOW ACQUIRED: DATE SOLD: TO WHOM SOLD: GROSS SALES PRICE: COST OR OTHER BASIS: DEPRECIATION:

NNASSIE LEASE TERMINATED

10/01/1960 **PURCHASE** 2/01/2006

> 0. 304,133. 271,115.

GAIN (LOSS) -33,018.

GAIN (LOSS) 109,225.

TOTAL GAIN (LOSS) OTHER ASSETS \$ 186,833.

TOTAL NET GAIN (LOSS) FROM NONINVENTORY SALES \$

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GIRL SCOUT COUNCIL OF CUMBERLAND VALLEY

62-0589380

STATEMENT 2
FORM 990, PART I, LINE 9
NET INCOME (LOSS) FROM SPECIAL EVENTS

SPECIAL EVENTS		GROSS RECEIPTS	LESS CONTRI- BUTIONS	GROSS REVENUE	LESS DIRECT EXPENSES	NET INCOME (LOSS)
QSP EVENT GOLD AWARD LUNCHEON GOLF TOURNAMENT	TOTAL	161,639. 147,351. 56,116. \$ 365,106.	0. 0. 0. \$ 0.	161,639. 147,351. 56,116. \$ 365,106.	136,959. 26,685. 16,826. \$ 180,470.	24,680. 120,666. 39,290. \$ 184,636.

STATEMENT 3 FORM 990, PART I, LINE 10 GROSS PROFIT (LOSS) FROM SALES OF INVENTORY

COOKIE INCOME. NUTS & CANDY INCOME. RETAIL SHOP INCOME. TRADING POST INCOME.	\$	5,173,205. 182,990. 445,538. 5,810.
GROSS SALES LESS RETURNS & ALLOWANCES NET SALES LESS COST OF GOODS SOLD GROSS PROFIT FROM SALES OF INVENTORY	\$ \$	5,807,543. 0. 5,807,543. 2,790,447. 3,017,096.
STATEMENT 4		

STATEMENT 4 FORM 990, PART I, LINE 20 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

UNREALIZED GAIN ON INVESTMENTS. \$ 344,950 TOTAL \$ 344,950

STATEMENT 5 FORM 990, PART II, LINE 23 SPECIFIC ASSISTANCE TO INDIVIDUALS

SCHOLARSHIPS & FINANCIAL AID. \$ 59,818.
TOTAL \$ 59,818.

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GIRL SCOUT COUNCIL OF CUMBERLAND VALLEY

62-0589380

STATEMENT 6 FORM 990, PART II, LINE 43 OTHER EXPENSES

	(A)	(B) PROGRAM	(C) MANAGEMENT	(D)
	TOTAL	SERVICES	& GENERAL	FUNDRAISING
AWARDS & GIFTS BAD DEBTS	29,385. 9,425.	26,253. 6,960.	279. 679.	2,853. 1,786.
BANK FEES CAPITAL BUDGET R&M INSURANCE	8,112. 55,105. 102,742.	6,921. 55,105. 87,840.	83. 6,910.	1,108. 7,992.
MEMBERSHIP DUES MISCELLANEOUS	7,419. 1,435.	4,910. 1,224.	1,520. 15.	989. 196.
PROFESSIONAL FEES PROGRAM CONSULTANTS	46,102. 66,132.	40,065. 63,167.	3,558. 1,536.	2,479. 1,429.
TRUST FUND MGMT. FEE	44,202.		44,202.	\$ 20,138.
PROGRAM CONSULTANTS RECRUITING	66,132. 9,561.		1,536. 98.	1,429

STATEMENT 7 FORM 990 , PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO PROVIDE PROGRAMS FOR YOUNG GIRLS IN THE MIDDLE THINKS EE AND SOUTHERN KENTUCKY AREA IN ORDER TO TEACH MORAL VALUES AND DEVELOP SELF CONFIDENCE.

STATEMENT 8
FORM 990, PART III, LINE A
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION

GRANTS AND SERVICE ALLOCATIONS EXPENSES

THE PROGRAMS PROVIDED BY THE CUMBERLAND VALLEY GIRL SCOUTS HELP YOUNG GIRLS FROM ALL OVER MIDDLE TENNESSEE AND SOUTHERN KENTUCKY DEVELOP SELF-CONFIDENCE AND MORAL CHARACTER THROUGH VARIOUS CHALLENGING AND EXCITING ACTIVITIES. THE CUMBERLAND VALLEY GIRL SCOUTS PROVIDES PROGRAMS FOR 24,000 GIRLS IN THE AREA, WITH HELP FROM OVER 7,000 WOMEN LEADERS AND VOLUNTEERS.

4,108,672.

INCLUDES FOREIGN GRANTS: NO

\$ 0. \$4,108,672.

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GIRL SCOUT COUNCIL OF CUMBERLAND VALLEY

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STATEMENT 9 FORM 990, PART IV, LINE 54 INVESTMENTS - SECURITIES

CORPORATE STOCKS	VALUATION METHOD AMOUNT
COMMON STOCKS AND STOCK FUNDS	MARKET VALUE \$ 3,801,302.
	TOTAL \$ 3,801,302.
CORPORATE BONDS	VALUATION METHOD AMOUNT
CORPORATE BONDS AND BOND FUNDS	MARKET VALUE 1,350,449.
	TOTAL \$ 1,350,449.
OTHER SECURITIES	VALUATION METHOD AMOUNT
SHORT TERM INVESTMENTS	MARKET VALUE 404,619.
	TOTAL \$ 404,619.

OTHER SECURITIES		METHOD	AMOUNT
SHORT TERM INVESTMENTS		MARKET VALUE	404,619.
		TOTAL	\$ 404,619.
	TOTAL IN ES	TMENTS - SECURITIES	\$ 5,556,370.
STATEMENT 10 FORM 990, PART IV, LINE 55B INVESTMENTS - LAND, BUILDINGS, AND E	QUIPMENT		
CATEGORY	BAS	ACCUM. IS DEPREC.	BOOK VALUE
MACHINERY AND EQUIPMENT BUILDINGS IMPROVEMENTS LAND	8,194 763 1,079	7,439. \$ 1,565,483. 4,792. 3,605,592. 3,860. 747,910. 9,504.	4,589,200. 15,950. 1,079,504.
	TOTAL $\frac{$11,71}{}$	5,595. \$ 5,918,985.	\$ 5,796,610.

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GIRL SCOUT COUNCIL OF CUMBERLAND VALLEY

62-0589380

STATEMENT 11 FORM 990, PART IV, LINE 64B **MORTGAGES AND OTHER NOTES PAYABLE**

OTHER NOTES PAYABLE

LENDER'S NAME: DATE OF NOTE: MATURITY DATE:

REPAYMENT TERMS: SECURITY PROVIDED:

BALANCE DUE:

ORIGINAL AMOUNT:

TOYOTA FINANCIAL SERVICES

8/26/2004 10/10/2007

MONTHLY PMTS OF \$817.11

TOYOTA HIGHLANDER

29,416.

9,805.

9,805. TOTAL \$

STATEMENT 12 FORM 990, PART IV, LINE 65 OTHER LIABILITIES

CUSTODIAL FUNDS.....

29,<u>068.</u> TOTAL \$ 29,068.

SPECIAL EVENT IN-KIND REVERUE

61<u>5.</u> TOTAL \$ 615.

STATEMENT 14 FORM 990, PART IV-B, LINE D(2) OTHER AMOUNTS

SPECIAL EVENT IN-KIND EXPENSES.

TOTAL \$

STATEMENT 15 FORM 990, PART V-A LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED

COMPEN-SATION EBP & DC

CONTRI-BUTION TO ACCOUNT/

EXPENSE

AGENIA CLARK

PRESIDENT/CEO \$ 40

188,990. \$ 10,266. \$

0.

BRENTWOOD, TN

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GIRL SCOUT COUNCIL OF CUMBERLAND VALLEY

62-0589380

STATEMENT 15 (CONTINUED) FORM 990, PART V-A LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
DEB VARALLO	MEMBER-AT-LARGE \$	0.	\$ 0.	\$ 0.
NASHVILLE, TN	ı			
STEVE HORRELL	CHAIR	0.	0.	0.
NASHVILLE, TN	1			
CONNIE CIGARRAN	SECRETARY 1	0.	0.	0.
NASHVILLE, TN	1			
ANNA LETCHER	3RD VICE CHAIR	0.	0.	0.
NASHVILLE, TN	1			
DR. BO THOMAS	1ST VICE CHAIR	_\J.	0.	0.
NASHVILLE, TN		UP1		
CLAIRE GULMI	T ALASUL ER	O , 0.	0.	0.
NASHVILLE, TN	JALIU 1			
CRISTINA OAKELEY ALLEN	1ST VICE CHAIR 1 TABASULER 1 MEMBER-AT-LARGE 1	0.	0.	0.
NASHVILLE, TN	1			
RICKIE HALL	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			
MARGARET BEHM	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			
MIMI BLISS	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			
CHERYL CHUBBS	MEMBER-AT-LARGE	0.	0.	0.
BRENTWOOD, TN	1			
CRAIG CLARK	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			

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GIRL SCOUT COUNCIL OF CUMBERLAND VALLEY

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STATEMENT 15 (CONTINUED) FORM 990, PART V-A LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
DR. CAROL CRESWELL-BETSCH	MEMBER-AT-LARGE \$	0.	\$ 0.	\$ 0.
NASHVILLE, TN	1			
MARGARET O. DOLAN	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			
LEE ANN INGRAM	MEMBER-AT-LARGE	0.	0.	0.
FRANKLIN, TN	1			
MELISSA FRIST	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			
FRANK HAMMER	MEMBER-AT-LARGE		0.	0.
NASHVILLE, TN	1 MEMBER-AT-LALGE	7PY		
DONNA RICHARDS	MEMBER-AT-LAL GET	0.	0.	0.
FRANKLIN, TN	MEMBER-AT-LARGE			
LUCILE HOUSEWORTH	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			
JEFF HAYNES	MEMBER-AT-LARGE	0.	0.	0.
BRENTWOOD, TN	1			
SUSAN HUGGINS	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			
KIMBERLY JACKSON	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			
KELVIN JONES	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			
KEN KRAFT	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			

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GIRL SCOUT COUNCIL OF CUMBERLAND VALLEY

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STATEMENT 15 (CONTINUED) FORM 990, PART V-A LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
MICHELLE MCWHORTER	MEMBER-AT-LARGE 1	\$ 0.	\$ 0.	\$ 0.
NASHVILLE, TN	1			
RITA MITCHELL	2ND VICE CHAIR	0.	0.	0.
NASHVILLE, TN	1			
PAULETTE JACKSON	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	I			
ART REBROVICK	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			
ROCIO RODRIGUEZ	MEMBER-AT-LARGE		0.	0.
NASHVILLE, TN	MEMBER-AT-LARGE MEMBER-AT-LARGE MEMBER-AT-LARGE 1	NPY		
TOM LEE	MEMBER-AT-LALGE	O , 0.	0.	0.
NASHVILLE, TN	BLIU 1			
NANCY VINCENT	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			
LATRISHA STEWART	MEMBER-AT-LARGE	0.	0.	0.
NASHVILLE, TN	1			
JENNIFER CHALOS	BOARD INTERN	0.	0.	0.
NASHVILLE, TN	1			
MEGAN BARNETT	SR. BD. MEMBER	0.	0.	0.
CLARKSVILLE, TN	1			
BROOK JOHNSON	SR. BD. MEMBER	0.	0.	0.
NASHVILLE, TN	1			
REBEKKAH LAMBERTH	SR. BD. MEMBER	0.	0.	0.
GOODLETTSVILLE, TN	1			

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GIRL SCOUT COUNCIL OF CUMBERLAND VALLEY

62-0589380

STATEMENT 15 (CONTINUED) FORM 990, PART V-A LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER	
PAM SELF	COO 40	\$ 95,384.	\$ 7,936.	\$ 0.	
NASHVILLE, TN	40				
LIZ SWEITZER	SR. BD. MEMBER	0.	0.	0.	
FRANKLIN, TN	1				
BELINDA BRACEY	DIRECTOR OF HR	57,044.	6,686.	0.	
NASHVILLE, TN	40				
	TOTAL	\$ 341,418.	\$ 24,888.	\$ 0.	

STATEMENT 16 FORM 990, PART VIII RELATIONSHIP OF ACTIVITIES TO THE ACCOMPLISHMENT OF EXEMINIPOSES

EXPLANATION OF ACTIVITIES

93 (A) TO PROVIDE TRAINING, EDUCATIONAL AND RECREATIONAL ACTIVITIES, PROGRAM RESOURCE MATERIALS, AND TRAINID VOLUNTEER LEADERS TO SERVE BOTH MAINSTREAM GIRLS AND GIRLS WILH SECOLAL NEEDS.

TO PROMOTE THE DEVELOPMENT OF CAREER INTERESTS, SKILLS, AND WORK HABITS (GOAL SETTING, DECISION MAKING, ACCURACY, PUNCTUALITY, MEETING THE PUBLIC, ETC.)

STATEMENT 17 SCHEDULE A, PART IV-A, LINE 22 OTHER INCOME

DESCRIPTION		 A) 2004	(B	3) 2003	(C)	2002	(D)	2001	(E) TOTAL
MISCELLANEOUS INCOME		\$ 20,323.	\$	21,500.	\$	0.	\$	0.	\$	41,823.
	TOTAL	\$ 20,323.	\$	21,500.	\$	0.	\$	0.	\$	41,823.

2005

FEDERAL SUPPLEMENTAL INFORMATION

PAGE 1

GIRL SCOUT COUNCIL OF CUMBERLAND VALLEY

62-0589380

990 PART II, LINE 42 DEPRECIATION EXPENSE

LAND, BUILDING AND EQUIPMENT ARE RECORDED AT COST AT THE DATE OF PURCHASE OR FAIR MARKET VALUE AT DATE OF GIFT. DEPRECIATION OF BUILDING AND EQUIPMENT IS PROVIDED OVER THE ESTIMATED USEFUL LIVES OF THE RESPECTIVE ASSETS (RANGING FROM THREE TO THIRTY YEARS) ON A STRAIGHT-LINE BASIS.

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