			EXTENDED TO AUGUST 15, 20		OMP No. 1545.0047
	Q	90	Return of Organization Exempt From		OMB No. 1545-0047
For	n J	30	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (
Depa	rtment	of the Treasury	Do not enter social security numbers on this form as it may Go to www.irs.gov/Form990 for instructions and the late	-	Open to Public
		enue Service		SEP 30, 2023	Inspection
-	Check if		f organization	D Employer identific	ation number
D (pplicab		SCOUTS OF CALIFORNIA'S		
	Addr		RAL COAST		
	Name	ge Doing b	usiness as	94-156716	52
	Initial returr	v	and street (or P.O. box if mail is not delivered to street address) Room/su	uite E Telephone number	
	Final	V	0 MERRITT STREET 110	831-633-4	
_	termi ated	City or t	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	10,561,574.
			ROVILLE, CA 95012	H(a) Is this a group ret	
	Appli tion pend	^{ca-} F Name a	nd address of principal officer: TAMMIE HELMUTH	for subordinates?	
		SAME	AS C ABOVE	H(b) Are all subordinates inc	
			X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or 501(c)(3) ORG	<i>'</i>	ist. See instructions
	Nebs			H(c) Group exemption fear of formation: 1963	
	art I				
	1		be the organization's mission or most significant activities: GIRL SCO	UTTNG BUTLDS	TRUS OF
JCe	l .	COURAGE	CONFIDENCE & CHARACTER, WHO MAKE TH	E WORLD A BETT	TER PLACE.
rnai	2	Check this bo			
ovel	3		ting members of the governing body (Part VI, line 1a)		14
Ğ	4		lependent voting members of the governing body (Part VI, line 1b)		14
es &	5		of individuals employed in calendar year 2022 (Part V, line 2a)		88
Activities & Governance	6		of volunteers (estimate if necessary)		4600
Acti	7 a		d business revenue from Part VIII, column (C), line 12		0.
_	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11		0.
				Prior Year	Current Year
an	8		and grants (Part VIII, line 1h)	980,271.	897,737.
Revenue	9	•	ce revenue (Part VIII, line 2g)	257,599.	179,013.
Re			come (Part VIII, column (A), lines 3, 4, and 7d)	2,818,985. 3,402,948.	169,023. 4,220,732.
	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	7,459,803.	5,466,505.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	22,263.	12,774.
			milar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
			to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10)	3,814,803.	4,052,464.
Expenses	16a	Professional f	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) <u>667,488.</u>	0.	0.
per	b	Total fundrais	ing expenses (Part IX, column (D), line 25) $667,488.$		
ы	17	Other expens	es (Part IX, column (A), lines 11a-11d, 11f-24e)	1,970,557.	2,134,606.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,807,623.	6,199,844.
	19		expenses. Subtract line 18 from line 12	1,652,180.	-733,339.
or ces				Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	7,636,801.	7,376,946.
t As Id Bi	21	Total liabilities	(Part X, line 26)	528,222.	778,701.
Fur	22		fund balances. Subtract line 21 from line 20	7,108,579.	6,598,245.
Pa	art II	•			
			I declare that I have examined this return, including accompanying schedules and sta		knowledge and belief, it is
true	, corre	ct, and complete	. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.	
		1			

	Cimpeture of officer			Data							
Sign	Signature of officer			Date							
	TAMMIE HELMUTH, CEO										
	Type or print name and title										
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN							
Paid	CHRISLEY N. REED, CPA			self-employed P00025230							
Preparer	Firm's name MCGOWAN GUNTERMAN			Firm's EIN 95-3680171							
Use Only	Firm's address 200 E CARRILLO ST										
	SANTA BARBARA, CA	93101-7141		Phone no. (805) 962-9175							
May the IF	RS discuss this return with the preparer shown abo	ove? See instructions		X Yes No							
232001 12-1	322001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)										

_	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	GIRL SCOUTING BUILDS GIRLS OF COURAGE, CONFIDENCE & CHARACTER, WHO MAKE THE WORLD A BETTER PLACE.
	MARE 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? Yes X No
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
1	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 \$ 4,711,516. including grants of \$ 12,774.) (Revenue \$ 4,422,519.
та	PROGRAMS: UNDER THE GIRL SCOUT LEADERSHIP EXPERIENCE, GIRL SCOUTS
	DISCOVER, CONNECT AND TAKE ACTION THROUGH GIRL-LED, COOPERATIVE, LEARN
	BY DOING EXPERIENCES. PROGRAMS INCLUDE ARTS AND CULTURE; BUSINESS AND
	FINANCIAL LITERACY; ENVIRONMENT AND OUTDOOR ADVENTURE; SCIENCE,
	TECHNOLOGY, ENGINEERING AND MATHEMATICS (STEM); AND WELLNESS AND
	HEALTHY LIVING. GIRLS DEVELOP LEADERSHIP SKILLS AS THEY DISCOVER
	THEMSELVES WHILE EXPLORING THEIR INTERESTS, AND CONNECT WITH OTHERS TO
	TAKE POSITIVE ACTION IN THEIR COMMUNITIES. LEADERSHIP EXCELLENCE IS
	REFLECTED IN THE PRESTIGIOUS GIRL SCOUT GOLD, SILVER AND BRONZE AWARDS
	ACHIEVED, AS WELL AS THE SIGNIFICANT WAY THEY GIVE BACK TO THEIR
	COMMUNITY THROUGH SERVICE PROJECTS. GIRLS DEVELOP IMPORTANT BUSINESS
	AND FINANCIAL LITERACY SKILLS THROUGH THE GIRLS SCOUT COOKIE AND FALL
łb	(Code:) (Expenses \$ including grants of \$) (Revenue \$) MEMBERSHIP: INCREASING GIRL AND VOLUNTEER MEMBERSHIP IS A TOP PRIORITY
	OF OUR ORGANIZATION. GSCCC CURRENTLY SERVES OVER 5,700 GIRLS AND 4,300
	ADULT MEMBERS IN SIX COUNTIES - VENTURA, SANTA BARBARA, SAN LUIS
	OBISPO, SAN BENITO, MONTEREY, AND SANTA CRUZ - GIRL MEMBERSHIP IS
	CONTINUING TO GROW AND RECOVER FROM THE PANDEMIC. THE COUNCIL IS
	FOCUSED ON ENSURING THE MEMBERSHIP WE SERVE IS REFLECTIVE OF THE
	DEMOGRAPHICS IN OUR COUNCIL REGION. WE PROVIDE FINANCIAL ASSISTANCE
	AND ARE GROWING OUR SUPPORT FOR UNDERSERVED GIRLS THROUGH STRATEGIC
	PARTNERSHIPS.
С	(Code:) (Expenses \$ including grants of \$) (Revenue \$
	VOLUNTEER DEVELOPMENT: WITH 4,280 ADULT VOLUNTEERS TO DELIVER GIRL
	SCOUT PROGRAMS TO OUR GIRL MEMBERSHIP, VOLUNTEER DEVELOPMENT IS
	CRITICAL TO OUR SUCCESS IN MEETING OUR MISSION. OUR VOLUNTEER GROUP
	INCLUDES COLLEGE STUDENTS, RETIREES, PROFESSIONAL MEN AND WOMEN,
	PARENTS, AND GIRL SCOUT ALUMNAE. THESE VOLUNTEERS GO THROUGH TRAINING
	IN ORDER TO COACH AND TEACH GIRLS AND OTHER VOLUNTEERS AT THE TROOP,
	SERVICE UNIT, OR COUNCIL LEVEL. TRAINING IS OFFERED IN PERSON OR VIA
	WEBINAR, ON TOPICS INCLUDING AN INTRODUCTION TO GIRL SCOUTING, TROOP
	LEADER INSTRUCTION, OUTDOOR TROOP CAMPING, OUTDOOR SKILLS, AND COOKIE
	PROGRAM. ADDITIONALLY, TRAINING IS AVAILABLE FOR SERVICE UNIT
	MANAGERS, LEARNING FACILITATORS, AND PROGRAM AIDES. IN ADDITION TO
	TRAINING, VOLUNTEER DEVELOPMENT INCLUDES RECRUITING, INTERVIEWING, AND
d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
	Total program service expenses 4,711,516.

CENTRAL COAST

Form 990 (2022)

	40	Total program service expenses
--	----	--------------------------------

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Part IV	Cheo	cklist of Required Sch	edules	\$	
Form 990 (2		CENTRAL			
		GIRL SC	OUTS	OF	CALIFORNIA'S

			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		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <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			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
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		Х
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	Х	
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X X
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		<u>x</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	144		
U	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. 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			
	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		<u>X</u>
	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	<u>_</u>		v
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>

 Form 990 (2022)
 CENTRAL
 COAST

 Part IV
 Checklist of Required Schedules (continued)

GIRL SCOUTS OF CALIFORNIA'S CENTRAL COAST

			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	23	x						
24.0	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	21						
248	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete								
		24a		x					
h	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		- 23					
		240							
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c							
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d							
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit								
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X					
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and								
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete								
~~	Schedule L, Part I	25b		X					
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current								
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			x					
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26							
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	27		x					
28	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>								
20	instructions for applicable filing thresholds, conditions, and exceptions):								
-	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If								
a	"Yes," complete Schedule L, Part IV								
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV								
	• A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>								
-	"Yes," complete Schedule L, Part IV								
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		X					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation								
	contributions? If "Yes," complete Schedule M	30		x					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X					
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete								
	Schedule N, Part II	32		X					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations								
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х					
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and								
	Part V, line 1	34	Х						
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х					
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?								
	Note: All Form 990 filers are required to complete Schedule O	38	Х						
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance								
	Check if Schedule O contains a response or note to any line in this Part V								
			Yes	No					
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 40								
b									
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		х						
	(gambling) winnings to prize winners?	1c	Δ						

Form	990 (2022) CENTRAL COAST 94-1567	162	Р	age 5					
Pa	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 88								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х					
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)?								
b	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	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?								
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х					
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		Х					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7c		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d								
	 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 								
f	• • • • • • • • • • • • • • • • • • •								
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8									
	sponsoring organization have excess business holdings at any time during the year?								
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:								
а	Gross income from members or shareholders 11a								
	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							
b	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.								
а	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 13b								
с	Enter the amount of reserves on hand 13c								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		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, or any disqualified or other person engage in any activities								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Yes," complete Form 6069.								

GIRL SCOUTS OF CALIFORNIA'S CENTRAL COAST

X

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			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 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 O.										
b	Enter the number of voting members included on line 1a, above, who are independent 1b 14										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
	officer, director, trustee, or key employee?	2		Х							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, trustees, or key employees to a management company or other person?										
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?										
5											
6											
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
	more members of the governing body?	7a		X							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
	persons other than the governing body?	7b		X							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	The governing body?	8a	Х								
b	Each committee with authority to act on behalf of the governing body?	8b	Х								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes," provide the names and addresses 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	Х								
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		х								
	and branches to ensure their operations are consistent with the organization's exempt purposes?										
11a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?										
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	12a	Х								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	on Schedule O how this was done	12c	X								
13	Did the organization have a written whistleblower policy?	13	X								
14	Did the organization have a written document retention and destruction policy?	14	Х								
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?										
	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			v							
	taxable entity during the year?	16a		X							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	101									
<u> </u>	exempt status with respect to such arrangements?	16b									
	tion C. Disclosure										
17 10	List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an experiation to make its Forma 1022 (1004 or 1024 A, if applicable), 000, and 000 T (section F01(c)/2)	0.00	N 0:								
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 for public inspection. Indicate how you made these available. Check all that apply	is only	i avalla	aule							
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O)										
10		dfine									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	u inal	ICIAI								
20	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 TAMMIE HELMUTH , CEO - 800-822-2427										
	1500 PALMA DRIVE, SUITE 110, VENTURA, CA 93003										

Form 990 (2022)

Form 990 (2022)	CENTRAL	COAST				94-1
Part VII	Compensation	of Officers,	Directors,	Trustees,	Key Employees,	Highest	Compensated
		all the states are stated		- 4			

Employees, and Independent Contractors

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-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.

(A)	(B)			(0	C)			(D)	(E)	(F)				
Name and title	Average	ge Position (do not check more than one				than i	one	Reportable	Reportable	Estimated				
	hours per	box	, unle	ss pe	rson i	is bot	h an	compensation	compensation	amount of				
	week		er an	u a u	recio	or/trus	lee)	from	from related	other				
	(list any	Individual trustee or director						the	organizations	compensation from the				
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	organization				
	organizations	truste	al trus		yee	mper		1099-NEC)	1000 1120)	and related				
	below	id ual	nstitutional trustee	л.	Key employee	Highest compensated employee	er	,		organizations				
	line)	Indiv	Instit	Officer	Key e	High em pl	Former							
(1) TAMMIE HELMUTH	40.00													
CEO				Х				203,611.	0.	7,647.				
(2) ALAN BEANS	40.00													
CFO				Х				94,817.	0.	8,764.				
(3) CLARISSA ANN PAZ	40.00													
CPCO				Х				44,423.	0.	0.				
(4) CRYSTAL EVANS	2.00													
VICE CHAIR		Х		Х				0.	0.	0.				
(5) SUSAN MURATA	2.00													
BOARD MEMBER		Х						0.	0.	0.				
(6) SUE ROTH	2.00													
BOARD MEMBER		Х						0.	0.	0.				
(7) DANIELLE MCCAFFERY	2.00													
BOARD MEMBER		Х						0.	0.	0.				
(8) NATALIE MUSSI-KELLER	2.00													
BOARD MEMBER		Х						0.	0.	0.				
(9) BETTE GRACE	2.00													
TREASURER		Х		Х				0.	0.	0.				
(10) RAINIA KNAPP	2.00													
CHAIR		Х		Х				0.	0.	0.				
(11) AMY FLEISCHER	2.00													
BOARD MEMBER		Х						0.	0.	0.				
(12) MARIA VENTURA	2.00													
SECRETARY		Х		Х				0.	0.	0.				
(13) VERONICA RODARTE	2.00													
BOARD MEMBER		Х						0.	0.	0.				
(14) KATHY JOHN	2.00									_				
BOARD MEMBER		Х						0.	0.	0.				
(15) YVONNE LANG	2.00									_				
BOARD MEMBER		Х						0.	0.	0.				
(16) SARAH ZIFF	2.00								-	-				
BOARD MEMBER		X						0.	0.	0.				
(17) DYLAN ZULUETA	2.00									<u> </u>				
BOARD MEMBER		X						0.	0.	0.				

Form 990 (2022) CENTRAL (COAST								94-15	67	162	P	age 8
Part VII Section A. Officers, Directors, Trus		ploy	vees			ighe	st C		es (continued)				
(A) Name and title	(B) (C) Average hours per week veek					than is bot	h an	(D) Reportable compensation from	(E) Reportable compensatior from related	ו	(F Estima amour oth		
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS 1099-NEC)		fr org and	pensa om th anizat d relat nizati	e ion ed
(18) TRACIE HUNTER BOARD MEMBER	2.00	x						0.		0.			0.
(19) CELINA ZACARIAS	2.00												
BOARD MEMBER											0.		
								342,851.		0.	1	6,4	11
1b Subtotal c Total from continuation sheets to Part VI								0.		0.	-	0,=	$\frac{11}{0}$
d Total (add lines 1b and 1c)								342,851.		0.	1	6,4	11.
2 Total number of individuals (including but n compensation from the organization	ot limited to th	iose	liste	ed a	bov	e) wł	10 r	received more than \$100	,000 of reportable	Э			1
												Yes	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s											3		Х
4 For any individual listed on line 1a, is the su	im of reportab	le co	omp	ensa	atior	n and	d ot	her compensation from					
and related organizations greater than \$150Did any person listed on line 1a receive or a									idual for services		4	X	
rendered to the organization? If "Yes," com	-				-			-			5		Х
Section B. Independent Contractors 1 Complete this table for your five highest co	moonsatod in		ando	ont c	ont	racto	vrc 1	that received more than	\$100,000 of com	none	ation f	rom	
the organization. Report compensation for	-	-								pense			
(A) Name and business	address							(B) Description of s	ervices	С	(C ompei		n
SARALUX, LLC 6 ALDIN LANE, LEVITTOWN,	NY 1175	56						IT			10	9,4	50.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 1

9

Form 990 (2022) CENTRAL
Part VIII Statement of Revenue

GIRL SCOUTS OF CALIFORNIA'S CENTRAL COAST

Ра	rt V						
		Check if Schedule O contains a response of	or note to any lin	ie in this Part VIII … (A)	(B)	(C)	[]
				(A) Total revenue	(D) Related or exempt	Unrelated	Revenue excluded
				Total revenue		business revenue	
							sections 512 - 514
nts nts	1 ;	a Federated campaigns 1a					
àrai our	1	b Membership dues 1b					
Ϋ́, Ϋ́		c Fundraising events 1c	4,498.				
ar /		d Related organizations 1d	,				
s, G		e Government grants (contributions) 1 e	229,345.				
Sil		f All other contributions, gifts, grants, and					
uti			663 894				
0t bt		similar amounts not included above 1f	663,894.				
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contributions included in lines 1a-1f	10,965.	008 838			
a		h Total. Add lines 1a-1f		897,737.			
			Business Code				
e	2 8	a PROGRAM ACTIVITIES	900099	179,013.	179,013.		
ervi	I	b					
Sul		c					
Program Service Revenue		d					
B		e					
Pre	-	f All other program service revenue					
		g Total. Add lines 2a-2f		179,013.			
	3	Investment income (including dividends, intere					
	3			00 220			00 220
		other similar amounts)		90,330.			90,330.
	4	Income from investment of tax-exempt bond p	- F				
	5	Royalties					
		(i) Real	(ii) Personal				
	6 8	a Gross rents 6a 99,744.					
	1	b Less: rental expenses 6b 0.					
		c Rental income or (loss) 6c 99,744.					
		d Net rental income or (loss)		99,744.			99,744.
	7	a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 1,088,873.					
		b Less: cost or other basis					
ē		and sales expenses 7b 1,009,576.	604.				
Revenue							
ev				79 602			79 602
er B		d Net gain or (loss)		78,693.			78,693.
Othe	8 8	a Gross income from fundraising events (not					
ò		including \$ 4,498. of					
		contributions reported on line 1c). See					
		Part IV, line 18	40,199.				
	1	b Less: direct expenses 8b	162,717.				
		c Net income or (loss) from fundraising events		-122,518.			-122,518.
		a Gross income from gaming activities. See					
		Part IV, line 19 9a					
		b Less: direct expenses					
		c Net income or (loss) from gaming activities					
	10 8	a Gross sales of inventory, less returns	0 165 670				
		and allowances 10a					
		b Less: cost of goods sold 10b					
		c Net income or (loss) from sales of inventory		4,243,506.	4,243,506.		
S			Business Code				
e	11 :	a					
ane		b					
ell: eve		c					
Miscellaneous Revenue		d All other revenue					
Σ		e Total. Add lines 11a-11d					
				5,466,505.	4,422,519.	0.	146,249.
	12	Total revenue. See instructions		5,400,505.	±,±44,019.	U. 0.	Eorm QQ (2022)

232009 12-13-22

Form 990 (2022) CENTRAL COAST
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 respon-	se or note to any line in	this Part IX		
Do not include amounts reported on lines 6b, 7b, 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	12,774.	12,774.		
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,	459,095.	69,775.	146,248.	243,072
trustees, and key employees 6 Compensation not included above to disqualified	£35,055.	05,115.	140,240.	245,0720
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)				
	2,494,532.	2,114,809.	191,928.	187,795.
 7 Other salaries and wages 8 Pension plan accruals and contributions (include 		2,114,000.		101,199
section 401(k) and 403(b) employer contributions)	187,000.	139,005.	20,937.	27 058
F	44,312.	32,129.	11,552.	27,058. 631.
	867,525.	644,868.	97,129.	125,528
10 Payroll taxes	007,525.	011,000.	57,125.	125,520
11 Fees for services (nonemployees):				
a Management	561.		561.	
b Legal	22,500.		22,500.	
c Accounting	22,500.		22,500.	
 d Lobbying e Professional fundraising services. See Part IV, line 17 				
f Investment management fees	23,125.		23,125.	
g Other. (If line 11g amount exceeds 10% of line 25,	2372231		2372231	
column (A), amount, list line 11g expenses on Sch 0.)	4,726.	4,726.		
12 Advertising and promotion	203,009.	201,008.	1,687.	314.
	101,774.	83,215.	16,044.	2,515.
· · · · · · · · · · · · · · · · · · ·	318,235.	237,127.	35,002.	46,106.
5, H	510/2551	23772274	5570021	10,100
F	636,758.	480,885.	152,192.	3,681.
	106,209.	94,749.	5,036.	6,424.
17 Travel18 Payments of travel or entertainment expenses	20072001	5 1 / / 25 0		•,121
for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest 21 Payments to affiliates				
22 Depreciation, depletion, and amortization	161,015.	130,267.	30,748.	
23 Insurance	105,531.	71,039.	34,492.	
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.)				
a GIRLS SCOUT PROGRAM EXP	248,012.	248,012.		
b REPAIRS AND MAINTENANCE	74,116.	53,425.	13,344.	7,347.
c VOLUNTEER & STAFF DEVEL	70,000.	58,915.	7,700.	3,385.
d PRINTING AND PUBLICATIO	59,035.	34,788.	10,615.	13,632.
e All other expenses	,			
25 Total functional expenses. Add lines 1 through 24e	6,199,844.	4,711,516.	820,840.	667,488.
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)				
Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2022

GIRL	SCOUTS	OF	CALIFORNIA'S

94-1567162 Page 11

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,042.	1	2,457.
	2	Savings and temporary cash investments			1,707,271.	2	1,289,214.
	3	Pledges and grants receivable, net			10,000.	3	42,702.
	4	Accounts receivable, net			10,503.	4	273,583.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	antial	contributor, or 35%			
		controlled entity or family member of any of thes	e pers	ons		5	
	6	Loans and other receivables from other disquali	fied pe	rsons (as defined			
		under section 4958(f)(1)), and persons described	d in see	ction 4958(c)(3)(B)		6	
its	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			161,980.	8	153,477.
A	9				124,599.	9	129,565.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		4,268,519.			
	b	Less: accumulated depreciation	10b	2,581,954.	1,544,110.	10c	1,686,565.
	11	Investments - publicly traded securities			3,975,333.	11	3,535,594.
	12	Investments - other securities. See Part IV, line 1	1		79,748.	12	84,580.
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			22,215.	15	179,209.
	16	Total assets. Add lines 1 through 15 (must equa			7,636,801.	16	7,376,946.
	17	Accounts payable and accrued expenses	389,965.	17	528,278.		
	18	Grants payable	100 055	18			
	19	Deferred revenue			138,257.	19	88,079.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I				21	
ies	22	Loans and other payables to any current or form					
jiit		trustee, key employee, creator or founder, subst					
Liabilities		controlled entity or family member of any of thes	•			22	
_	23	Secured mortgages and notes payable to unrela		F		23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines			0.	05	162,344.
		of Schedule D			528,222.	25	778,701.
	26			e X	520,222.	26	770,701.
es		Organizations that follow FASB ASC 958, che and complete lines 27, 28, 32, and 33.	ck ner	e <u>11</u>			
anc	27	Net assets without donor restrictions			6,780,624.	27	6,437,012.
Bala	28	Net assets with donor restrictions			327,955.	28	161,233.
lpu	20	Organizations that do not follow FASB ASC 9			02775001	20	
Εu		and complete lines 29 through 33.	50, CH				
P.	29	Capital stock or trust principal, or current funds				29	
iets	30	Paid-in or capital surplus, or land, building, or ec				30	
Ass	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			7,108,579.	32	6,598,245.
2	33	Total liabilities and net assets/fund balances			7,636,801.	33	7,376,946.
	00	Total habilities and her assets/junu balances			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	00	6 7 7 5 7 0 7 5 401

Form **990** (2022)

Form 990 (2022)
Part X Balance Sheet CENTRAL COAST

GIRL	SCOUTS	OF	CALIFORNIA'	' S
CENTE	AT. COAS	የጥ		

Form	990 (2022) CENTRAL COAST	94-1	567162	Pag	je 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,466		
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,199		
3	Revenue less expenses. Subtract line 2 from line 1	3	-733		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,108		
5	Net unrealized gains (losses) on investments	5		9,61	
6	Donated services and use of facilities	6	8	3,50	00.
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	4	1,83	32.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	6,598	3,24	45.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d 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 separat	e 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,			
	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 Sch	nedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		

Form **990** (2022)

SCHEDULE A			Dublic Cha						OMB No. 1545-0047
(Form 99	0)	Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section							2022
				47(a)(1) nonexempt cha			or a section		LULL
Department of Internal Rever				ttach to Form 990 or Fo					Open to Public Inspection
	he organizati		-	Form990 for instruction		e latest in	formation.	Employer	r identification number
	ine of gamzati		RAL COAST	CALLFORNIA	0				4-1567162
Part I	Reason			(All organizations must c	omplete t	nis part.) S	See instruction		1 100/101
The organi				(For lines 1 through 12, c					
1 🗂				on of churches described		,			
2	A school des	cribed in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990).)				
3	A hospital or	a cooperative	hospital service org	anization described in s e	ection 170	(b)(1)(A)(i	ii).		
4	A medical res	earch organiz	ation operated in co	njunction with a hospita	describe	d in sectio	on 170(b)(1)(A)(iii). Enter	the hospital's name,
	city, and state								
5	-	-		ollege or university owned	d or opera	ted by a g	overnmental	unit descrit	bed in
6			Complete Part II.)	mental unit described in a	section 1	70(b)(1)(A)	(v)		
7		-	-	antial part of its support f				he general	public described in
•			Complete Part II.)		ionia gov	onnionta		ine general	
8	-			(1)(A)(vi). (Complete Par	t II.)				
9	An agricultura	al research org	ganization described	l in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a	land-grant	college
	or university of	or a non-land-ç	grant college of agric	culture (see instructions).	Enter the	name, cit	y, and state o	f the colleg	je or
37	university:								
10 X				than 33 1/3% of its sup					
				ct to certain exceptions;					
			mplete Part III.)	e (less section 511 tax) fr	om busine	sses acqu	lifed by the o	ganization	alter June 30, 1975.
11				sively to test for public sa	fetv. See	section 50)9(a)(4).		
12	-	-	-	sively for the benefit of, to	•			arry out the	e purposes of one or
	-	-	-	ed in section 509(a)(1) o	-			•	
	lines 12a thro	ugh 12d that	describes the type of	of supporting organizatio	n and con	nplete line	s 12e, 12f, an	d 12g.	
a 🗌	Type I. A su	pporting orga	anization operated, s	supervised, or controlled	by its sup	ported or	ganization(s),	typically by	/ giving
		-		egularly appoint or elect a	a majority	of the dire	ctors or truste	ees of the s	supporting
.	7 ~		complete Part IV, Se						
b 📖				d or controlled in connec			-		-
		•	st complete Part IV,	anization vested in the s	ame perso			age the sup	oponed
c 🗌		. ,	•	organization operated	in connec	tion with.	and functiona	llv integrat	ed with
		-	•	s). You must complete I		,			,
d	Type III no	n-functionally	y integrated. A supp	porting organization oper	ated in co	nnection v	with its suppo	rted organ	ization(s)
	that is not f	unctionally int	tegrated. The organiz	zation generally must sat	tisfy a dist	ribution re	quirement an	d an attent	iveness
	requiremen	t (see instruct	tions). You must cor	nplete Part IV, Sections	A and D	and Part	V.		
e 🗆		•		written determination fro			а Туре I, Туре	II, Type III	
6 E.t.				onally integrated support					
			n about the supporte	ad organization(s)					
	i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed ng document?	(v) Amount o	fmonetary	(vi) Amount of other
	organization			(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)
									<u> </u>
									ļ
Total									

GIRL	SCOUI	'S OF	CALIFORNIA'	S
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		GIUD DC(JOID OF	CALLFORNIA	G	
	A (Form 990) 2022	CENTRAL			94-1567162	Page 2
Part II	Support Schedule f	or Organizat	ions Desc	ribed in Sections	170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)	
	(Complete only if you che	cked the box on	line 5, 7, or 8	of Part I or if the organ	ization failed to qualify under Part III. If the organiza	ation
	fails to qualify under the te	ests listed below	, please comp	olete Part III.)		

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 20	022	(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,							
	a a lumana (f)							
6	Public support. Subtract line 5 from line 4.							
	ction B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 20	022	(f) Total
	Amounts from line 4	(4) 2010		(0) 2020	(4) 2021	(0) 20		(i) Fotda
	Gross income from interest,							
Ŭ	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							
10	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)							
	Total support. Add lines 7 through 10							
12		, (,					
13	First 5 years. If the Form 990 is for the							
80	organization, check this box and sto ction C. Computation of Publ		roontago		<u></u>		<u></u>	<u></u>
-			-					
	Public support percentage for 2022 (14 15		%
	Public support percentage from 202							%
168	33 1/3% support test - 2022. If the							
	stop here. The organization qualifies							
b	33 1/3% support test - 2021. If the							
	and stop here. The organization qua							
17a	10% -facts-and-circumstances tes							
	and if the organization meets the fact			-	-	VI how the	e organizat	tion
	meets the facts-and-circumstances to	-		• • • •	-			
b	10% -facts-and-circumstances tes	-						0% or
	more, and if the organization meets t							
	organization meets the facts-and-circ	umstances test. T	he organization qu	ualifies as a public	ly supported organ	nization		
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17	'b, check this box a	and see ins	structions	L
						~ .		

Schedule A (Form 990) 2022

... . ..

Schedule A (Form 990) 2022 CENTRAL COAST 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 Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 416,089 962,036. 980,271 906,237. 3843900. 579,267. 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 8165678.35742869. 7282628. 7811807. 5540207. 6942549. 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 7861895. 8227896. 6502243. 7922820. 9071915.39586769. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 0. 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 65,455 65,455. amount on line 13 for the year 65,455. 65,455 c Add lines 7a and 7b 39521314 8 Public support. (Subtract line 7c from line 6.) Section B. Total Support **(a)** 2018 (b) 2019 (e) 2022 Calendar year (or fiscal year beginning in) (c) 2020 (d) 2021 (f) Total 7861895 8227896 6502243 7922820 9071915. 39586769. 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, 256,959. 183,982. 226,607 135,492. 190,074 993,114. and income from similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 256,959 226,607. 183,982 135,492. 190,074. 993,114. c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b. whether or not the business is regularly carried on **12** Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 8454503. 6686225. 8058312. 9261989.40579883. 8118854. 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 97.39 **15** Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15 % 96.71 16 16 Public support percentage from 2021 Schedule A, Part III, line 15 % Section D. Computation of Investment Income Percentage 2.4517 17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) % 2.87 18 18 Investment income percentage from 2021 Schedule A, Part III, line 17 % 19a 33 1/3% support tests - 2022. 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 - 2021. 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

GIRL SCOUTS OF CALIFORNIA'S CENTRAL COAST

Yes

No

Schedule A (Form 990) 2022

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

CENTRAL COAST

2

No

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

Z	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.

Section C. T	'ype II Su	pporting C	Organizations
--------------	------------	------------	---------------

Schedule A (Form 990) 2022

			Yes	l
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			Í
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			l
	or management of the supporting organization was vested in the same persons that controlled or managed			I
	the supported organization(s).	1		l
Sec	ction D. All Type III Supporting Organizations			

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

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- c ____ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 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.* 232025 12-09-22

Yes No

GIRL SCOUTS OF CALIFORNIA'S CENTRAL COAST

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ng Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st 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	1 a		
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 integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

	dule A (Form 990) 2022 CENTRAL COAST	(a)(2) Supporting Org	nizotiono	9	4-156/162 Page 7
Par	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(a)(3) Supporting Orga	anizations (continu	ued)	
-	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe			1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	IS	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive	9		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	(:)	(::)	10	(:::)
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	ns	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2018				
b	Excess from 2019				
с	Excess from 2020				
	Excess from 2021				
	Excess from 2022				

Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022	GIRL CENTR			CALIFORNIA'S	94-1567162 Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D,	, 2, 3b, 3c, 4 lines 2 and 3	4b, 4c, 5a 3; Part IV	a, 6, 9a, 9t /, Section	b, 9c, 11a, 11b, and 11c; Par E, lines 1c, 2a, 2b, 3a, and 3t	10; Part II, line 17a or 17b; Part III, line 12; IV, Section B, lines 1 and 2; Part IV, Section C, o; Part V, line 1; Part V, Section B, line 1e; Part V, is part for any additional information.

SC		Supplementa	al Financial Statements	;		OMB No. 1545-0047
	n 990)	Complete if the orga	nization answered "Yes" on Form 990,			2022
Depart	ment of the Treasury		, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b .ttach to Form 990.).		Open to Public
Interna	Revenue Service		0 for instructions and the latest information			Inspection
Nam	e of the organization	on GIRL SCOUTS OF CAL CENTRAL COAST	IFORNIA'S			identification number 4-1567162
Pa	t I Organiza		ed Funds or Other Similar Funds	or Ac		
1 0	_	answered "Yes" on Form 990, Part IV, lir			oounts.	
			(a) Donor advised funds	(b)	Funds an	d other accounts
1	Total number at en	d of year				
2	Aggregate value of	contributions to (during year)				
3		grants from (during year)				
4		end of year				
5	-		writing that the assets held in donor advise			
<u> </u>			exclusive legal control?			Yes No
6	•	u , , , ,	advisors in writing that grant funds can be a or donor advisor, or for any other purpose (
	impermissible priva				5	Yes No
Pa			ganization answered "Yes" on Form 990, P			
1	Purpose(s) of cons	ervation easements held by the organizat	ion (check all that apply).			
	Preservation	of land for public use (for example, recrea	ation or education) 📃 Preservation of a	a histori	cally impo	rtant land area
		natural habitat	Preservation of a	a certifie	ed historic	structure
		of open space				
2		a b i	fied conservation contribution in the form o	of a con		easement on the last at the End of the Tax Year
-	day of the tax year					
					2a 2b	
b C			ructure included in (a)		20 2c	
d		vation easements included in (c) acquired		····· -	20	
					2d	
3			leased, extinguished, or terminated by the		ation durir	ng the tax
	year					
4	Number of states v	where property subject to conservation ea	sement is located			
5		ion have a written policy regarding the pe				
•		prcement of the conservation easements				Ves No
6	Staff and volunteer	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	ervatior	n easemen	ts during the year
7	Amount of expense	es incurred in monitoring inspecting han	dling of violations, and enforcing conservat	ion ease	ements du	ring the year
•				lion ouo		ing the year
8	Does each conserv	/ation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)(4)(B)((i)	
	and section 170(h)	(4)(B)(ii)?				Yes No
9	In Part XIII, describ	e how the organization reports conservat	ion easements in its revenue and expense	stateme	ent and	
			note to the organization's financial stateme	ents that	t describes	s the
Dai		ounting for conservation easements.	f Art, Historical Treasures, or Ot	thor Si	imilar A	ecote
Fai		the organization answered "Yes" on Form				55015.
			58, not to report in its revenue statement a	nd balar	nce sheet	works
	-		blic exhibition, education, or research in fu			
			ncial statements that describes these item			
b	If the organization	elected, as permitted under FASB ASC 95	58, to report in its revenue statement and b	balance	sheet worl	ks of
	art, historical treas	ures, or other similar assets held for public	c exhibition, education, or research in furth	erance	of public s	ervice,
	provide the following	ng amounts relating to these items:				
-	.,					
2			easures, or other similar assets for financial	gain, pi	rovide	
~	-	nts required to be reported under FASB A	-		¢	
a b					-	
-		eduction Act Notice, see the Instruction				dule D (Form 990) 2022

		OUTS OF CAL	LIFORNIA'S						
Sche	dule D (Form 990) 2022 CENTRAL						56716		
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, o	r Other	Similar As	sets(contir	nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that	make sigr	nificant use of	its		
	collection items (check all that apply):								
а	Public exhibition	d	Loan or exc	hange prograr	m				
b	Scholarly research	е	Other						
с	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explair	n how thev further t	he organizatio	n's exemp	t purpose in F	Part XIII.		
5	During the year, did the organization solicit o								
-	to be sold to raise funds rather than to be ma					ſ	Yes		No
Par	t IV Escrow and Custodial Arran								<u></u>
	reported an amount on Form 990, Par			in anowered		, in 666, i art	i v, iii io o, oi		
1a	Is the organization an agent, trustee, custodi		liary for contribution	s or other ass	ets not inc				
iu	on Form 990, Part X?					r	Yes		No
h	If "Yes," explain the arrangement in Part XIII					······ ·		L	
b	in res, explain the arrangement in Part All	and complete the lo	nowing table.				Amoun	+	
							Amoun		
	Beginning balance					1c			
	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for escrow or cu	ustodial accou	unt liability'	?l	Yes		No
_	If "Yes," explain the arrangement in Part XIII.								
Par	t V Endowment Funds. Complete in						<u>-</u>		<u> </u>
		(a) Current year	(b) Prior year	(c) Two years	s back (d)	Three years ba	ck (e) Four	years	back
1a	Beginning of year balance	79,748.	101,112.	87	,136.	84,91	9.	89	,504.
b	Contributions								
	Net investment earnings, gains, and losses	8,493.	-8,423.	17	,670.	6,11	6.	-	-741.
d	Grants or scholarships								
	Other expenditures for facilities								
	and programs	3,661.	12,941.	3	,694.	3,89	9.	3	,844.
f	Administrative expenses		· · ·						<u> </u>
g	End of year balance	84,580.	79,748.	101	,112.	87,13	6.	84	,919.
2	Provide the estimated percentage of the curr	,	,		,	,			
	Board designated or quasi-endowment	.0000	%	<i>())</i> Hold us.					
a h	Permanent endowment 100	%							
0	Term endowment .0000								
C									
0-	The percentages on lines 2a, 2b, and 2c sho	-							
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are neid a	nd administer	ed for the		ī	Yes	No
	organization by:							X	
	(i) Unrelated organizations						3a(i)	Δ	v
	(ii) Related organizations						3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organization						3b		
4	Describe in Part XIII the intended uses of the		wment funds.						
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answered	d "Yes" on Form 990), Part IV, line 11a. S	See Form 990,	Part X, lin	e 10.			
	Description of property	(a) Cost or of	ther (b) Cost	or other	(c) Accu	imulated	(d) Boo	k valu	ie
		basis (investn		(other)	depre	ciation			
1a	Land			6,211.					11.
	Buildings			5,634.		8,662.			72.
	Leasehold improvements			7,519.	1,28	8,655.	72	8,8	64.
	Equipment			8,792.		7,757.			35.
	Other			0,363.		6,880.			83.
	Add lines 1a through 1e. (Column (d) must e			-			1,68		
	J		, , , , ,	,			-		

Schedule D (Form 990) 2022

GIRL	SCO	DUTS	OF	CALIFORNIA'	S
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	D (Form 990) 2022 CENTRAL COP	\ST		94-1567162 Page 3
Part VI	I Investments - Other Securities.			
	Complete if the organization answered "Yes'	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Descr	iption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost o	r end-of-year market value
(1) Financ	cial derivatives			
	y held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	(b) must equal Form 990, Part X, col. (B) line 12.)			
	II 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 o	r end-of-vear market value
(1)	(-)	(-)	(-,	
(1)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	(h) much a much Farma 000, Darth (a sh (D) line 40.)			
Part IX	(b) must equal Form 990, Part X, col. (B) line 13.) Other Assets.			
Faitin		on Form 000 Dart IV line	11d See Form 000 Dort V line 15	
	Complete if the organization answered "Yes"	Description	TTd. See Form 990, Part A, line TS.	(b) Book value
	(a)	Description		(b) BOOK value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	lumn (b) must equal Form 990, Part X, col. (B) lir	ne 15.)		
Part X	Other Liabilities.			
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, lir	
1.	(a) Description of liability			(b) Book value
	ederal income taxes			
	PERATING LEASE RIGHT-OF-	USE		1.60.044
(3) L	IABILITY			162,344.
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col	lumn (b) must equal Form 990, Part X, col. (B) lir	ne 25.)		162,344.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2022

	GIRL SCOUTS OF CALIFORNIA	S				
Sche	dule D (Form 990) 2022 CENTRAL COAST				1567162	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue per R	eturr	າ.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.				
1	Total revenue, gains, and other support per audited financial statements			1	5,666	,385.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	. 2a	209,673.			
b	Donated services and use of facilities	. 2b	8,500.			
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	. 2d	4,832.			
е	Add lines 2a through 2d			2e		,005.
3	Subtract line 2e from line 1			3	5,443	,380.
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	. 4 a	23,125.			
b	Other (Describe in Part XIII.)	. 4b				
С	Add lines 4a and 4b			4c	23	,125.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	5,466	<u>,505.</u>
Pa	t XII Reconciliation of Expenses per Audited Financial Staten		h Expenses per	Retu	ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			,		
1	Total expenses and losses per audited financial statements			1	6,176	,719.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	. 2a				
b	Prior year adjustments	. 2b				
С	Other losses	. 2c				
d	Other (Describe in Part XIII.)	2d				-
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	6,176	<u>,719.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b		23,125.			
b	Other (Describe in Part XIII.)	. 4b				
С	Add lines 4a and 4b			4c		,125.
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>)			5	6,199	,844.
Pa	t XIII Supplemental Information.					

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

PART X, LINE 2:

THE COUNCIL IS EXEMPT FROM FEDERAL AND STATE TAXES ON INCOME UNDER

INTERNAL REVENUE CODE SECTION 501(C)(3) AND SIMILAR PROVISIONS OF THE

CALIFORNIA REVENUE AND TAXATION ACT.

THE COUNCIL HAS ADOPTED THE PROVISIONS RELATED TO ACCOUNTING FOR

UNCERTAINTY IN INCOME TAXES, WHICH DEFINES A RECOGNITION THRESHOLD AND

MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND

MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX

RETURN. THE COUNCIL'S MANAGEMENT HAS CONSIDERED ITS TAX POSITIONS AND

BELIEVES THAT ALL OF THE POSITIONS TAKEN BY THE COUNCIL IN ITS FEDERAL AND

STATE TAX RETURNS ARE MORE LIKELY THAN NOT TO BE SUSTAINED UPON

GIRL SCOUTS OF CALIFORNIA'S
Schedule D (Form 990) 2022 CENTRAL COAST 94-1567162 Page 5
Part XIII Supplemental Information (continued)
EXAMINATION. THE COUNCIL FILES TAX RETURNS IN THE U.S. FEDERAL AND
CALIFORNIA JURISDICTIONS. WITH FEW EXCEPTIONS, THE COUNCIL IS NO LONGER
SUBJECT TO FEDERAL AND STATE TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS
ENDED BEFORE SEPTEMBER 30, 2019 AND 2018, RESPECTIVELY.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
CHANGE IN VALUE OF BENEFICIAL INTEREST IN ASSET 4,832

SCHEDULE G	Suppleme	ntal Information Regarding	g Fun	drais	ing or Gaming	Acti	vities	OMB	No. 1545-0047
(Form 990)		complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.							
Department of the Treasury		Attach to Form 990 or Form 990-EZ. Open to Public							
Internal Revenue Service		o www.irs.gov/Form990 for instru		and t	he latest informatio	n.	_ .		pection
Name of the organization	GIRL SC CENTRAL	OUTS OF CALIFORNIA COAST	A S				Employer		ication number
Part I Fundrais		Complete if the organization answ	ered "\	es" o	n Form 990, Part IV,	line 1			
	complete this par								
	•	sed funds through any of the follow	•						
a Mail solicitat				•	overnment grants				
	email solicitations			-	nment grants				
c Phone solici d In-person so		g └──J Specia	I TUNUra	aising	events				
2 a Did the organization	on have a written c	or oral agreement with any individua	al (inclu	ding o	fficers, directors, tru	stees	, or		
• • •		art VII) or entity in connection with			-			Yes	No No
		viduals or entities (fundraisers) purs	uant to	agree	ements under which	the fi	undraiser is	to be	
compensated at le	east \$5,000 by the	organization.							
(i) Name and addres	s of individual		(iii)	Did	(iv) Gross receipts		Amount pa	<u></u>	i) Amount paid
or entity (fund		(ii) Activity	have c	ustody htrol of	from activity	,	fundraiser	<i>"</i> 10	(or retained by) organization
				utions?		lis	ted in col. (i)	organization
			Yes	No					
Total									
3 List all states in wh	ich the organizatio	on is registered or licensed to solicit	contrik	outions	s or has been notified	d it is	exempt fro	n regis	tration
or licensing.									

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

Schedule G (Form 990) 2022

Sch	GIRL SCOUTS OF CALIFORNIA'S Schedule G (Form 990) 2022 CENTRAL COAST 94-1567162 Page 2								
-	art I			Ves" on Form 990 Par		· · · · ·			
		of fundraising event contributions and gr							
		5 5	(a) Event #1 WINE, FOOD AND MUSIC FE	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through			
			(event type)	(event type)	(total number)	- col. (c))			
Revenue	1	Gross receipts	44,697.	-	(total number)	44,697.			
ш.	2	Less: Contributions	4,498.			4,498.			
	3	Gross income (line 1 minus line 2)	40,199.			40,199.			
	4	Cash prizes							
Se	5	Noncash prizes							
xbense	6	Rent/facility costs	14,160.			14,160.			
Direct Expenses	7	Food and beverages	42,481.			42,481.			
	8 9	Entertainment Other direct expenses				106,076.			
	10					162,717.			
	11	1				-122,518.			
Pa	art		answered "Yes" on Form	990, Part IV, line 19, or	reported more than				
		\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant		(d) Total gaming (add			
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))			
Re	1	Gross revenue							
ses	2	Cash prizes							
Expenses	3	Noncash prizes							
Direct	4	Rent/facility costs							
	5	Other direct expenses							
	6	Volunteer labor	└── Yes % └── No	└── Yes % └── No	└── Yes % └── No				
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)						
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)								
a	 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain: 								
	0a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes b If "Yes," explain: Yes								

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Schedule G (Form 990) 2022

		GIRL SCOU		r CZ	ALIF	ORNI	[A'S				. 4 1		1 ~ ~	
	edule G (Form 990) 2022	CENTRAL C										_		Page 3
	Does the organization conduct ga												Yes	└── No
12	Is the organization a grantor, bene												Yes	
13	to administer charitable gaming? . Indicate the percentage of gaming												162	
	The organization's facility											13a	I	%
	An outside facility											13b		%
	Enter the name and address of the													
				-										
	Name													
	Address													
15a	Does the organization have a cont	ract with a third par	ty from w	hom	the org	ganizatio	on receive	es gami	ng reven	ue?			Yes	🗌 No
L	If "Yes," enter the amount of gami	na rovonuo ropoivos	d by the e	oraoni	ization	¢			and	the amo	unt			
Ľ	of gaming revenue retained by the		a by the o	Jigani	Ization	\$_			and	the amo	uni			
	If "Yes," enter name and address	· · · —												
-														
	Name													
	Address													
16	Gaming manager information:													
	Name													
		•												
	Gaming manager compensation	\$												
	Description of services provided													
		_	_											
	Director/officer	Employee	L	I	Indeper	ndent co	ontractor							
	Mandatory distributions:	atata law ta maka a	baritabla	diatri	ibutions	o from th	ha aamin	~ ~ ~ ~ ~ ~	ada ta					
č	Is the organization required under retain the state gaming license?						-						Yes	
Ł	Enter the amount of distributions r	equired under state									the			
~	organization's own exempt activiti	•					. exemp	e e gain						
Pa	rt IV Supplemental Inform			ations	s requir	red by P	Part I, line	e 2b, col	umns (iii)	and (v); a	and Par	t III, li	ines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as	applicable. Also pro	ovide any	addit	tional in	nformatio	on. See i	nstructi	ons.					

Schedule G (Form 990)	CENTRAL COAST	94-1567162 Page 4
Schedule G (Form 990) Part IV Supplementa	Information (continued)	
-		

SCHEDUI (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 o Internal Rever	f the Treasury nue Service		Go to www.irs	Attach to Forr s.gov/Form990 for	n 990. [.] the latest inform	ation.		Open to Public Inspection			
Name of t	he organization GIRL SCOU CENTRAL C	TS OF CAL OAST	IFORNIA'S					Employer identification number $94 - 1567162$			
Part I	General Information on Grants a	and Assistance									
crite	s the organization maintain records ria used to award the grants or assi cribe in Part IV the organization's pr	stance?							o		
Part II	Grants and Other Assistance to recipient that received more than	Domestic Organi	zations and Domesti	ic Governments.	Complete if the org	anization answered "	∕es" on Form 990, Par	t IV, line 21, for any			
1 (a) №	Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance			

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) 2022

GIRL	SCOUTS	OF	CALIFORNIA'S	,

Schedule I (Form 990) 2022

CENTRAL COAST

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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.

(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
510	12,774.	0.		
	recipients	recipients cash grant	recipients cash grant cash assistance	recipients cash grant cash assistance (book, FMV, appraisal, other)

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

sc	HEDULE J Compensation Information	1	OMB No.	1545-00	47		
	(Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest						
•	Compensated Employees		20		•		
Deres	truent of the Treasury Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic		
	Attach to Form 990. al Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe	ction			
Nan	ne of the organization GIRL SCOUTS OF CALIFORNIA'S Em	nployer ide			mber		
	CENTRAL COAST	94-15	6716	2			
Pa	rt I Questions Regarding Compensation						
				Yes	No		
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990	90,					
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or charter travel						
	Travel for companions Payments for business use of personal reside	ence					
	Tax indemnification and gross-up payments						
	Discretionary spending account	chef)					
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or						
-	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		1b		<u> </u>		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,						
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?		. 2		<u> </u>		
•							
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's						
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization	to					
	establish compensation of the CEO/Executive Director, but explain in Part III.						
	X Compensation committee X Written employment contract						
	Independent compensation consultant						
	X Form 990 of other organizations X Approval by the board or compensation complexity	mittee					
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
-	organization or a related organization:						
а	Receive a severance payment or change-of-control payment?		4a		x		
b	Participate in or receive payment from a supplemental nonqualified retirement plan?				X		
	Participate in or receive payment from an equity-based compensation arrangement?				X		
•	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	contingent on the revenues of:						
а	The organization?		. 5a		Х		
b	Any related organization?		5b		Х		
	If "Yes" on line 5a or 5b, describe in Part III.						
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	contingent on the net earnings of:						
а	The organization?		6a		Х		
	Any related organization?				Х		
	If "Yes" on line 6a or 6b, describe in Part III.						
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments						
	not described on lines 5 and 6? If "Yes," describe in Part III		. 7		X		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the						
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		. 8		X		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in						
	Regulations section 53.4958-6(c)?	<u></u>	. 9				
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule	e J (Forr	n 990)	2022		

Schedule J (Form 990) 2022

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC (compensation			other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) TAMMIE HELMUTH	(i)	203,611.	0.	0.	0.	7,647.	211,258.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
-	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i) (ii)							
	[(1)]							

Schedule J (Form 990) 2022

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

THE ORGANIZATION REVIEWS MANAGEMENTS COMPENSATION ANNUALLY.

Schedule J (Form 990) 2022

SCHEDULE O (Form 990)

(101111000)

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.



94-1567162

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

GIRL SCOUTS OF CALIFORNIA'S

CENTRAL COAST

PRODUCT SALES, BUILDING SELF-CONFIDENCE WHILE LEARNING BUSINESS AND

MARKETING SKILLS, GOAL-SETTING, DECISION-MAKING, MONEY MANAGEMENT,

CUSTOMER SERVICE AND BUSINESS ETHICS. THESE, AND OTHER FINANCIAL

EDUCATION PROGRAMS, HELP GIRLS GAIN THE SELF-CONFIDENCE TO ULTIMATELY

TAKE CONTROL OF THEIR OWN FINANCIAL FUTURE. GIRL SCOUTS DEVELOP

SKILLS IN STEM, THROUGH PROGRAMS SUCH AS FOREVER GREEN - A WILDLIFE AND

CONSERVATION PROGRAM. GIRL SCOUTS OFFERS INNOVATIVE PROGRAMS TO

IMPROVE A GIRL'S SELF-ESTEEM AND PERSONAL SELF-IMAGE, SUCH AS BE A

FRIEND FIRST BULLYING PREVENTION PROGRAM, AND PHYSICAL FITNESS

ACTIVITIES SUCH AS BROWNILYMPICS AND GIRL SCOUT SOCCER. THESE AND

OTHER PROGRAMS DEVELOP OUR FEMALE LEADERS OF TOMORROW. DUE TO COVID 19,

MANY PROGRAMS WERE OFFERED AND TAUGHT ONLINE VIA ZOOM.

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

PERFORMING AND MONITORING BACKGROUND CHECKS, AND RECOGNIZING

ACHIEVEMENT OF VOLUNTEERS.

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

THE ORGANIZATION HAS MEMBERS AS IT IS A MEMBERSHIP ORGANIZATION.

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

THE ORGANIZATION REQUIRES BOARD APPROVAL BEFORE FILING THE FORM 990 AND

RELATED SCHEDULES.

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

Schedule O (Form 990) 2022	Page 2
Name of the organization GIRL SCOUTS OF CALIFORNIA'S CENTRAL COAST	Employer identification number $94 - 1567162$
THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND	ENFORCES
COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY. THE CEO	IS RESPONSIBLE
FOR THE COLLECTION AND REVIEW OF ANNUAL CONFLICT OF INTER	EST STATEMENTS
SUBMITTED BY BOARD MEMBERS AND KEY STAFF, WITH OVERSIGHT	BY THE BOARD OF

DIRECTORS.

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

IN DETERMINING COMPENSATION OF THE CEO, THE BOARD OF DIRECTORS SERVES AS THE COMPENSATION COMMITTEE WHO SETS AMOUNT OF COMPENSATION WITH ASSISTANCE OF LOCAL SALARY SURVEYS, AND COMPENSATION SURVEYS PROVIDED BY THE NATIONAL ORGANIZATION, GSUSA.

IN DETERMINING COMPENSATION FOR TOP MANAGEMENT OFFICIALS, GSUA PROVIDES CONSULTANTS AND HUMAN RESOURCE SUPPORT, AND ALSO PREPARES AN ANALYSIS FOR OUR LOCATION TO DETERMINE PAY GRADES AND SALARIES. THE CEO MAKES FINAL SALARY DETERMINATIONS.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS

AVAILABLE TO THE PUBLIC UPON REQUEST AND ON ITS OWN WEBSITE.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF BENEFICIAL INTEREST IN ASSET

4,832.

FORM 990, PART XII, LINE 2C, CHANGES TO OVERSIGHT AND SELECTION PROCESS:

THE COUNCIL HAS NOT CHANGED ITS FINANCIAL STATEMENT OVERSIGHT PROCESS

OR THE PROCESS OF SELECTING AN INDEPENDENT ACCOUNTANT SINCE THE PRIOR

Schedule O (Form 990) 20	22 GIRL SCOUTS OF CALIFORNIA'S	Page 2
Name of the organization	CENTRAL COAST	Employer identification number 94-1567162

Department of the Treasury Internal Revenue Service Name of the organization CENTRAL COAST	Go to www.irs.gov/Form990 f F CALIFORNIA'S	'Yes" on Form 990, Part IV, li ach to Form 990. for instructions and the lates	ne 33, 34, 35b, 36 t information.	, or 37.	Em		AB No. 1544 202 pen to P Inspecti cation nu 62	2 ublic on
Part I Identification of Disregarded Entities. Completing (a) (a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d)	ne End-of-year	assets	Direct c	(f) ontrolling htity)
	-							
Part II Identification of Related Tax-Exempt Organizations during the tax year. (a) Name, address, and EIN of related organization	ations. Complete if the organization (b) Primary activity	n answered "Yes" on Form 990 (c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))		(f) entity	Section S contr ent	g) 512(b)(13) rolled ity?
GIRL SCOUTS OF THE USA 420 FIFTH AVENUE NEW YORK, NY 10018-2798	SCOUTING	NEW YORK	501C3	LINE 10			Yes	No X
	- - - -							

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

Schedule R (Form 990) 2022

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Page **2**

Schedu		RAL COAST	CALIF	ORNIA'S									94-1	567	162	Р	Page 2
Part III	Identification of Deleted On	ganizations Taxable rtnership during the t	as a Partn ax year.	ership. Complete i	f the organi	zation answe	ered "Ye	es" on Forr	m 990, F	Part IV, line	e 34, b	ecaus	e it had one or	^r more	related		<u></u>
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predomin (related) excluded fi	(e) nant income , unrelated, rom tax under s 512-514)	Share	(f) e of total come	Sha end-	(g) are of of-year ssets	Disprop	h) ortionate tions? No	(i) Code V-UB amount in bo 20 of Schedu K-1 (Form 10	3I Ger OX ^{ma} ule ^{pa}	(j) eneral or anaging artner? es No	(k Perce owne	ntage
Part IV	Identification of Related Orgonizations treated as a co	ganizations Taxable rporation or trust duri	as a Corpo	oration or Trust. C year.	omplete if t	he organizat	ion ans	wered "Yes	s" on Fo	rm 990, P	art IV,	line 34	4, because it h	ad one	e or mo	ore rel	ated
	(a) Name, address, and EIN of related organization		Prim	(b) nary activity	(C) Legal domicile (state or foreign country)	I domicile Direct con state or entity		ing Type of entiti (C corp, S co or trust)		(f) Share of tota income			(g) Share of end-of-year assets	(h Percer ownei	ntage	(i Sect 512(b contr enti Yes	o)(13) olled ity?
																103	

Schedule R (Form 990) 2022 CENTRAL COAST

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.									
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?								
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X					
	Gift, grant, or capital contribution to related organization(s)	1b		X					
	Gift, grant, or capital contribution from related organization(s)	1c	Х						
	Loans or loan guarantees to or for related organization(s)	1d		Х					
	Loans or loan guarantees by related organization(s)	1e		Х					
f	Dividends from related organization(s)	1f		Х					
g	Sale of assets to related organization(s)	1g		Х					
	Purchase of assets from related organization(s)	1h		Х					
i	Exchange of assets with related organization(s)	1i		Х					
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х					
-									
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х					
I.	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х					
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х					
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х					
	Sharing of paid employees with related organization(s)	10		Х					
р	Reimbursement paid to related organization(s) for expenses	1p		Х					
	Reimbursement paid by related organization(s) for expenses	1q	Х						
r	Other transfer of cash or property to related organization(s)	1r		Х					
s	Other transfer of cash or property from related organization(s)	1s		Х					
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	•	•						

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) GIRL SCOUTS OF THE USA	R	90,520.	CASH
(2)			
_(3)			
_(4)			
(5)			
_(6)			

Schedule R (Form 990) 2022 CENTRAL COAST

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are a partners 501(c) orgs. Yes I	 sec. (3) ?	(f) Share of total income	(g) Share of end-of-year assets	(I Dispr tion alloca	n) opor- nate tions? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr Yes) ral or p ging ner?	(k) Percentage ownership

Schedule R (Form 990) 2022

GIRL SCOUTS OF CALIFORNIA'S CENTRAL COAST

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

2022 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

•••••••••••••••••••••••••••••••••••••••	JO FAGE IU							990	_	-					
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	LAND	06/30/12	NC	.000	НҮ		226,211.				226,211.			0.	
2	BUILDINGS	06/30/12	NC	.000	нү		1,375,634.				1,375,634.	878,662.		٥.	878,662.
3	EQUIPMENT	06/30/12	NC	.000	нү		528,792.				528,792.	337,757.		0.	337,757.
4	VEHICLES	06/30/12	NC	.000	нү		120,363.				120,363.	76,880.		0.	76,880.
5	LEASEHOLD IMPROVEMENTS	10/01/13	NC	.000	ну		2,017,519.				2,017,519.	1,288,655.		0.	1,288,655.
	* TOTAL 990 PAGE 10 DEPR						4,268,519.				4,268,519.	2,581,954.		0.	2,581,954.

228111 04-01-22

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone