Form 990

Return of Organization Exempt From Income Tax

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

Please do not enter social security numbers on this form as it may be made public.

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

A For the 2016 calendar year, or tax year beginning 10/01, 2016, and ending 09/30, 2017

B Check if applicable:

- Name of organization: GIRL SCOUTS OF WISCONSIN SOUTHEAST INC
- Employer identification number: 39-0892833
- Telephone number: 414-475-1050
- City or town, state or province, country, and ZIP or foreign postal code: Milwaukee, WI, 53214-0999
- Gross receipts: $21,715,876

J Website: www.gswise.org

K Form of organization: Corporation

Part I

Summary

1 Briefly describe the organization's mission or most significant activities:
   Girl Scouting builds girls of courage confidence and character who make the world a better place

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a).
4 Number of independent voting members of the governing body (Part VI, line 1b).
5 Total number of individuals employed in calendar year 2016 (Part V, line 2a).
6 Total number of volunteers (estimate if necessary).
7a Total unrelated business revenue from Part VIII, column (C), line 12.
7b Net unrelated business taxable income from Form 990-T, line 34.

Revenue

8 Contributions and grants (Part VIII, line 1h).
9 Program service revenue (Part VIII, line 2g).
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d).
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12).

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3).
14 Benefits paid to or for members (Part IX, column (A), line 4).
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10).
16 Professional fundraising fees (Part IX, column (A), line 11e).
17 Total fundraising expenses (Part IX, column (D), line 25).
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25).
19 Revenue less expenses. Subtract line 18 from line 12.

Net Assets or Fund Balances

20 Total assets (Part X, line 16).
21 Total liabilities (Part X, line 26).
22 Net assets or fund balances. Subtract line 21 from line 20.

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

Date: 11/05/18

Carita Twemlow, Board Chair

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name
Preparer's signature
Date
Check if self-employed
PTIN

Firm's name
Firm's FIN
Firm's address
Phone no.

May the IRS discuss this return with the preparer shown above? (see instructions)

Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2016)
Part III Statement of Program Service Accomplishments

1. Briefly describe the organization’s mission:

   Girl Scouting builds girls of courage confidence and character who make the world a better place.

2. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

   Yes ☐ No ☐

   If “Yes,” describe these new services on Schedule O.

3. Did the organization cease conducting, or make significant changes in how it conducts, any program services?

   Yes ☐ No ☐

   If “Yes,” describe these changes on Schedule O.

4. Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

   4a (Code: ) (Expenses $, including grants of $) (Revenue $).

   MEMBERSHIP is directed to the recruitment, training, support, and retention of girl members and adult volunteers who deliver the Girl Scout Leadership Program to girls in grades K-12. The Girl Scout Leadership Experience engages girls in discovering self, connecting with others, and taking action to make the world a better place. Girl Scouts helps girls develop their full individual potential; relate to others with increasing understanding, skill, and respect; develop values to guide their actions and provide the foundation for sound decision making; contribute to the improvement of their abilities, leadership skills, and cooperation with others. The long-term result of the leadership destination is a generation of girls who lead with courage, confidence, and character. Girls of color make up more than 15% of the council’s girl membership, and 7% identify as Hispanic.

   Girls and adults participating in Girl Scouts are supported by council-provided financial assistance for membership dues, training fees, and materials. Membership totals for 2017 were 28,283 girls and 8,812 adults with a membership retention rate of 63.5%.

   (Continued on Schedule O, Statement 1)

   4b (Code: ) (Expenses $, including grants of $) (Revenue $).

   GIRL SCOUT LEADERSHIP EXPERIENCE (GSLE) program provides personal leadership development opportunities to girls in grades K-12, with defined outcomes and differentiated by grade-level. The organization offers and promotes flexible opportunities for participation. Events and activities offered span a wide range of options and topics that support and enrich each girl’s experience, i.e., STEM (science, technology, engineering and math), camps, travel, environmental stewardship, global citizenship, arts and culture, healthy living, financial literacy, community service, and career exploration. These events and activities also provide opportunities for girls from a variety of different communities to meet, connect, and work together. Staff, tools, resource materials, equipment, awards, and venues including council-owned program properties are available and included in the GSLE program delivery. Total participants for all activities and events during 2017 were 25,115. Financial assistance is provided for program fees, training fees, and transportation costs for regional, national, and international opportunities. GSLE revenues include income from program-related product and supplies sales, program fees, and rentals.

   (Continued on Schedule O, Statement 1)

   4c (Code: ) (Expenses $, including grants of $) (Revenue $).

   GIRL SCOUT PROMISE PROGRAM and LATINA INITIATIVE. For more than 50 years, GSWISE has been serving girls in economically distressed neighborhoods to give every girl the opportunity to pursue the Girl Scout Leadership Experience (GSLE) and reach her full leadership potential, regardless of her families' financial means. Through the GIRL SCOUT PROMISE PROGRAM, girls in low-income central city neighborhoods and under-performing schools in southeastern Wisconsin are guided by Girl Scout staff and volunteers who inspire them to explore new things, gain practical skills, and prepare for a lifetime of leadership in a safe girl-led environment. The Girl Scout Promise Program encompasses many different pathways of participation in the Girl Scout Leadership Experience (GSLE) curriculum that occur year-round and provides financial assistance, bilingual materials, and customized curriculum. Girls can participate in traditional troops, out-of-school time staff-led Girl Scout troops, middle school series programs, summer workshops, camp experiences, and Girls of Summer Softball. In 2017, 5,131 Girl Scout members participated in one or more of these experiences. The LATINA INITIATIVE offers mothers and daughters the opportunity to

   (Continued on Schedule O, Statement 1)

   4d Other program services (Describe in Schedule O.)

   (Expenses $, including grants of $) (Revenue $).

   4e Total program service expenses

   $9,514,062
### Part IV Checklist of Required Schedules

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>1</td>
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</table>

**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If “Yes,” complete Schedule C, Part I.*

**Section 501(c)(4), 501(c)(5), or 501(c)(6) organization.** 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.*

**Did the organization engage in lobbying activities?** *If “Yes,” complete Schedule D, Part VI.*

**Did the organization report an amount for other assets in Part X, line 18 that is 5% or more of its total assets reported in Part X, line 16?**

**Did the organization obtain separate, independent audited financial statements for the tax year?** *If “Yes,” complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.*

**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.*

**Did the organization hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments?**

**If the organization’s answer to any of the following questions is “Yes,” then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.**

- **a** Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If “Yes,” complete Schedule D, Part VI.*
- **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.*
- **c** Did the organization report an amount 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.*
- **d** Did the organization report an amount for other liabilities in Part X, line 25? *If “Yes,” complete Schedule D, Part X.*
- **e** 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.*
- **f** Did the organization maintain or hold 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.*
- **g** 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.*

**Did the organization obtain separate, independent audited financial statements for the tax year?**

**Was the organization included in consolidated, independent audited financial statements for the tax year?**

**Is the organization a school described in section 170(b)(1)(A)(ii)?**

**Did the organization maintain an office, employees, or agents outside of the United States?**

**Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more?**

**Did the organization report an amount of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e?**

**Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a?**

**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.**
<table>
<thead>
<tr>
<th></th>
<th>Checklist of Required Schedules (continued)</th>
</tr>
</thead>
<tbody>
<tr>
<td>20a</td>
<td>Did the organization operate one or more hospital facilities? If “Yes,” complete Schedule H</td>
</tr>
<tr>
<td>20b</td>
<td>If “Yes” to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
</tr>
<tr>
<td>21</td>
<td>Did the organization report more than $5,000 of grants or other assistance to any domestic organization or</td>
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<tr>
<td></td>
<td>domestic government on Part IX, column (A), line 1? If “Yes,” complete Schedule I, Parts I and II</td>
</tr>
<tr>
<td>22</td>
<td>Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on</td>
</tr>
<tr>
<td></td>
<td>Part IX, column (A), line 2? If “Yes,” complete Schedule I, Parts I and III</td>
</tr>
<tr>
<td>23</td>
<td>Did the organization answer “Yes” to Part VII, Section A, line 3, 4, or 5 about compensation of the</td>
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<tr>
<td></td>
<td>organization’s current and former officers, directors, trustees, key employees, and highest compensated</td>
</tr>
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<td></td>
<td>employees? If “Yes,” complete Schedule J</td>
</tr>
<tr>
<td>24a</td>
<td>Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than</td>
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<tr>
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<td>$100,000 as of the last day of the year, that was issued after December 31, 2002? If “Yes,” answer lines</td>
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<td></td>
<td>24b through 24d and complete Schedule K. If “No,” go to line 25a</td>
</tr>
<tr>
<td>24b</td>
<td>Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
</tr>
<tr>
<td>24c</td>
<td>Did the organization maintain an escrow account other than a refunding escrow at any time during the year</td>
</tr>
<tr>
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<td>to defease any tax-exempt bonds?</td>
</tr>
<tr>
<td>24d</td>
<td>Did the organization act as an “on behalf of” issuer for bonds outstanding at any time during the year?</td>
</tr>
<tr>
<td>25a</td>
<td>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit</td>
</tr>
<tr>
<td></td>
<td>transaction with a disqualified person during the year? If “Yes,” complete Schedule L, Part I</td>
</tr>
<tr>
<td>25b</td>
<td>Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a</td>
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<tr>
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<td>prior year, and that the transaction has not been reported on any of the organization’s prior Forms 990 or</td>
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<td></td>
<td>990-EZ? If “Yes,” complete Schedule L, Part I</td>
</tr>
<tr>
<td>26</td>
<td>Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any</td>
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<td></td>
<td>current or former officers, directors, trustees, key employees, highest compensated employees, or</td>
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<td></td>
<td>disqualified persons? If “Yes,” complete Schedule L, Part II</td>
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<tr>
<td>27</td>
<td>Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,</td>
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<td></td>
<td>substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled</td>
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<td></td>
<td>entity or family member of any of these persons? If “Yes,” complete Schedule L, Part III</td>
</tr>
<tr>
<td>28</td>
<td>Was the organization a party to a business transaction with one of the following parties (see Schedule L,</td>
</tr>
<tr>
<td></td>
<td>Part IV instructions for applicable filing thresholds, conditions, and exceptions):</td>
</tr>
<tr>
<td>28a</td>
<td>A current or former officer, director, trustee, or key employee? If “Yes,” complete Schedule L, Part IV</td>
</tr>
<tr>
<td>28b</td>
<td>A family member of a current or former officer, director, trustee, or key employee? If “Yes,” complete</td>
</tr>
<tr>
<td></td>
<td>Schedule L, Part IV</td>
</tr>
<tr>
<td>28c</td>
<td>An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If “Yes,” complete Schedule L, Part IV</td>
</tr>
<tr>
<td>29</td>
<td>Did the organization receive more than $25,000 in non-cash contributions? If “Yes,” complete Schedule M</td>
</tr>
<tr>
<td>30</td>
<td>Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If “Yes,” complete Schedule M</td>
</tr>
<tr>
<td>31</td>
<td>Did the organization liquidate, terminate, or dissolve and cease operations? If “Yes,” complete Schedule N,</td>
</tr>
<tr>
<td></td>
<td>Part I</td>
</tr>
<tr>
<td>32</td>
<td>Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If “Yes,”</td>
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<tr>
<td></td>
<td>complete Schedule N, Part II</td>
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<tr>
<td>33</td>
<td>Did the organization own 100% of an entity disregarded as separate from the organization under Regulations</td>
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<td></td>
<td>sections 301.7701-2 and 301.7701-3? If “Yes,” complete Schedule R, Part I</td>
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<tr>
<td>34</td>
<td>Was the organization related to any tax-exempt or taxable entity? If “Yes,” complete Schedule R, Part II,</td>
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<td>III, or IV, and Part V, line 1</td>
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<tr>
<td>35a</td>
<td>Did the organization have a controlled entity within the meaning of section 512(b)(13)?</td>
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<tr>
<td>35b</td>
<td>If “Yes” to line 35a, did the organization receive any payment from or engage in any transaction with a</td>
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<td>controlled entity within the meaning of section 512(b)(13)? If “Yes,” complete Schedule R, Part V, line 2</td>
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<tr>
<td>36</td>
<td>Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related</td>
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<tr>
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<td>organization? If “Yes,” complete Schedule R, Part V, line 2</td>
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<tr>
<td>37</td>
<td>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</td>
</tr>
<tr>
<td>38</td>
<td>Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <strong>Note.</strong> All Form 990 filers are required to complete Schedule O.</td>
</tr>
</tbody>
</table>
### Part V Statements Regarding Other IRS Filings and Tax Compliance

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable</td>
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<tr>
<td>1b</td>
<td>Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable</td>
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<tr>
<td>c</td>
<td>Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
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<tr>
<td>2a</td>
<td>Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending within the year covered by this return</td>
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<td>b</td>
<td>If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</td>
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<tr>
<td>Note</td>
<td>If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</td>
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<tr>
<td>3a</td>
<td>Did the organization have unrelated business gross income of $1,000 or more during the year?</td>
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<td>b</td>
<td>If “Yes,” has it filed a Form 990-T for this year? If “No” to line 3b, provide an explanation in Schedule O</td>
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<tr>
<td>4a</td>
<td>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)?</td>
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<td>b</td>
<td>If “Yes,” enter the name of the foreign country:</td>
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<tr>
<td>5a</td>
<td>Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td>
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<tr>
<td>b</td>
<td>Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
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<td>c</td>
<td>If “Yes” to line 5a or 5b, did the organization file Form 8886-T?</td>
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<tr>
<td>6a</td>
<td>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?</td>
<td></td>
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<tr>
<td>b</td>
<td>If “Yes,” did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
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<tr>
<td>7a</td>
<td>Organizations that may receive deductible contributions under section 170(c).</td>
<td></td>
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</tr>
<tr>
<td>a</td>
<td>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?</td>
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<td>b</td>
<td>If “Yes,” did the organization notify the donor of the value of the goods or services provided?</td>
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<tr>
<td>c</td>
<td>Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
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<td>d</td>
<td>If “Yes,” indicate the number of Forms 8282 filed during the year</td>
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<tr>
<td>7e</td>
<td>Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
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<td>f</td>
<td>Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</td>
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<td>g</td>
<td>If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</td>
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<td>h</td>
<td>If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?</td>
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<td>8</td>
<td>Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</td>
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<td>9</td>
<td>Sponsoring organizations maintaining donor advised funds.</td>
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<tr>
<td>a</td>
<td>Did the sponsoring organization make any taxable distributions under section 4966?</td>
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<tr>
<td>b</td>
<td>Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</td>
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<tr>
<td>10</td>
<td>Section 501(c)(7) organizations. Enter:</td>
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<tr>
<td>a</td>
<td>Initiation fees and capital contributions included on Part VIII, line 12</td>
<td></td>
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</tr>
<tr>
<td>b</td>
<td>Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</td>
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<td></td>
</tr>
<tr>
<td>11</td>
<td>Section 501(c)(12) organizations. Enter:</td>
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<tr>
<td>a</td>
<td>Gross income from members or shareholders.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12a</td>
<td>Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>If “Yes,” enter the amount of tax-exempt interest received or accrued during the year.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Section 501(c)(29) qualified nonprofit health insurance issuers.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Is the organization licensed to issue qualified health plans in more than one state?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Note</td>
<td>See the instructions for additional information the organization must report on Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>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</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Enter the amount of reserves on hand</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14a</td>
<td>Did the organization receive any payments for indoor tanning services during the tax year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>If “Yes,” has it filed a Form 720 to report these payments? If “No,” provide an explanation in Schedule O</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part VI  Governance, Management, and Disclosure

**For each “Yes” response to lines 2 through 7b below, and for a “No” response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.** See instructions.

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

<table>
<thead>
<tr>
<th>Section A. Governing Body and Management</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>1b</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>5</td>
</tr>
<tr>
<td>6</td>
</tr>
<tr>
<td>7a</td>
</tr>
<tr>
<td>7b</td>
</tr>
<tr>
<td>8</td>
</tr>
<tr>
<td>8a</td>
</tr>
<tr>
<td>8b</td>
</tr>
<tr>
<td>9</td>
</tr>
</tbody>
</table>

| Section B. Policies | (This Section B requests information about policies not required by the Internal Revenue Code.) |
|---------------------|
| 10a | Did the organization have local chapters, branches, or affiliates? |   |
| 10b | If “Yes,” did the organization have written policies and procedures governing the activities of such chapters, branches, and affiliates to ensure their operations are consistent with the organization’s exempt purposes? |   |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? |   |
| 11b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. |   |
| 12a | Did the organization have a written conflict of interest policy? If “No,” go to line 13. |   |
| 12b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? |   |
| 12c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If “Yes,” describe in Schedule O how this was done. |   |
| 13 | Did the organization have a written whistleblower policy? |   |
| 14 | Did the organization have a written document retention and destruction policy? |   |
| 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? |   |
| 15a | The organization’s CEO, Executive Director, or top management official. |   |
| 15b | Other officers or key employees of the organization. |   |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? |   |
| 16b | If “Yes,” did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization’s exempt status with respect to such arrangements? |   |

### Section C. Disclosure

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>List the states with which a copy of this Form 990 is required to be filed.</td>
</tr>
<tr>
<td>18</td>
<td>Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.</td>
</tr>
<tr>
<td></td>
<td>Own website</td>
</tr>
<tr>
<td></td>
<td>Another’s website</td>
</tr>
<tr>
<td></td>
<td>Upon request</td>
</tr>
<tr>
<td></td>
<td>Other (explain in Schedule O)</td>
</tr>
<tr>
<td>19</td>
<td>Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.</td>
</tr>
<tr>
<td>20</td>
<td>State the name, address, and telephone number of the person who possesses the organization’s books and records.</td>
</tr>
</tbody>
</table>

131 S 69th Street, Milwaukee, WI 53214
The table below lists the compensation of officers, directors, trustees, key employees, highest compensated employees, and independent contractors for the organization's tax year.

<table>
<thead>
<tr>
<th>Name and Title</th>
<th>Average hours per week</th>
<th>Position</th>
<th>Reportable compensation from W-2/1099-MISC</th>
<th>Reportable compensation from related organizations W-2/1099-MISC</th>
<th>Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Krista Brookman</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Member-at-Large</td>
<td>0</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Deidra Copeland</td>
<td>1</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Member-at-Large</td>
<td>0</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Debbie Ford</td>
<td>1</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Member-at-Large</td>
<td>0</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Kerrie Hoffman</td>
<td>1</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Member-at-Large</td>
<td>0</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Kara Krehbiel</td>
<td>1</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Member-at-large</td>
<td>0</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Amanda Mahlum</td>
<td>1</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Girl Member-at-Large (effective 4-2017)</td>
<td>0</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Anne Martin</td>
<td>1</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Member-at-Large and Committee Co-Chair</td>
<td>0</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Brooke McArdle</td>
<td>1</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Girl Member-at-Large (until 4-2017)</td>
<td>0</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Lauren Massman</td>
<td>1</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Girl Member-at-Large (effective 4-2017)</td>
<td>0</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Robert Monnat</td>
<td>1</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Member-at-Large</td>
<td>0</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Kelsey Palmer Bren</td>
<td>1</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Member-at-Large and Committee Chair</td>
<td>0</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Marci Pelzer</td>
<td>1</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Member-at-Large (until 4-2017)</td>
<td>0</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Tchernavia Rocker</td>
<td>1</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Member-at-Large (effective 4-2017)</td>
<td>0</td>
<td>✓</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cynthia Short</td>
<td>1</td>
<td>Member-at-Large</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Billie Jean Smith</td>
<td>1</td>
<td>Member-at-Large</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Tien Vo</td>
<td>1</td>
<td>Member-at-Large</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Sandy Wysocki</td>
<td>1</td>
<td>Member-at-Large</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Lora Strigens</td>
<td>1</td>
<td>Secretary</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Andy Narrai</td>
<td>1</td>
<td>Second Vice Chair and Committee Co-Chair</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Devona Wright-Cottrell</td>
<td>1</td>
<td>First Vice Chair</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Nicole Best</td>
<td>2</td>
<td>Treasurer and Committee Chair</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Carita Twinem</td>
<td>4</td>
<td>Board Chair</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Christy L Brown JD</td>
<td>50</td>
<td>Chief Executive Officer</td>
<td>228,123</td>
<td>0</td>
<td>14,398</td>
</tr>
<tr>
<td>Carol B Robinson CPA</td>
<td>50</td>
<td>Chief Financial Officer</td>
<td>120,888</td>
<td>0</td>
<td>8,718</td>
</tr>
<tr>
<td>Heidi Deininger</td>
<td>50</td>
<td>Chief Operating Officer</td>
<td>132,907</td>
<td>0</td>
<td>5,103</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>228,123</strong></td>
<td><strong>228,123</strong></td>
<td><strong>0</strong></td>
<td><strong>0</strong></td>
<td><strong>14,398</strong></td>
</tr>
</tbody>
</table>
### Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

#### (A) Name and title

<table>
<thead>
<tr>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Position (do not check more than one box, unless person is both an officer and a director/trustee)</td>
</tr>
<tr>
<td>Individual trustee or director</td>
</tr>
<tr>
<td>Institutional trustee</td>
</tr>
<tr>
<td>Officer</td>
</tr>
<tr>
<td>Key employee</td>
</tr>
<tr>
<td>Former highest compensated employee</td>
</tr>
</tbody>
</table>

#### (D) Reportable compensation from the organization (W-2/1099-MISC)

#### (E) Reportable compensation from related organizations (W-2/1099-MISC)

#### (F) Estimated amount of other compensation from the organization and related organizations

---

<table>
<thead>
<tr>
<th>1b Sub-total</th>
<th>481,918</th>
<th>0</th>
<th>28,219</th>
</tr>
</thead>
<tbody>
<tr>
<td>c Total from continuation sheets to Part VII, Section A</td>
<td>481,918</td>
<td>0</td>
<td>28,219</td>
</tr>
<tr>
<td>d Total (add lines 1b and 1c)</td>
<td>481,918</td>
<td>0</td>
<td>28,219</td>
</tr>
</tbody>
</table>

#### 2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>✓</td>
</tr>
</tbody>
</table>

#### 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If “Yes,” complete Schedule J for such individual

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>✓</td>
</tr>
</tbody>
</table>

#### 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If “Yes,” complete Schedule J for such individual

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>✓</td>
</tr>
</tbody>
</table>

### Section B. Independent Contractors

#### 1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization’s tax year.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### 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

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

Form 990 (2016)
### Part VIII Statement of Revenue

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

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td>742,443</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Membership dues</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Fundraising events</td>
<td>250,980</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Related organizations</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Government grants (contributions)</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other contributions, gifts, grants, and similar</td>
<td>464,010</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>amounts not included above</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a-1f: $5,810</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total. Add lines 1a–1f</td>
<td>1,457,433</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2a Camp and girl event income</td>
<td>900099</td>
<td>1,455,069</td>
<td>1,455,069</td>
<td>0</td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other program service revenue</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>g Total. Add lines 2a–2f</td>
<td>1,455,069</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Revenue</th>
<th>(i) Real</th>
<th>(ii) Personal</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Investment income (including dividends, interest, and</td>
<td>228,225</td>
<td>0</td>
<td>0</td>
<td>228,225</td>
</tr>
<tr>
<td>other similar amounts)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>5 Royalties</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

| 6a Gross rents                                         | 15,313            | 336                                  |                                |                                |
| b Less: rental expenses                                | 0                 | 0                                    |                                |                                |
| c Rental income or (loss)                             | 15,313            | 336                                  |                                |                                |
| d Net rental income or (loss)                          | 15,649            | 15,649                               | 0                              | 0                              |
| 7a Gross amount from sales of assets other than inventory | 5,090,210        | 277,897                              |                                |                                |
| b Less: cost or other basis and sales expenses        | 4,440,205         | 79,545                               |                                |                                |
| c Gain or (loss)                                      | 650,005           | 198,352                              |                                |                                |
| d Net gain or (loss)                                  | 848,357           | 0                                    | 0                             | 848,357                        |

| 8a Gross income from fundraising events (not including | 59,742            | 28,462                               |                                |                                |
|   contributions reported on line 1c) See Part IV, line|                   |                                      |                               |                                |
|   18                                                   |                   |                                      |                               |                                |
| b Less: direct expenses                                | 28,462            |                                      |                                |                                |
| c Net income or (loss) from fundraising events        | 31,280            | 0                                    | 31,280                        |                                |

| 9a Gross income from gaming activities. See Part IV, | 1,665             | 833                                  |                                |                                |
|   line 19                                              |                   |                                      |                                |                                |
| b Less: direct expenses                                | 833               |                                      |                                |                                |
| c Net income or (loss) from gaming activities          | 832               | 0                                    | 0                             | 832                            |

| 10a Gross sales of inventory, less returns and | 12,962,771        |                                      |                                |                                |
|   allowances                                          |                   |                                      |                                |                                |
| b Less: cost of goods sold                            | 5,875,006         |                                      |                                |                                |
| c Net income or (loss) from sales of inventory        | 7,087,765         | 7,087,765                            | 0                              | 0                              |

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>11a Product program incentives</td>
<td>900099</td>
<td>77,492</td>
<td>77,492</td>
<td>0</td>
</tr>
<tr>
<td>b Advertising</td>
<td>900099</td>
<td>8,725</td>
<td>975</td>
<td>750</td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d All other revenue</td>
<td>80,998</td>
<td>80,998</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>e Total. Add lines 11a–11d</td>
<td>167,215</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Total revenue. See instructions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### 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 response or note to any line in this Part IX . . . . . . . . . . . . . . . . . . .

<table>
<thead>
<tr>
<th>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . .</td>
<td>0</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Grants and other assistance to domestic individuals. See Part IV, line 22 . . . .</td>
<td>362,294</td>
<td>362,294</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . .</td>
<td>0</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Benefits paid to or for members . . . .</td>
<td>0</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Compensation of current officers, directors, trustees, and key employees . . . . .</td>
<td>349,011</td>
<td>69,578</td>
<td>249,344</td>
<td>30,089</td>
</tr>
<tr>
<td>6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . .</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>7 Other salaries and wages . . . . . . .</td>
<td>4,696,579</td>
<td>4,028,583</td>
<td>276,946</td>
<td>391,050</td>
</tr>
<tr>
<td>8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>195,714</td>
<td>155,513</td>
<td>22,368</td>
<td>17,833</td>
</tr>
<tr>
<td>9 Other employee benefits . . . . . . . . . . .</td>
<td>694,288</td>
<td>551,678</td>
<td>79,349</td>
<td>63,261</td>
</tr>
<tr>
<td>10 Payroll taxes . . . . . . . . . . . . . . . . .</td>
<td>466,244</td>
<td>378,410</td>
<td>48,862</td>
<td>38,972</td>
</tr>
<tr>
<td>11 Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Management . . . . . . .</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>b Legal . . . . . . . . . .</td>
<td>2,536</td>
<td>2,065</td>
<td>471</td>
<td>0</td>
</tr>
<tr>
<td>c Accounting . . . . . . . .</td>
<td>25,955</td>
<td>0</td>
<td>25,955</td>
<td>0</td>
</tr>
<tr>
<td>d Lobbying . . . . . . . . .</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>e Professional fundraising services. See Part IV, line 17</td>
<td>0</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Investment management fees . . . . .</td>
<td>49,235</td>
<td>0</td>
<td>49,235</td>
<td>0</td>
</tr>
<tr>
<td>g Other. If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . .</td>
<td>553,113</td>
<td>450,645</td>
<td>26,726</td>
<td>75,742</td>
</tr>
<tr>
<td>12 Advertising and promotion . . . . .</td>
<td>44,123</td>
<td>43,315</td>
<td>19</td>
<td>789</td>
</tr>
<tr>
<td>13 Office expenses . . . . . . . . . .</td>
<td>550,949</td>
<td>496,448</td>
<td>14,341</td>
<td>40,160</td>
</tr>
<tr>
<td>14 Information technology . . . . . . . . .</td>
<td>168,826</td>
<td>147,375</td>
<td>9,521</td>
<td>11,930</td>
</tr>
<tr>
<td>15 Royalties . . . . . . . . . . . .</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>16 Occupancy . . . . . . . . . . .</td>
<td>583,590</td>
<td>570,803</td>
<td>4,795</td>
<td>7,992</td>
</tr>
<tr>
<td>17 Travel . . . . . . . . . . . . . . . .</td>
<td>313,083</td>
<td>295,171</td>
<td>11,936</td>
<td>5,976</td>
</tr>
<tr>
<td>18 Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>19 Conferences, conventions, and meetings . . . . .</td>
<td>97,684</td>
<td>55,602</td>
<td>26,024</td>
<td>16,058</td>
</tr>
<tr>
<td>20 Interest . . . . . . . . . . . . . .</td>
<td>166,544</td>
<td>0</td>
<td>166,544</td>
<td>0</td>
</tr>
<tr>
<td>21 Payments to affiliates . . . . . . . . . .</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>22 Depreciation, depletion, and amortization . .</td>
<td>670,080</td>
<td>656,384</td>
<td>5,136</td>
<td>8,560</td>
</tr>
<tr>
<td>23 Insurance . . . . . . . . . . . .</td>
<td>152,211</td>
<td>127,180</td>
<td>19,271</td>
<td>5,760</td>
</tr>
<tr>
<td>24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Food and program supplies</td>
<td>314,841</td>
<td>313,911</td>
<td>15</td>
<td>915</td>
</tr>
<tr>
<td>b Incentives and appreciation</td>
<td>646,533</td>
<td>638,585</td>
<td>637</td>
<td>7,311</td>
</tr>
<tr>
<td>c Bad debt expense</td>
<td>61,954</td>
<td>58,958</td>
<td>0</td>
<td>2,996</td>
</tr>
<tr>
<td>d Bank and credit card fees</td>
<td>86,309</td>
<td>75,187</td>
<td>9,105</td>
<td>2,017</td>
</tr>
<tr>
<td>e All other expenses</td>
<td>41,864</td>
<td>36,377</td>
<td>2,350</td>
<td>3,137</td>
</tr>
<tr>
<td>25 Total functional expenses. Add lines 1 through 24e</td>
<td>11,293,560</td>
<td>9,514,062</td>
<td>1,048,950</td>
<td>730,548</td>
</tr>
<tr>
<td>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) . . . . . . . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part X Balance Sheet

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

<table>
<thead>
<tr>
<th></th>
<th>Beginning of year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash—non-interest-bearing</td>
<td>164,725</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>1,831,931</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>822,012</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>125,273</td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td>0</td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees’ beneficiary organizations (see instructions). Complete Part II of Schedule L</td>
<td>0</td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td>0</td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td>344,317</td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>84,019</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>19,244,210</td>
</tr>
<tr>
<td>10b</td>
<td>Less: accumulated depreciation</td>
<td>9,835,907</td>
</tr>
<tr>
<td>11</td>
<td>Investments—publicly traded securities</td>
<td>12,377,903</td>
</tr>
<tr>
<td>12</td>
<td>Investments—other securities. See Part IV, line 11</td>
<td>0</td>
</tr>
<tr>
<td>13</td>
<td>Investments—program-related. See Part IV, line 11</td>
<td>0</td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td>0</td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td>167,834</td>
</tr>
<tr>
<td>16</td>
<td>Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>25,344,745</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>808,561</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td>18</td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td>288,066</td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td>0</td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td>0</td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td>0</td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td>0</td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td>0</td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td>3,007,039</td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities. Add lines 17 through 25</td>
<td>4,103,666</td>
</tr>
</tbody>
</table>

Organizations that follow SFAS 117 (ASC 958), check here ▶ and complete lines 27 through 29, and lines 33 and 34.

<table>
<thead>
<tr>
<th></th>
<th>Beginning of year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Unrestricted net assets</td>
<td>19,578,185</td>
</tr>
<tr>
<td>28</td>
<td>Temporarily restricted net assets</td>
<td>1,061,958</td>
</tr>
<tr>
<td>29</td>
<td>Permanently restricted net assets</td>
<td>600,936</td>
</tr>
</tbody>
</table>

Organizations that do not follow SFAS 117 (ASC 958), check here □ and complete lines 30 through 34.

<table>
<thead>
<tr>
<th></th>
<th>Beginning of year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>Capital stock or trust principal, or current funds</td>
<td>30</td>
</tr>
<tr>
<td>31</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td>31</td>
</tr>
<tr>
<td>32</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td>32</td>
</tr>
<tr>
<td>33</td>
<td>Total net assets or fund balances</td>
<td>21,241,079</td>
</tr>
<tr>
<td>34</td>
<td>Total liabilities and net assets/fund balances</td>
<td>25,344,745</td>
</tr>
</tbody>
</table>
### Part XI Reconciliation of Net Assets
Check if Schedule O contains a response or note to any line in this Part XI.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>11,291,825</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>11,293,560</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>-1,735</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
<td>21,241,079</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>582,710</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td>0</td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td>0</td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td>0</td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
<td>-663,722</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))</td>
<td>21,158,332</td>
</tr>
</tbody>
</table>

### Part XII Financial Statements and Reporting
Check if Schedule O contains a response or note to any line in this Part XII.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990: Cash ☐ Accrual ✔ Other ☐</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed its method of accounting from a prior year or checked “Other,” explain in Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization’s financial statements compiled or reviewed by an independent accountant?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If “Yes,” check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization’s financial statements audited by an independent accountant?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If “Yes,” check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If “Yes” to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If “Yes,” did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td></td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>
**Part I  Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1. ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
3. ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4. ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital’s name, city, and state:
5. ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6. ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7. ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
8. ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9. ☐ An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
10. ☐ An organization that normally receives: (1) more than 33⅓% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33⅓% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
12. ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
   a. ☐ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
   b. ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
   c. ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
   d. ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
   e. ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
   f. ☐ Enter the number of supported organizations . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .
   g. ☐ Provide the following information about the supported organization(s).

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-10 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total**

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

Cat. No. 11285F  Schedule A (Form 990 or 990-EZ) 2016
**Part II**
Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

### Section A. Public Support

#### Calendar year (or fiscal year beginning in)

<table>
<thead>
<tr>
<th></th>
<th>(a) 2012</th>
<th>(b) 2013</th>
<th>(c) 2014</th>
<th>(d) 2015</th>
<th>(e) 2016</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gifts, grants, contributions, and membership fees received. (Do not include any “unusual grants.”)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td><strong>Total. Add lines 1 through 3</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td><strong>Public support. Subtract line 5 from line 4</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

#### Calendar year (or fiscal year beginning in)

<table>
<thead>
<tr>
<th></th>
<th>(a) 2012</th>
<th>(b) 2013</th>
<th>(c) 2014</th>
<th>(d) 2015</th>
<th>(e) 2016</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Amounts from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td><strong>Total support. Add lines 7 through 10</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>12</td>
<td>Gross receipts from related activities, etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td><strong>First five 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</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<p>| | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>14%</td>
</tr>
<tr>
<td>15</td>
<td>Public support percentage from 2015 Schedule A, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>15%</td>
</tr>
<tr>
<td>16a</td>
<td><strong>33 1/3% support test—2016.</strong> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16b</td>
<td><strong>33 1/3% support test—2015.</strong> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17a</td>
<td><strong>10%-facts-and-circumstances test—2016.</strong> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the “facts-and-circumstances” test, check this box and stop here. Explain in Part VI how the organization meets the “facts-and-circumstances” test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17b</td>
<td><strong>10%-facts-and-circumstances test—2015.</strong> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the “facts-and-circumstances” test, check this box and stop here. Explain in Part VI how the organization meets the “facts-and-circumstances” test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td><strong>Private foundation.</strong> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## 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

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2012</th>
<th>(b) 2013</th>
<th>(c) 2014</th>
<th>(d) 2015</th>
<th>(e) 2016</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any “unusual grants.”)</td>
<td>1,313,786</td>
<td>1,327,301</td>
<td>1,401,743</td>
<td>1,260,247</td>
<td>1,457,433</td>
<td>6,760,510</td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization’s tax-exempt purpose</td>
<td>12,970,637</td>
<td>12,376,573</td>
<td>13,265,341</td>
<td>13,979,477</td>
<td>14,592,954</td>
<td>67,184,982</td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td>14,284,423</td>
<td>13,703,874</td>
<td>14,667,084</td>
<td>15,239,724</td>
<td>16,050,387</td>
<td>73,945,492</td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support. (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>73,945,492</td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2012</th>
<th>(b) 2013</th>
<th>(c) 2014</th>
<th>(d) 2015</th>
<th>(e) 2016</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td>14,284,423</td>
<td>13,703,874</td>
<td>14,667,084</td>
<td>15,239,724</td>
<td>16,050,387</td>
<td>73,945,492</td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td>403,985</td>
<td>320,861</td>
<td>267,479</td>
<td>252,829</td>
<td>243,874</td>
<td>1,489,028</td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>10c Add lines 10a and 10b</td>
<td>403,985</td>
<td>320,861</td>
<td>267,479</td>
<td>252,829</td>
<td>243,874</td>
<td>1,489,028</td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td>800</td>
<td>0</td>
<td>0</td>
<td>3,116</td>
<td>750</td>
<td>4,666</td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td>125,316</td>
<td>167,375</td>
<td>156,507</td>
<td>204,448</td>
<td>167,216</td>
<td>820,862</td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12)</td>
<td>14,814,524</td>
<td>14,192,110</td>
<td>15,091,070</td>
<td>15,700,117</td>
<td>16,462,227</td>
<td>76,260,048</td>
</tr>
<tr>
<td>14 First five 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) | 15 | 96.96 % |
| 16 Public support percentage from 2015 Schedule A, Part III, line 15 | 16 | 96.82 % |

### Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) | 17 | 1.95 % |
| 18 Investment income percentage from 2015 Schedule A, Part III, line 17 | 18 | 2.09 % |
| 19a 33⅓% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33⅓%, and line 17 is not more than 33⅓%, check this box and stop here. The organization qualifies as a publicly supported organization | | |
| 19b 33⅓% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓%, and line 18 is not more than 33⅓%, 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 | | |
## Part IV  Supporting Organizations

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

### Section A. All Supporting Organizations

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Part IV Supporting Organizations (continued)

### Section A. Type I Supporting Organizations

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>Has the organization accepted a gift or contribution from any of the following persons?</td>
<td>Yes</td>
</tr>
<tr>
<td>a</td>
<td>A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>A family member of a person described in (a) above?</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>A 35% controlled entity of a person described in (a) or (b) above? If “Yes” to a, b, or c, provide detail in Part VI.</td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Type I Supporting Organizations

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>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?</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>Did the activities described in (a) constitute activities that, but for the organization’s involvement, one or more of the organization’s supported organization(s) would have engaged in these activities but for the organization’s involvement.</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Section C. Type II Supporting Organizations

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Were a majority of the organization’s directors or trustees during the tax year also a majority of the directors or trustees of each of the organization’s supported organization(s)? If “No,” describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Section D. All Type III Supporting Organizations

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>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.</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Section E. Type III Functionally Integrated Supporting Organizations

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Activities Test. Answer (a) and (b) below.</td>
<td>Yes</td>
</tr>
<tr>
<td>a</td>
<td>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.</td>
<td>Yes</td>
</tr>
<tr>
<td>b</td>
<td>Did the activities described in (a) 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.</td>
<td>Yes</td>
</tr>
<tr>
<td>3</td>
<td>Parent of Supported Organizations. Answer (a) and (b) below.</td>
<td>Yes</td>
</tr>
<tr>
<td>a</td>
<td>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? Provide details in Part VI.</td>
<td>Yes</td>
</tr>
<tr>
<td>b</td>
<td>Did the activities described in (a) constitute activities that, but for the organization’s involvement, one or more of the organization’s supported organization(s) would have 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.</td>
<td>Yes</td>
</tr>
<tr>
<td>Section A - Adjusted Net Income</td>
<td>(A) Prior Year</td>
<td>(B) Current Year (optional)</td>
</tr>
<tr>
<td>--------------------------------</td>
<td>----------------</td>
<td>----------------------------</td>
</tr>
<tr>
<td>1 Net short-term capital gain</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2 Recoveries of prior-year distributions</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3 Other gross income (see instructions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4 Add lines 1 through 3.</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5 Depreciation and depletion</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>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)</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7 Other expenses (see instructions)</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td><strong>8 Adjusted Net Income</strong> (subtract lines 5, 6, and 7 from line 4).</td>
<td><strong>8</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section B - Minimum Asset Amount</th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Average monthly value of securities</td>
<td>1a</td>
<td></td>
</tr>
<tr>
<td>b Average monthly cash balances</td>
<td>1b</td>
<td></td>
</tr>
<tr>
<td>c Fair market value of other non-exempt-use assets</td>
<td>1c</td>
<td></td>
</tr>
<tr>
<td>d Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
<td></td>
</tr>
<tr>
<td>e Discount claimed for blockage or other factors (explain in detail in <strong>Part VI</strong>):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3 Subtract line 2 from line 1d.</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5 Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6 Multiply line 5 by .035.</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7 Recoveries of prior-year distributions</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td><strong>8 Minimum Asset Amount</strong> (add line 7 to line 6)</td>
<td><strong>8</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section C - Distributable Amount</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Adjusted net income for prior year (from Section A, line 8, Column A)</td>
<td>1</td>
</tr>
<tr>
<td>2 Enter 85% of line 1.</td>
<td>2</td>
</tr>
<tr>
<td>3 Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
<td>3</td>
</tr>
<tr>
<td>4 Enter greater of line 2 or line 3.</td>
<td>4</td>
</tr>
<tr>
<td>5 Income tax imposed in prior year</td>
<td>5</td>
</tr>
<tr>
<td><strong>6 Distributable Amount</strong>. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
<td><strong>6</strong></td>
</tr>
</tbody>
</table>

7 ☐ Check here if the current year is the organization’s first as a non-functionally integrated Type III supporting organization (see instructions).
### Part V: Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

#### Section D - Distributions

<table>
<thead>
<tr>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3 Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4 Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5 Qualified set-aside amounts (prior IRS approval required)</td>
</tr>
<tr>
<td>6 Other distributions (describe in Part VI). See instructions.</td>
</tr>
<tr>
<td>7 <strong>Total annual distributions.</strong> Add lines 1 through 6.</td>
</tr>
<tr>
<td>8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
</tr>
<tr>
<td>9 Distributable amount for 2016 from Section C, line 6</td>
</tr>
<tr>
<td>10 Line 8 amount divided by Line 9 amount</td>
</tr>
</tbody>
</table>

#### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2016</th>
<th>(iii) Distributable Amount for 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Distributable amount for 2016 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Excess distributions carryover, if any, to 2016:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c From 2013 . . . . . .</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d From 2014 . . . . . .</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e From 2015 . . . . . .</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f <strong>Total</strong> of lines 3a through e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Applied to 2016 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i Carryover from 2011 not applied (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Distributions for 2016 from Section D, line 7: $</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Applied to 2016 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 <strong>Excess distributions carryover to 2017.</strong> Add lines 3j and 4c.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Breakdown of line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Excess from 2013 . . . .</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Excess from 2014 . . . .</td>
<td></td>
<td></td>
</tr>
<tr>
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<td></td>
<td></td>
</tr>
<tr>
<td>e Excess from 2016 . . . .</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part VI Schedule A, Part III, Line 12 - Other income is received from product incentives, returned check collection, disbanded troop accounts, and other sources.
## Schedule B

**Name of the organization**: GIRL SCOUTS OF WISCONSIN SOUTHEAST INC

**Employer identification number**: 39-0892833

### Organization type (check one):

<table>
<thead>
<tr>
<th>Filers of:</th>
<th>Section:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990 or 990-EZ</td>
<td>✔ 501(c)(3) (enter number) organization</td>
</tr>
<tr>
<td></td>
<td>□ 4947(a)(1) nonexempt charitable trust not treated as a private foundation</td>
</tr>
<tr>
<td></td>
<td>□ 527 political organization</td>
</tr>
<tr>
<td>Form 990-PF</td>
<td>□ 501(c)(3) exempt private foundation</td>
</tr>
<tr>
<td></td>
<td>□ 4947(a)(1) nonexempt charitable trust treated as a private foundation</td>
</tr>
<tr>
<td></td>
<td>□ 501(c)(3) taxable private foundation</td>
</tr>
</tbody>
</table>

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

**General Rule**

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

**Special Rules**

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

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

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

---

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

---

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

Cat. No. 30613X

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)
<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$684,487</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>$75,642</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>$38,500</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>$31,327</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>$25,000</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>$22,500</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>
## Part I

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

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td></td>
<td>$20,000</td>
<td>Person ✔</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>$20,000</td>
<td>Person ✔</td>
</tr>
<tr>
<td>9</td>
<td></td>
<td>$18,075</td>
<td>Person ✔</td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>$15,000</td>
<td>Person ✔</td>
</tr>
<tr>
<td>11</td>
<td></td>
<td>$14,000</td>
<td>Person ✔</td>
</tr>
<tr>
<td>12</td>
<td></td>
<td>$13,500</td>
<td>Person ✔</td>
</tr>
</tbody>
</table>
### Part I

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<table>
<thead>
<tr>
<th>(a) No.</th>
<th>(b) Name, address, and ZIP + 4</th>
<th>(c) Total contributions</th>
<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td></td>
<td>$10,900</td>
<td>Person ✓ Payroll □ Noncash □</td>
</tr>
<tr>
<td>14</td>
<td></td>
<td>$10,000</td>
<td>Person ✓ Payroll □ Noncash □</td>
</tr>
<tr>
<td>15</td>
<td></td>
<td>$10,000</td>
<td>Person ✓ Payroll □ Noncash □</td>
</tr>
<tr>
<td>16</td>
<td></td>
<td>$9,500</td>
<td>Person ✓ Payroll □ Noncash □</td>
</tr>
<tr>
<td>17</td>
<td></td>
<td>$9,015</td>
<td>Person ✓ Payroll □ Noncash □</td>
</tr>
<tr>
<td>18</td>
<td></td>
<td>$8,770</td>
<td>Person ✓ Payroll □ Noncash □</td>
</tr>
</tbody>
</table>
**Part I** Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
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<th>(b) Name, address, and ZIP + 4</th>
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<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td></td>
<td>$ 8,700</td>
<td>Person ✓ Payroll ❌ Noncash ❌</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>20</td>
<td></td>
<td>$ 7,500</td>
<td>Person ✓ Payroll ❌ Noncash ❌</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>21</td>
<td></td>
<td>$ 7,500</td>
<td>Person ✓ Payroll ❌ Noncash ❌</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>22</td>
<td></td>
<td>$ 7,500</td>
<td>Person ✓ Payroll ❌ Noncash ❌</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>23</td>
<td></td>
<td>$ 7,000</td>
<td>Person ✓ Payroll ❌ Noncash ❌</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>24</td>
<td></td>
<td>$ 6,400</td>
<td>Person ✓ Payroll ❌ Noncash ❌</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
</tbody>
</table>
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<tr>
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<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>25</td>
<td></td>
<td>$6,050</td>
<td>Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>26</td>
<td></td>
<td>$6,000</td>
<td>Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>27</td>
<td></td>
<td>$6,000</td>
<td>Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>28</td>
<td></td>
<td>$6,000</td>
<td>Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>29</td>
<td></td>
<td>$5,986</td>
<td>Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>30</td>
<td></td>
<td>$5,206</td>
<td>Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>No.</td>
<td>Name, address, and ZIP + 4</td>
<td>Total contributions</td>
<td>Type of contribution</td>
</tr>
<tr>
<td>-----</td>
<td>----------------------------</td>
<td>---------------------</td>
<td>---------------------</td>
</tr>
<tr>
<td>31</td>
<td>GIRL SCOUTS OF WISCONSIN SOUTHEAST INC</td>
<td>$5,125</td>
<td>Person ✔ Payroll ☐ Noncash ☐</td>
</tr>
<tr>
<td>32</td>
<td>GIRL SCOUTS OF WISCONSIN SOUTHEAST INC</td>
<td>$5,000</td>
<td>Person ✔ Payroll ☐ Noncash ☐</td>
</tr>
<tr>
<td>33</td>
<td>GIRL SCOUTS OF WISCONSIN SOUTHEAST INC</td>
<td>$5,000</td>
<td>Person ✔ Payroll ☐ Noncash ☐</td>
</tr>
<tr>
<td>34</td>
<td>GIRL SCOUTS OF WISCONSIN SOUTHEAST INC</td>
<td>$5,000</td>
<td>Person ✔ Payroll ☐ Noncash ☐</td>
</tr>
<tr>
<td>35</td>
<td>GIRL SCOUTS OF WISCONSIN SOUTHEAST INC</td>
<td>$5,000</td>
<td>Person ✔ Payroll ☐ Noncash ☐</td>
</tr>
<tr>
<td>36</td>
<td>GIRL SCOUTS OF WISCONSIN SOUTHEAST INC</td>
<td>$5,000</td>
<td>Person ✔ Payroll ☐ Noncash ☐</td>
</tr>
</tbody>
</table>
### Part I Contributors

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<table>
<thead>
<tr>
<th>(a) No.</th>
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<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>37</td>
<td></td>
<td>$5,000</td>
<td>Person ✓ Payroll ☐ Noncash ☐</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>(a) No.</th>
<th>(b) Name, address, and ZIP + 4</th>
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<th>(d) Type of contribution</th>
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(Complete Part II for noncash contributions.)

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(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
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(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
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(Complete Part II for noncash contributions.)

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<tr>
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</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>(a) No.</th>
<th>(b) Name, address, and ZIP + 4</th>
<th>(c) Total contributions</th>
<th>(d) Type of contribution</th>
</tr>
</thead>
</table>

(Complete Part II for noncash contributions.)
### Noncash Property

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate) (See instructions)</th>
<th>(d) Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>$</td>
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</tbody>
</table>
**Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ $  

Use duplicate copies of Part III if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee's name, address, and ZIP + 4</td>
</tr>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee's name, address, and ZIP + 4</td>
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</tbody>
</table>

<table>
<thead>
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<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee's name, address, and ZIP + 4</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee's name, address, and ZIP + 4</td>
</tr>
<tr>
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<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee's name, address, and ZIP + 4</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>
### Supplemental Financial Statements

**Part I**  
**Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**  
Complete if the organization answered “Yes” on Form 990, Part IV, line 6.

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>a</th>
<th>b</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization’s property, subject to the organization’s exclusive legal control?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>6</td>
<td>Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

**Part II**  
**Conservation Easements.**  
Complete if the organization answered “Yes” on Form 990, Part IV, line 7.

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Total number of conservation easements</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Total acreage restricted by conservation easements</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>Number of conservation easements on a certified historic structure included in (a)</td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td>Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Number of states where property subject to conservation easement is located</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?</td>
<td>Yes</td>
</tr>
<tr>
<td>6</td>
<td>Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year</td>
<td>$</td>
</tr>
<tr>
<td>8</td>
<td>Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Part III**  
**Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**  
Complete if the organization answered “Yes” on Form 990, Part IV, line 8.

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.</td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:</td>
<td></td>
</tr>
<tr>
<td>(i)</td>
<td>Revenue included on Form 990, Part VIII, line 1</td>
<td>$</td>
</tr>
<tr>
<td>(ii)</td>
<td>Assets included in Form 990, Part X</td>
<td>$</td>
</tr>
<tr>
<td>2</td>
<td>If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Revenue included on Form 990, Part VIII, line 1</td>
<td>$</td>
</tr>
<tr>
<td>b</td>
<td>Assets included in Form 990, Part X</td>
<td>$</td>
</tr>
</tbody>
</table>
Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets  

3 Using the organization’s acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
   a  Public exhibition  
   b  Scholarly research  
   c  Preservation for future generations

4 Provide a description of the organization’s collections and explain how they further the organization’s exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization’s collection?  
   □ Yes  □ No

Part IV  Escrow and Custodial Arrangements.

Complete if the organization answered “Yes” on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  
   □ Yes  □ No

1b If “Yes,” explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>727,867</td>
<td>1,028,154</td>
<td>1,286,978</td>
<td>365,329</td>
<td>9,408,303</td>
</tr>
</tbody>
</table>

Part V  Endowment Funds.

Complete if the organization answered “Yes” on Form 990, Part IV, line 10.

1a Beginning of year balance  
   □ Yes  □ No

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
   a  Board designated or quasi-endowment  
      □ Yes  □ No

Part VI  Land, Buildings, and Equipment.

Complete if the organization answered “Yes” on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td>0</td>
<td>727,867</td>
<td>727,867</td>
<td>727,867</td>
</tr>
<tr>
<td>1b Buildings</td>
<td>0</td>
<td>14,964,791</td>
<td>7,957,035</td>
<td>7,007,756</td>
</tr>
<tr>
<td>1c Leasehold improvements</td>
<td>0</td>
<td>39,634</td>
<td>19,261</td>
<td>20,373</td>
</tr>
<tr>
<td>1d Equipment</td>
<td>0</td>
<td>1,393,483</td>
<td>1,028,154</td>
<td>365,329</td>
</tr>
<tr>
<td>1e Other</td>
<td>0</td>
<td>2,118,435</td>
<td>831,457</td>
<td>1,286,978</td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)  
   □ Yes  □ No
**Part VII**  Investments—Other Securities.
Complete if the organization answered “Yes” on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category</th>
<th>(b) Book value</th>
<th>(c) Method of valuation:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td>Cost or end-of-year market value</td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
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<td>(B)</td>
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<td>(D)</td>
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<td>(E)</td>
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<td>(F)</td>
<td></td>
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<tr>
<td>(G)</td>
<td></td>
<td></td>
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<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)

**Part VIII** Investments—Program Related.
Complete if the organization answered “Yes” on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td>Cost or end-of-year market value</td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
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<td>(8)</td>
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<tr>
<td>(9)</td>
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</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)

**Part IX** Other Assets.
Complete if the organization answered “Yes” on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
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<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
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<tr>
<td>(4)</td>
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<td>(5)</td>
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<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

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

**Part X** Other Liabilities.
Complete if the organization answered “Yes” on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability | (b) Book value
---|---
(1) Federal income taxes | 3,322,152
(2) **Frozen defined benefit obligation** | 3,322,152
(3) |  
(4) |  
(5) |  
(6) |  
(7) |  
(8) |  
(9) |  

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization’s financial statements that reports the organization’s liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII □
## Part XI  Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered “Yes” on Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td>11,842,490</td>
</tr>
<tr>
<td>2</td>
<td><strong>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Net unrealized gains (losses) on investments</td>
<td>582,710</td>
</tr>
<tr>
<td></td>
<td>b Donated services and use of facilities</td>
<td>17,190</td>
</tr>
<tr>
<td></td>
<td>c Recoveries of prior year grants</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIII.)</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>e Add lines 2a through 2d</td>
<td>599,900</td>
</tr>
<tr>
<td>3</td>
<td><strong>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>49,235</td>
</tr>
<tr>
<td></td>
<td>b Other (Describe in Part XIII.)</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>c Add lines 4a and 4b</td>
<td>49,235</td>
</tr>
<tr>
<td>4</td>
<td><strong>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)</strong></td>
<td>11,291,825</td>
</tr>
</tbody>
</table>

## Part XII  Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered “Yes” on Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td>11,925,237</td>
</tr>
<tr>
<td>2</td>
<td><strong>Amounts included on line 1 but not on Form 990, Part IX, line 25:</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Donated services and use of facilities</td>
<td>17,190</td>
</tr>
<tr>
<td></td>
<td>b Prior year adjustments</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>c Other losses</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIII.)</td>
<td>663,722</td>
</tr>
<tr>
<td></td>
<td>e Add lines 2a through 2d</td>
<td>680,912</td>
</tr>
<tr>
<td>3</td>
<td><strong>Subtract line 2e from line 1</strong></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td><strong>Amounts included on Form 990, Part IX, line 25, but not on line 1:</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>49,235</td>
</tr>
<tr>
<td></td>
<td>b Other (Describe in Part XIII.)</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>c Add lines 4a and 4b</td>
<td>49,235</td>
</tr>
<tr>
<td>5</td>
<td><strong>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</strong></td>
<td>11,293,560</td>
</tr>
</tbody>
</table>

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

**Schedule D, Part V, Line 4 - The primary long term financial objective for the Organization’s endowments is to preserve the real (inflation adjusted) purchasing power of the endowment assets and income after accounting for endowment spending, inflation and costs of portfolio management. Income from these endowments are to benefit girls throughout Southeastern Wisconsin or as designated by the specific donor.**

**Schedule D, Part XII, Line 2d - One-time, non-operational expense that reflects a valuation change in the frozen defined benefit obligation.**
**Part I  Fundraising Activities.** Complete if the organization answered “Yes” on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.
   - [ ] Mail solicitations
   - [ ] Internet and email solicitations
   - [ ] Phone solicitations
   - [ ] In-person solicitations
   - [ ] Solicitation of non-government grants
   - [ ] Solicitation of government grants
   - [ ] Special fundraising events

2a. Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? [ ] Yes [ ] No

2b. If “Yes,” list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

<table>
<thead>
<tr>
<th>(i) Name and address of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>[ ] Yes [ ] No</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
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<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50083H Schedule G (Form 990 or 990-EZ) 2016
### Part II Fundraising Events
Complete if the organization answered “Yes” on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Event #1</th>
<th>(b) Event #2</th>
<th>(c) Other events</th>
<th>(d) Total events (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross receipts . . .</td>
<td>310,722</td>
<td></td>
<td></td>
<td>310,722</td>
</tr>
<tr>
<td>2 Less: Contributions . . .</td>
<td>250,980</td>
<td></td>
<td></td>
<td>250,980</td>
</tr>
<tr>
<td>3 Gross income (line 1 minus line 2) . . . . . . . . . . .</td>
<td>59,742</td>
<td></td>
<td></td>
<td>59,742</td>
</tr>
<tr>
<td>4 Cash prizes . . . .</td>
<td>0</td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>5 Noncash prizes . . .</td>
<td>0</td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>6 Rent/facility costs . . .</td>
<td>0</td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>7 Food and beverages . .</td>
<td>22,033</td>
<td>0</td>
<td></td>
<td>22,033</td>
</tr>
<tr>
<td>8 Entertainment . . .</td>
<td>0</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>9 Other direct expenses .</td>
<td>6,429</td>
<td></td>
<td></td>
<td>6,429</td>
</tr>
<tr>
<td>10 Direct expense summary. Add lines 4 through 9 in column (d) . . . . . . . . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td>28,462</td>
</tr>
<tr>
<td>11 Net income summary. Subtract line 10 from line 3, column (d) . . . . . . . . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td>31,280</td>
</tr>
</tbody>
</table>

### Part III Gaming
Complete if the organization answered “Yes” on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Noncash prizes . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Rent/facility costs . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Other direct expenses .</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Volunteer labor . .</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
<td>☐ Yes</td>
</tr>
<tr>
<td>7 Direct expense summary. Add lines 2 through 5 in column (d) . . . . . . . . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td>28,462</td>
</tr>
<tr>
<td>8 Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . . . . . . . . . .</td>
<td></td>
<td></td>
<td></td>
<td>31,280</td>
</tr>
</tbody>
</table>

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? ☐ Yes ☐ No
   - b If “No,” explain: ____________________________________________________________

10a. Were any of the organization’s gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No
   - b If “Yes,” explain: ____________________________________________________________
11 Does the organization conduct gaming activities with nonmembers? □ Yes □ No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? □ Yes □ No

13 Indicate the percentage of gaming activity conducted in:
   a. The organization’s facility
   b. An outside facility

14 Enter the name and address of the person who prepares the organization’s gaming/special events books and records:
   Name
   Address

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? □ Yes □ No

15b If “Yes,” enter the amount of gaming revenue received by the organization $ and the amount of gaming revenue retained by the third party $.

15c If “Yes,” enter name and address of the third party:
   Name
   Address

16 Gaming manager information:
   Name
   Gaming manager compensation $.
   Description of services provided
   Director/officer □ Employee □ Independent contractor

17 Mandatory distributions:
   a. Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? □ Yes □ No
   b. Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization’s own exempt activities during the tax year $.

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.
**Part I General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [ ] Yes [ ] No

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered “Yes” on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<tr>
<td>(12)</td>
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</tr>
</tbody>
</table>

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
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.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of noncash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of noncash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 See Schedule I, Part IV, Statement 1</td>
<td></td>
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<td></td>
<td></td>
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<tr>
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<td>6</td>
<td></td>
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</tr>
</tbody>
</table>

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

Schedule I, Part I, Line 2 - * Members can request need-based financial assistance from the council for membership dues, troop supplies, camping and events. Financial assistance is awarded and tracked based on standard council procedures. Funds are disbursed by the council directly to Girl Scouts of the USA for membership dues or applied as a reduction to the balance due to Girl Scouts of Wisconsin Southeast for the council activity for which the funds were awarded. Funds are not distributed directly to the individuals. Financial assistance can also be provided to troops to support their girl members and service units to support volunteers and troops within their area. Appropriate usage of troop and service unit funds is communicated through volunteer training and broadly monitored through the requirement of annual cash reports. All payments are made to organizations within the United States.

Schedule I, Part III - Assistance is given to members towards Girl Scout USA membership dues, troop supplies, and registration fees for camp, events and destinations/global trips. The number of recipients reflects the number of members. Financial assistance is also provided to troops or service units that support troops and volunteers. The number of recipients reflects the number of troops or service areas, which each positively impact multiple members.
<table>
<thead>
<tr>
<th>Type of grant Description of Non-Cash Asst.</th>
<th>Number of recipients</th>
<th>Amt. of cash grant</th>
<th>Amt. of non-cash asst.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistance for membership dues and troop supplies</td>
<td>10915</td>
<td>192,446</td>
<td></td>
</tr>
<tr>
<td>Assistance to girls for camping and destinations</td>
<td>736</td>
<td>137,615</td>
<td></td>
</tr>
<tr>
<td>Assistance to girls for events</td>
<td>219</td>
<td>4,945</td>
<td></td>
</tr>
<tr>
<td>Assistance to Service Units and Troops</td>
<td>53</td>
<td>26,988</td>
<td></td>
</tr>
<tr>
<td>College scholarship to former girl members</td>
<td>1</td>
<td>300</td>
<td></td>
</tr>
</tbody>
</table>
### Part I: Questions Regarding Compensation

1a. Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>First-class or charter travel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel for companions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tax indemnification and gross-up payments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discretionary spending account</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing allowance or residence for personal use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments for business use of personal residence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health or social club dues or initiation fees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal services (such as, maid, chauffeur, chef)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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.

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?

3. Indicate which, if any, of the following the filing organization used to establish the compensation of the organization’s CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

<table>
<thead>
<tr>
<th>Method</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compensation committee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent compensation consultant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form 990 of other organizations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Written employment contract</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Compensation survey or study</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Approval by the board or compensation committee</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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:

   a. Receive a severance payment or change-of-control payment?
   b. Participate in, or receive payment from, a supplemental nonqualified retirement plan?
   c. Participate in, or receive payment from, an equity-based compensation arrangement?

   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:

   a. The organization?
   b. Any related organization?

   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:

   a. The organization?
   b. Any related organization?

   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.

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.

9. If “Yes” on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?
**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.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)–(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christy L Brown JD, Chief Executive Officer</td>
<td>(i) 228,123 (ii) 0 (iii) 0</td>
<td>13,223 (A)</td>
<td>1,175 (B)</td>
<td>242,521 (C)</td>
<td>0 (D)</td>
</tr>
<tr>
<td>1</td>
<td>(i) 0 (ii) 0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>(i) 0 (ii) 0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>3</td>
<td>(i) 0 (ii) 0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>4</td>
<td>(i) 0 (ii) 0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>(i) 0 (ii) 0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>6</td>
<td>(i) 0 (ii) 0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>7</td>
<td>(i) 0 (ii) 0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>8</td>
<td>(i) 0 (ii) 0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>9</td>
<td>(i) 0 (ii) 0</td>
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<tr>
<td>10</td>
<td>(i) 0 (ii) 0</td>
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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.

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Southeast, Inc contracts with a whistleblower hotline (Ethics Line from NAVEX Global) to allow any officer, director, staff or volunteer committee, adult delegates elected by geographical regions, and girl delegates elected by geographic regions. Members of the corporation applicable salary ranges. The CEO reviews the salary of the CFO in comparison with other CFO's of similar not-for-profit organizations in and then reviewed by a Girl Scouts of Wisconsin Southeast, Inc. audit committee member(s). After approval of the final draft, an electronic Wisconsin Southeast, Inc. are available for public viewing at the council's administrative office located at 131 S. 69th Street, Milwaukee, Members of the corporation consist of voting members of the board of directors, voting members of the board development (nominating) elect officers and members of the board, delegates to the national council, consider proposed amendments to bylaws, and consider other business appropriate to come before the corporation.

Form 990, Part VI, Section A, Line 6 - The bylaws of Girl Scouts of Wisconsin Southeast, Inc provide for members of the corporation.

Form 990, Part VI, Section A, Line 7a - Members elect the board of directors, which is the governing body.

Form 990, Part VI, Section B, Line 12c - All officers, directors and committee members of Girl Scouts of Wisconsin Southeast Inc are required annually to complete and sign the council's conflict of interest disclosure statement. Executed statements are received and reviewed by the chair of the board and the chief executive officer. Board actions are monitored to ensure board members excuse themselves from participating in, discussing, and voting on matters when a personal conflict arises. Contracts, purchase orders, and other staff activities are regularly monitored by the CEO and finance area of potential conflicts with established policy. Girl Scouts of Wisconsin Southeast, Inc contracts with a whistleblower hotline (Ethics Line from NAVEX Global) to allow any officer, director, staff or volunteer access to a confidential vehicle to report potential abuses of the conflict of interest policy.

Form 990, Part VI, Section B, Line 15 - A designated task group of the Board of Directors annually meets to review the performance of Girl Scouts of Wisconsin Southeast Inc.'s CEO. Salary increases are determined based on merit and market, including salary ranges provided by an outside national consultant. For other staff - Girl Scouts of Wisconsin Southeast, Inc. has adopted and utilizes job grade levels and applicable salary ranges. The CEO reviews the salary of the CFO in comparison with other CFO's of similar not-for-profit organizations in the region. In 2015, GSWISE engaged an outside consultant to review our current compensation for all staff and set salary ranges. The executive team's salaries were within benchmarks.

Form 990, Part VI, Section C, Line 19 - The governing documents, conflict of interest policy, and financial statements of Girl Scouts of Wisconsin Southeast, Inc. are available for public viewing at the council's administrative office located at 131 S. 69th Street, Milwaukee, Wisconsin.

Form 990, Part VII, Section A, Line 1a - In accordance with 990 instructions, reported compensation is based on the 2016 calendar year W-2 earnings, which is not consistent with the fiscal year earnings.

Form 990, Part XI, Line 9 - Increase in frozen defined benefit obligation due to valuation assumption changes (ex. updated mortality table)
Third Program Service Accomplishments Description

develop new leadership skills together, aligning with the unique cultural values and language needs of their community. The program was designed to expand leadership development opportunities for women and girls in the region's Latina community. In 2017, GSWISE served more than 850 girls and 100 adult volunteers through the Latina Initiative. Information reported this year was split out of the MEMBERSHIP and GSLE program information historically reported in this Form 990 section. While this program is supported in various ways throughout the council, expenses reported here reflect only direct program costs.