Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For the	2022 calend	lar year, or tax year begir	ning	10-0) 1 , 2022 , an	d ending	_ 0:	9-30 , 2023
В	Check if a	pplicable:	C Name of organization GI	RL SCOUTS OF NE	W MEXICO TR	AILS, INC	•	D Empl	loyer identification number
	Address c	change	Doing business as					1	85-6011246
	Name cha	ange	Number and street (or P.O. bo	x if mail is not delivered to stree	et address)	F	Room/suite	E Telep	phone number
	Initial retu	rn	4000 JEFFERSON	I PLAZA NE					(505)343-1040
	Final retur	rn/terminated	City or town, state or province	, country, and ZIP or foreign po	stal code			G Gros	ss receipts
	Amended	return	Albuquerque, M	M 87109				\$	4,395,501
	Application	n pending	F Name and address of principa		LATHAM		H(a) Is this a	group return	for subordinates? Yes X No
			Same as C abov	<i>r</i> e			H(b) Are al	l subordinat	tes included? Yes No
ı	Tax-exem	pt status:	501(c)(3) 501(c) () (insert no.)	947(a)(1) or	527	If "No	" attach a li	st. See instructions
J	Website:	www	.nmgirlscouts.org	<u> </u>			H(c) Group	exemption	number
K	Form of or	rganization: X	Corporation Trust Ass	ociation Other	I	L Year of formation	п: 1958 м	State of leg	gal domicile: NM
Pa	art I	Summar			·				
	1	Briefly descr	ibe the organization's miss	ion or most significant a	ctivities: GIRI	SCOUTING	BUILDS GI	RLS OF	COURAGE,
		CONFIDEN	CE AND CHARACTER,	WHO MAKE THE W	ORLD A BETT	ER PLACE.	GIRL SCOU	rs is	THE PREMIER
Governance		LEADERSH	IP ORGANIZATION E	OR GIRLS.					
.uai									
Ne.	2	Check this bo	ox 🔲 if the organization of	liscontinued its operation	ns or disposed of	more than 25%	6 of its net asset	s.	
õ	3	Number of v	oting members of the gove	erning body (Part VI, line	e 1a)			3	20
•შ ഗ	4	Number of in	ndependent voting member	s of the governing body	(Part VI, line 1b)			4	20
Activities &	5	Total number	er of individuals employed in	n calendar year 2022 (P	art V, line 2a) .			5	74
ctiv	6	Total number	er of volunteers (estimate if	necessary)				6	2,094
⋖	7a	Total unrelat	ted business revenue from	Part VIII, column (C), lin	ie 12			7a	0
	b	Net unrelate	ed business taxable income	from Form 990-T, Part	I, line 11			7b	0
							Prior Yea	r	Current Year
	8	Contributions	s and grants (Part VIII, line	1h)			1,28	2,948	542,760
ne	9	Program ser	rvice revenue (Part VIII, line	e 2g)			26	9,172	271,788
Revenue	10	Investment in	ncome (Part VIII, column (A	A), lines 3, 4, and 7d) .			3	8,301	72,090
Re	11	Other revenu	ue (Part VIII, column (A), lir	nes 5, 6d, 8c, 9c, 10c, ar	nd 11e)		2,22	0,381	2,209,219
	12	Total revenue	ie - add lines 8 through 11 (must equal Part VIII, col	umn (A), line 12)		3,81	0,802	3,095,857
	13	Grants and s	similar amounts paid (Part	IX, column (A), lines 1-3)		5	0,247	62,173
	14	Benefits paid	d to or for members (Part I	X, column (A), line 4) .					0
	15	Salaries, oth	ner compensation, employee	e benefits (Part IX, colur	nn (A), lines 5-10))	1,47	9,413	1,826,072
Expenses	16a	Professional	I fundraising fees (Part IX,	column (A), line 11e) .					0
oeu	b	Total fundrai	ising expenses (Part IX, co	lumn (D), line 25)		262,525			
$\overline{\Sigma}$	17	Other expens	ses (Part IX, column (A), li	nes 11a-11d, 11f-24e)			1,20	3,120	1,255,249
	18	Total expens	ses. Add lines 13-17 (must	equal Part IX, column (A), line 25)		2,73	2,780	3,143,494
	19	Revenue les	s expenses. Subtract line	18 from line 12			1,07	8,022	(47,637)
ō	Ses						Beginning of Cur	rent Year	End of Year
sets	<u>E</u> 20	Total assets	(Part X, line 16)				4,93	0,938	5,166,278
Net Assets or	열 21		, ,				27	9,170	429,791
			or fund balances. Subtract	line 21 from line 20			4,65	1,768	4,736,487
	art II		ire Block						
			clare that I have examined this retu claration of preparer (other than off				my knowledge and b	eliet, it is	
Sig	ın		CCA LATHAM						***
_	·	Signature of office						Da	ate
He	re		CCA LATHAM, CHIEF	' EXECUTIVE OFFI	CER				
		Type or print nar		December de siement me		D-4-			DTIN
D = 1	: al	, ,	eparer's name	Preparer's signature		Date	Check	_	PTIN
Pai		SCOTT E		SCOTT ELIASON		07-31-202		mployed	P02372673
	eparer			o Accounting Gr	oup LLC		Firm's EIN		
US	e Only	Firm's address		coln Road NE			Phone no.		
				que NM 87109				505-	323-2035
May	the IRS	S discuss this	return with the preparer sh	nown above? See instruc	ctions				X Yes No

) (Revenue \$

including grants of \$

2,346,356

4e

(Expenses \$

Total program service expenses

Part IV

85-6011246

Checklist of Required Schedules

Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 X 2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions 2 Х 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 4 X Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 5 5 X Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 6 have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 6 X 7 Did the organization receive or hold a conservation easement including easements to preserve open space. 7 Х 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 X Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a 9 custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or 9 X Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 Х 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." 11a Х b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more 11b X c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more Х d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets Х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Х f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X 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 14b Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 Х 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 19 Х 20a X 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 х

Part IV

GIRL SCOUTS OF NEW MEXICO TRAILS, INC. 85-6011246 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part.I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
00	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part.II	26		**
27		26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			Λ
	Part IV, instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	251		
20	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	26		v
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		X
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	0,		
	19? Note : All Form 990 filers are required to complete Schedule O	38	х	
Par				
. 41	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	х	

Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 7	4		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		х
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

85-6011246

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

Section A.	Governing Body and Management	
	Check if Schedule O contains a response or note to any line in this Part VI	X
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule Q	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Vaa	Na
100	Did the ergenization have lead shorters branches or effiliates?	400	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a	X	
D	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	x	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	- I I I	Λ	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i>			
	describe on Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	x	
14	Did the organization have a written document retention and destruction policy?	14	х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
b	Other officers or key employees of the organization	15b	х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	х	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed New Mexico			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	THE ORGANIZATION (505)343-1040, 4000 JEFFERSON PLAZA NE, Albuquerque, NM 87109			

Part VII C

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - · List all of the organization's current key employees, if any. See the instructions for definition of "key employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any rela	ted organizat	ion co	mper	nsate	ed a	ny cum	ent	officer, director, or	trustee.	
(C)								•		
		Position						 .		
(A)	(B)	(do not check more than one						(D)	(E)	(F)
Name and title	Average hours	box, unless person is both an officer and a director/trustee)					1	Reportable compensation	Reportable compensation	Estimated amount of other
	per week	OIIIC	officer and a director/trustee)					from the	from related	compensation
	(list any	2 =	0 T T O			д ₀ д п		organization (W-2/	organizations (W-2/	from the
	hours for	Individual or director	stitu	Officer	ey e	ighe nplo	Forme	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
	related organizations	ector	tion		Key employee	st co	ň	,	,	Ü
	below	Individual trustee or director	Institutional trustee		yee	mpe				
	dotted line)	ee	stee			Highest compensated employee				
						led				
(1) REBECCA LATHAM	38.00									
CHIEF EXECUTIVE OFFICER				х				129,615	0	3,780
(2) ANNETTE LEFEBRE	38.00							-		
DIRECTOR OF ADMIN & OPERATIONS				х				88,263	0	9,408
(3) MELISSA BRUNEY	38.00									
CHIEF MEMBERSHIP OFFICER				х				74,531	0	2,109
(4) CAROLE JARAMILLO	1.00									
BOARD MEMBER		х						0	0	0
(5) CRISTINA TORRES ARCHIBEQUE	1.00									
BOARD MEMBER		Х						0	0	0
(6) AMPARO URSEY	1.00									
BOARD MEMBER		Х						0	0	0
(7) WANDA LUCERO	1.00									
BOARD MEMBER		Х						0	0	0
(8) CAITLIN LOVELL	1.00									
BOARD MEMBER		Х						0	0	0
(9) MAXINE VELASQUES	1.00									
BOARD MEMBER		х						0	0	0
(10)BOBBIE BATLEY	1.00									
BOARD MEMBER		х						0	0	0
(11)KELLIE MIXON	1.00									
BOARD MEMBER		х						0	0	0
(12)MARIBETH THORNTON	1.00									
BOARD MEMBER		х						0	0	0
(13)MICHAEL NUÑEZ	1.00									
BOARD MEMBER		Х						0	0	0
(14)TAMMY JARAMILLO	1.00									
BOARD MEMBER		Х						0	0	0

EEA Form **990** (2022)

Form 990 (2022) GIRL SCOUTS OF NEW MEXICO TRAILS, INC. 85-6011246 Page 8

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

		,			-	C)					T		
						sition							
	(A)	(B)	(do ı	not che			nan one		(D)	(E)		(F)	
	Name and title	Average					s both an	ı	Reportable	Reportable	Estin	nated amou of other	nt
		hours per week	Offic	er and	a dir	ector	/trustee)		compensation from the	compensation from related	со	mpensation	i
		(list any	0 =		٦	- -	е т	П	organization (W-2/	organizations (W-2/		from the	
		hours for	Individual trustee or director	nstiti	Office	Key employee	dighe	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	1	ınization an d organizati	
		related	dual	tion	۳	mpl	est co	er	1000-1420)	1033-1420)	Totalo	u organizati	0113
		organizations below	trus	a tr		оуеє	omp						
		dotted line)	lee	Institutional trustee			ensa						
							ted						
(15)NA	NCY MARTIRA	1.00											
· -'	MEMBER		х						0	0			0
	ANE TRYTHALL	1.00											<u> </u>
) MEMBER		х						0	0			0
(17)AL	ONI HERRERA	1.00											
GIRL	MEMBER		х						0	0			0
(18)JU	LIE MILLER RUGG	1.00											
BOARI	MEMBER		Х						0	0			0
(19)TA	MMI_MOE	1.00											
BOARI	MEMBER		Х						0	0			0
(20) MA	RTI_FOURNIER-REVO	4.00											
	CHAIR		X		Х				0	0	-		0
(21)KA	REN_BERGREN	4.00											
	CHAIR		Х		Х				0	0	-		0
	TTY KOMKO	4.00											
SECRI		4 00	X		Х				0	0	-		0
TREAS	NE_LAYNE	<u> </u>	х		x				0	0			0
(24)	OURER				Λ				0	0			0
(24)													
(25)													
<u> </u>													
1b	Subtotal												
С	Total from continuation sheets to Part VII, Sect	ion A .						. [
d	Total (add lines 1b and 1c)								292,409	0		15,29	7
2	Total number of individuals (including but not limit	ed to those li	sted a	bove)) wh	no re	eceived	d mc	ore than \$100,000	of			
	reportable compensation from the organization												1
												Yes I	No
3	Did the organization list any former officer, direct		,	, ,	,		U		•				
	employee on line 1a? If "Yes," complete Schedul										3		X
4	For any individual listed on line 1a, is the sum of re	•	•					•					
	organization and related organizations greater th												_
_	individual										4		<u> </u>
5	for services rendered to the organization? <i>If "Yes</i>						_				5		37
Secti	on B. Independent Contractors	, complete	Scried	iule J	101	Suc	n perso	011 .			5		<u> </u>
1	Complete this table for your five highest compensate	ted independ	ent co	ntract	tors	tha	t receiv	/ed i	more than \$100.00	00 of			—
-	compensation from the organization. Report comp												
	(A)								(B)		(C)		
	s							Description of service	es	Compen	sation		
2	Total number of independent contractors (including	a but not limi	ted to	those	, lie	ted 1	ahove)	wh	0				
-	received more than \$100,000 of compensation fro	•				(

85-6011246

Form 990 (2022) GIRL SCOUT

Part VIII Statement of Revenue

i dit	• • • •	Check if Schedule O co	intains a respons	e or n	ote to any line in this	s Part VIII			
		Oncok ii Goncadio G Go	ricanio a respens	0111	ote to driy iiile iii tiiil	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns .		1a	20,633				
	b	Membership dues		1b					
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events		1c					
no Do	d	Related organizations .		1d					
r Ar	е	Government grants (contri		1e	76,832				
nia Big	f	All other contributions, gift			,				
Sir		and similar amounts not in	•	1f	445,295				
the the	g	Noncash contributions inc	luded in						
d of		lines 1a-1f		1g	\$				
တွဲ မွ	h	Total. Add lines 1a-1f				542,760			
					Business Code				
	2a	CAMP/NONCAMP REVE	NUE		900099	271,788	271,788		
Program Service Revenue	b								
er. Jue	С								
m S	d								
ga Re	е								
Pro	f	All other program service r	revenue						
	g	Total. Add lines 2a-2f .				271,788			
	3	Investment income (includi	ng dividends, inte	erest, a	and				
		other similar amounts) .				62,183			62,183
	4	Income from investment of		•	- t				
	5	Royalties							
			(i) Rea	l	(ii) Personal				
		Gross rents	6a 3	,410					
		Less: rental expenses	6b						
		Rental income or (loss)		,410					
	d	Net rental income or (loss)				3,410	3,410		
	7a	Gross amount from	(i) Securiti	es	(ii) Other				
		sales of assets							
		other than inventory	7a 276	,756					
-	D	Less: cost or other basis and sales expenses	76 0.55	0.4.0					
en ne		Gain or (loss)		,849					
		Net gain or (loss)		,907		0.007	0.007		
Ā		Gross income from fundrai		· —		9,907	9,907		
Other Re	oa	events (not including \$	•						
O		of contributions reported or		-					
		1c). See Part IV, line 18		8a					
	b	Less: direct expenses .		8b	 				
		Net income or (loss) from f							
		Gross income from gaming	_						
		activities, See Part IV, line		9a					
	b	Less: direct expenses .		9b					
	С	Net income or (loss) from g	gaming activities						
	10a	Gross sales of inventory, le	ess						
		returns and allowances .		10a	3,210,043				
	b	Less: cost of goods sold		10b					
	С	Net income or (loss) from s	sales of inventor	y		2,177,248	2,177,248		
·			·		Business Code				
SI	11a	MISCELLANEOUS			900099	28,561	28,561		
ano	b								
Miscellanous Revenue	С								
Alisc Re	d	All other revenue							
		Total. Add lines 11a-11d				28,561			
	12	Total revenue See instru	ctions			3 095 857	2 490 914	0	62 183

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to	any line in this Part IX			
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	62,173	62,173		
3	Grants and other assistance to foreign		-		
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	307,706	226,054	51,852	29,800
6	Compensation not included above to disqualified	371717			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,270,947	933,694	214,168	123,085
8	Pension plan accruals and contributions (include		300,001		
	section 401(k) and 403(b) employer contributions)	58,060	41,261	10,668	6,131
9	Other employee benefits	60,096	42,708	11,042	6,346
10	Payroll taxes	129,263	91,861	23,752	13,650
11	Fees for services (nonemployees):		5-,55-		
а	Management				
b	Legal				
С	Accounting	131,765	97,770	22,927	11,068
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 .				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	98,990	25,814	71,891	1,285
12	Advertising and promotion	21,335	16,409	3,128	1,798
13	Office expenses	333,075	291,609	29,993	11,473
14	Information technology				
15	Royalties				
16	Occupancy	207,029	148,665	37,063	21,301
17	Travel	94,202	72,885	13,537	7,780
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	5,737	4,504	783	450
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	147,567	127,712	10,589	9,266
23	Insurance	90,244	64,486	16,357	9,401
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	FOOD AND OTHER PROGRAMS	81,631	59,124	14,293	8,214
b	BAD DEBT EXPENSE	29,687	29,687		
C	BANK CHARGES	13,987	9,940	2,570	1,477
d	All d				
е	All other expenses				.
25	Total functional expenses. Add lines 1 through 24e	3,143,494	2,346,356	534,613	262,525
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)				

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Part X **Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 Cash - non-interest-bearing 345,961 376,688 2 782,262 2 719,227 3 39,769 64,813 4 4 205,956 290,689 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 7 Notes and loans receivable, net 8 8 60,951 53,762 9 Prepaid expenses and deferred charges 37,612 70,413 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 5,984,015 10b b Less: accumulated depreciation 10c 4,097,792 1,940,719 1,886,223 11 1,392,232 11 1,559,607 12 Investments - other securities. See Part IV, line 11 12 13 13 14 14 6,898 19,621 118,046 15 125,767 15 Total assets. Add lines 1 through 15 (must equal line 33) 16 4,930,938 16 5,166,278 17 198,848 17 337,149 18 19 19 27,775 41,913 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, _iabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 40,807 23 30,226 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 11,740 25 20,503 26 279,170 26 429,791 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net Assets or Fund Balances 27 Net assets without donor restrictions 4,301,901 4,417,050 28 Net assets with donor restrictions 349,867 28 319,437 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31 32 4,651,768 4,736,487 33 5,166,278 4,930,938

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Form 990 (2022)

Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	,095	,857
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	,143	,494
3	Revenue less expenses. Subtract line 2 from line 1	3		(47	,637
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4	,651	,768
5	Net unrealized gains (losses) on investments	5		131	,417
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			939
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	4	,736	,487
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b		

EEA

Form **990** (2022)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection Employer identification number

IRI	S	COUTS OF NEW MEXICO TRA	ILS, INC.				85-601124	6				
Par	t I	Reason for Public Cha	rity Status. (Al	ll organizations mus	t comple	ete this p	oart.) See instruction	ons.				
The o	rgaı	nization is not a private foundation be	ecause it is: (For lin	nes 1 through 12, check o	only one bo	x.)						
1		$\label{eq:Achurch} \mbox{A church, convention of churches,}$	or association of c	hurches described in se	ction 170(b)(1)(A)(i)						
2		A school described in section 170	(b)(1)(A)(ii). (Attac	ch Schedule E (Form 990	0).)							
3		A hospital or a cooperative hospital	l service organizat	ion described in section	170(b)(1)	(A)(iii).						
4		A medical research organization o	perated in conjunct	tion with a hospital desci	ribed in se	ction 170	(b)(1)(A)(iii). Enter the					
		hospital's name, city, and state:										
5		An organization operated for the be	enefit of a college o	r university owned or ope	erated by a	a governm	ental unit described in					
	section 170(b)(1)(A)(iv). (Complete Part II.)											
6												
7												
	described in section 170(b)(1)(A)(vi). (Complete Part II.)											
8												
9		An agricultural research organization	on described in se	ction 170(b)(1)(A)(ix) o	perated in	conjunctio	n with a land-grant coll	ege				
		or university or a non-land-grant co	llege of agriculture	(see instructions). Enter	the name,	city, and s	tate of the college or					
	_	university:										
10	Ш	An organization that normally receive receipts from activities related to its support from gross investment incoacquired by the organization after a	s exempt functions, me and unrelated b	subject to certain exceptusiness taxable income	tions; and (less secti	(2) no mor on 511 tax	e than 33 1/3% of its	ss				
11		An organization organized and ope	erated exclusively t	to test for public safety. S	See sectio	n 509(a)(4	1).					
12		An organization organized and ope	rated exclusively fo	or the benefit of, to perform	m the func	tions of, or	to carry out the purpos	es of				
		one or more publicly supported org	anizations describ	ed in section 509(a)(1)	or section	509(a)(2)	. See section 509(a)(3). Chec	:k			
		the box on lines 12a through 12d th	at describes the typ	pe of supporting organiza	ation and c	omplete lir	nes 12e, 12f, and 12g.					
а		Type I. A supporting organizat	ion operated, supe	ervised, or controlled by i	ts support	ed organiz	ation(s), typically by gi	ving				
		the supported organization(s) t	he power to regula	rly appoint or elect a ma	jority of the	directors	or trustees of the					
		supporting organization. You r	nust complete Pa	rt IV, Sections A and B	3.							
b		Type II. A supporting organiza	tion supervised or	controlled in connection	with its su	pported or	ganization(s), by havin	g				
		control or management of the s	upporting organiza	ation vested in the same	persons tha	at control o	r manage the supporte	d				
		organization(s). You must cor	nplete Part IV, Se	ctions A and C.								
С		☐ Type III functionally integrate	ed. A supporting or	rganization operated in c	connection	with, and	functionally integrated	with,				
		its supported organization(s) (s	see instructions). Y	ou must complete Par	t IV, Secti	ons A, D,	and E.					
d		☐ Type III non-functionally inte	grated. A supporti	ing organization operate	d in conne	ction with	its supported organizat	ion(s)				
		that is not functionally integrate	d. The organization	n generally must satisfy a	distributio	n requirem	ent and an attentivenes	s				
		requirement (see instructions).	You must compl	ete Part IV, Sections A	and D, an	d Part V.						
е		Check this box if the organization	on received a writte	en determination from the	IRS that it	is a Type	I, Type II, Type III					
		functionally integrated, or Type	III non-functionally	integrated supporting or	rganizatior	١.						
f	Е	nter the number of supported organ	izations									
g	P	rovide the following information abo	ut the supported or	ganization(s).								
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	-	(v) Amount of monetary		Amount of			
				(described on lines 1-10 above (see instructions))	listed in you docum		support (see instructions)		support (see			
					Yes	No						
A)												
.,												
B)												
C)												
D)												
E)												
<u>-)</u>												
Catal							I					

Schedule A (Form 990) 2022 GIRL SCOUTS OF NEW MEXICO TRAILS, INC. Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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) **(e)** 2022 (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 242,992 215,427 563,817 1,282,948 542,760 2,847,944 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 3 242,992 215,427 563,817 1,282,948 542,760 2,847,944 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. 2,847,944 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total Amounts from line 4 7 2,847,944 242,992 215,427 563,817 1,282,948 542,760 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 30,924 19,871 22,491 33,621 62,183 169,090 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 12,000 5,000 17,000 11 **Total support.** Add lines 7 through 10 3,034,034 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**..... Section C. Computation of Public Support Percentage 14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) 93.87 % 15 Public support percentage from 2021 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this

EEA Schedule A (Form 990) 2022

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Part III

(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

OCCLI	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
Ū	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
<i>I</i> a							
L	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	on B. Total Support		1	T	1		T
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, .						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)	1					
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the or	ganization's fi	rst. second. thi	rd. fourth. or fit	fth tax vear as a	section 501((3)
	organization, check this box and stop her	•				•	· · ·
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2022 (line 8			3. column (f))		15	%
16	Public support percentage from 2021 Sch	. ,	-			16	%
	on D. Computation of Investment Inc						
17	Investment income percentage for 2022 (I			v line 13. colu	mn (f))	17	%
18	Investment income percentage from 2021			•		18	
19a	33 1/3% support tests - 2022. If the orga						
	17 is not more than 33 1/3%, check this be						
b	33 1/3% support tests - 2021. If the organizati	-	-	-	•		
	line 18 is not more than 33 1/3%, check this bo						
20	Private foundation. If the organization die		-			-	_

Part IV **Supporting Organizations**

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

Section A. All Sup	oorting Organizations
--------------------	-----------------------

ecti	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		162	NO
•	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status	-		
_	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
_	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	Ja		
D	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	00		
•	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line			
	7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons, as defined in section 4946 (other than foundation managers and organizations			
	described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9с		
I0a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	46		
I-	supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	404		
	determine whether the organization had excess business holdings.)	10b		

trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.

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.

3a

Schedu	e A (Form 990) 2022 GIRL SCOUTS OF NEW MEXICO TRAILS, INC.		85-60112	246	Page
Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	gan	izations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trus	st on Nov. 20, 1970 <i>(explai</i>	n in Part VI). S	See
	instructions. All other Type III non-functionally integrated supporting organ	nizati	ons must complete Sectior	ns A through E	
Cooti	ion A. Adiusted Not Income		(A) Drien Veen	(B) Current	Year
Secti	on A - Adjusted Net Income		(A) Prior Year	(optiona	ıl)
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or collection				
	of gross income or for management, conservation, or maintenance of				
	property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Cooti	on D. Minimum Apost Amount		(A) Drien Veen	(B) Current	Year
Secti	on B - Minimum Asset Amount		(A) Prior Year	(optiona	ıl)
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Secti	on C - Distributable Amount			Current Y	ear
1_	Adjusted net income for prior year (from Section A, line 8, column A)	1		4	
2	Enter 0.85 of line 1.	2		4	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5		4	

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization 7 (see instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

Schedule A (Form 990) 2022 EEA

6

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continue	ed)	
Sect	ion D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported		
	organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required) - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive		
	(provide details in Part VI). See instructions.	8	
9	Distributable amount for 2022 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

_10	Line 8 amount divided by line 9 amount		10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1_	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
С	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2018			
b	Excess from 2019			
С	Excess from 2020			
d	Excess from 2021			
е	Excess from 2022			

EEA Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name o	f the organization			Employer identification number
GIRL	SCOUTS OF NEW MEXICO TRAILS, INC.			85-6011246
Pa	rt I Organizations Maintaining Donor Advised F	unds or Other S	imilar Funds or Ac	counts.
	Complete if the organization answered "Yes" o	n Form 990, Part	IV, line 6.	
-			advised funds	(b) Funds and other accounts
1	Total number at end of year	, ,		
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the asset	s held in donor advised	
•	funds are the organization's property, subject to the organization	-		
6	Did the organization inform all grantees, donors, and donor a			
	only for charitable purposes and not for the benefit of the don	-	•	
	conferring impermissible private benefit?			
Par				
i ui	Complete if the organization answered "Yes" o	n Form 990 Part	IV line 7	
1	Purpose(s) of conservation easements held by the organizat			
•	 Preservation of land for public use (for example, recreation) 			historically important land area
	Protection of natural habitat	on or education)		certified historic structure
	Preservation of open space		Freservation of a	certified historic structure
•		:!	tuile valie us ins the s fermes of	
2	Complete lines 2a through 2d if the organization held a qualif	led conservation con	tribution in the form of a	
	easement on the last day of the tax year.			Held at the End of the Tax Year
a	Total number of conservation easements			
b	Total acreage restricted by conservation easements			
C	Number of conservation easements on a certified historic str			<u>2</u> c
d	Number of conservation easements included in (c) acquired			
	historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, re-	leased, extinguished	, or terminated by the o	organization during the
	tax year			
4	Number of states where property subject to conservation eas	_	1	
5	Does the organization have a written policy regarding the per		_	
	violations, and enforcement of the conservation easements it			- -
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations	, and enforcing conserv	ation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and	l enforcing conservation	n easements during the year
8	Does each conservation easement reported on line 2(d) about			
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservat	ion easements in its	revenue and expense s	statement and
	balance sheet, and include, if applicable, the text of the footnot	ote to the organizatio	n's financial statements	s that describes the
	organization's accounting for conservation easements.			
Par	t III Organizations Maintaining Collections	of Art, Historic	al Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" or	n Form 990, Part	IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its	revenue statement and	d balance sheet works
	of art, historical treasures, or other similar assets held for public	blic exhibition, educa	tion, or research in furtl	herance of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that	describes these items.	
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its rev	enue statement and ba	lance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education	n, or research in further	rance of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical tre			
	following amounts required to be reported under FASB ASC			
а	Revenue included on Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			

Par	t III Organizations Maintaining	Collections of	Art, Historical T	reasures, o	r Other Similar A	ssets (co	ntinued)
3	Using the organization's acquisition, access	ion, and other record	s, check any of the fo	ollowing that mak	ce significant use of its		
	collection items (check all that apply):						
а	Public exhibition		d Loan o	r exchange prog	ıram		
b	Scholarly research		e Other				
С	Preservation for future generations		_				
4	Provide a description of the organization's c	collections and explai	n how they further the	e organization's	exempt purpose in Par	t	
	XIII.	•	,	· ·			
5	During the year, did the organization solicit of	or receive donations	of art. historical treas	ures. or other sir	milar		
	assets to be sold to raise funds rather than					. Tyes	No
Par	t IV Escrow and Custodial Arra						
	Complete if the organization		on Form 990. P	art IV. line 9.	or reported an ar	nount on	Form
	990, Part X, line 21.			, 0,	o		
1a	Is the organization an agent, trustee, custod	ian or other intermed	iary for contributions	or other assets r	not		
	included on Form 990, Part X?					🗆 Yes	No
b	If "Yes," explain the arrangement in Part XII					🗀 163	
D	ii res, explain the arrangementiir art An	r and complete the ic	mowing table.		Λ,	mount	
•	Beginning balance				1c	nount	
C C	Additions during the year				1d		
d					1e		
e	Distributions during the year						
f	Ending balance				1f		
2a	Did the organization include an amount on F				•		=
	If "Yes," explain the arrangement in Part XII	I. Check here if the e	explanation has been	provided on Par	t XIII		
Par		anawarad "Vaa"	on Form 000 D	art IV/ line 10	1		
	Complete if the organization		1	1			
4.	De alicella a efection la leure	(a) Current year	(b) Prior year	(c) Two years bac			years back
1a	Beginning of year balance	132,724	149,881	135,2	95 127,06	2 1	.27,716
b	Contributions						
С	Net investment earnings, gains, and						
	losses	940	(17,157)	14,5	86 8,23	3	(654)
d	Grants or scholarships						
е	Other expenditures for facilities and						
	programs						
f	Administrative expenses						
g	End of year balance	133,664	132,724	149,8	81 135,29	5 1	.27,062
2	Provide the estimated percentage of the cur	-	e (line 1g, column (a))) held as:			
а	Board designated or quasi-endowment	29.00 %					
b	Permanent endowment%						
С	Term endowment%						
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.					
3a	Are there endowment funds not in the poss	ession of the organiz	ation that are held an	nd administered f	for the	г	
	organization by:						Yes No
	(i) Unrelated organizations					. 3a(i)	X
	(ii) Related organizations					. 3a(ii)	Х
b	If "Yes" on line 3a(ii), are the related organize	zations listed as requ	ired on Schedule R?			. 3b	
4_	Describe in Part XIII the intended uses of the		owment funds.				
Par	t VI Land, Buildings, and Equip						
	Complete if the organization	answered "Yes"	on Form 990, P	art IV, line 11	1a. See Form 990	, Part X, I	ne 10.
	Description of property	(a) Cost or other	er basis (b) Cost o	r other basis	(c) Accumulated	(d) Book	value
		(investme	ent) (d	other)	depreciation		
1a	Land			708,782		7	08,782
b	Buildings		4,:	307,642	3,177,859	1,1	.29,783
С	Leasehold improvements						
d	Equipment			967,591	919,933		47,658
e	Other						
Total.	Add lines 1a through 1e. (Column (d) must	equal Form 990, Par	t X, column (B), line	10c.)		1,8	86,223

Part VII	Investments - Other Securities	 9S.

Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
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.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
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.

(a) Description	(b) Book value
(1)BENEFICIAL INTEREST-PERPETUAL TRUST	95,501
(2)DEPOSITS	22,545
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.).	118,046

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)LEASE LIABILITY	20,503
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	20,503

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

Part	·		-	Retur	n.
	Complete if the organization answered "Yes" on Form 990, P	art I\	/, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	3,228,213
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	131,417		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	939		
е	Add lines 2a through 2d			2e	132,356
3	Subtract line 2e from line 1			3	3,095,857
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	3,095,857
Part	XII Reconciliation of Expenses per Audited Financial Statem	ents	With Expenses pe	r Ret	urn.
	Complete if the organization answered "Yes" on Form 990, P	art I\	/, line 12a.		
1	Total expenses and losses per audited financial statements			1	3,143,494
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	3,143,494
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
				1	
	Add lines 4a and 4b			4c	
С	Add lines 4a and 4b			4c	3.143.494
с 5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).			4c 5	3,143,494
c 5 Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). XIII Supplemental Information.			5	
5 Part Provide	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). XIII Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1.	ines 1	b and 2b; Part V, line 4; F	5	
5 Part Provide 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	ines 1	b and 2b; Part V, line 4; F	5	
5 Part Provide 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). XIII Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1.	ines 1	b and 2b; Part V, line 4; F	5	
c 5 Part Provide 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). XIII Supplemental Information. The the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an andowment funds intended uses (Part V, line 4)	ines 1	b and 2b; Part V, line 4; F	5 Part X, I	line
c 5 Part Provide 2; Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	ines 1	b and 2b; Part V, line 4; F	5 Part X, I	line
c 5 Part Provide 2; Part 01. E	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). XIII Supplemental Information. The descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an indowment funds intended uses (Part V, line 4) DESIGNATED ENDOWMENT IS DESIGNED FOR FUTURE PROJECTS	ines 1 y addi	b and 2b; Part V, line 4; F tional information.	5 Part X, I	IN THE
c 5 Part Provide 2; Part 01. E	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). XIII Supplemental Information. The the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an andowment funds intended uses (Part V, line 4)	ines 1 y addi	b and 2b; Part V, line 4; F tional information.	5 Part X, I	IN THE
c 5 Part Provide 2; Part 01. E BOARD	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). XIII Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an indowment funds intended uses (Part V, line 4) DESIGNATED ENDOWMENT IS DESIGNED FOR FUTURE PROJECTS TUAL TRUST IS DESIGNATED FOR THE BENEFIT OF UNDER-PRIV	ines 1 y addi	b and 2b; Part V, line 4; F tional information. RESERVES. THE IN	5 Part X, I	IN THE
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Schedule D (Form 990) 2022

85-6011246

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Schedule D (Form 990) 2022

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

Go to www.irs.gov/Form990 for the latest information. Attach to Form 990.

OMB No. 1545-0047

Open to Public

Inspection Employer identification number

2 □ (h) Purpose of grant or assistance Yes × Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990 85-6011246 noncash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, other) Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. noncash assistance (e) Amount of Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) General Information on Grants and Assistance Enter total number of other organizations listed in the line 1 table the selection criteria used to award the grants or assistance? (b) EIN GIRL SCOUTS OF NEW MEXICO TRAILS, INC (a) Name and address of organization or government Part I Part II (10) Ξ 8 ල 4 9 9 6 8 6

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Schedule I (Form 990) (2022) GIRL SCOUTS OF NEW MEXICO TRAILS, INC.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III Grants and Other Assistance to Domestic Individuals.

Part III can be duplicated it additional space is needed	space is needed				
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
FINANCIAL ASSISTANCE FOR MEMBERSHIP					
1 DUES	481	17,095		FMV	
FINANCIAL ASSISTANCE FOR PROGRAM					
2 PEES	97	23,354		FMV	
FINANCIAL ASSISTANCE FOR UNIFORMS					
3 AND HANDBOOKS	16	5,771		FMV	
4 TROOP START UP AND FINANCIAL SUPPORT	11	8,610		FMV	
FINANCIAL ASSISTANCE FOR					
5 CAMPERSHIPS	15	7,343		FMV	
9					
7					
Part IV Supplemental Information. Provide the information	the information re	equired in Part I, lin	e 2; Part III, columr	required in Part I, line 2; Part III, column (b); and any other additional information.	itional information.

Schedule I (Form 990) (2022)

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.

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

Name of the organization Employer identification number GIRL SCOUTS OF NEW MEXICO TRAILS, INC. 85-6011246 01. Form 990 governing body review (Part VI, line 11) THE 990 IS REVIEWED BY THE AUDIT COMMITTEE AND THE BOARD OF DIRECTORS PRIOR TO FILING. 02. Conflict of interest policy compliance (Part VI, line 12c) ANNUAL DISCLOSURE WILL BE MADE BY ALL MEMBERS OF THE BOARD, BOARD STANDING COMMITTEES, AND THE BOARD DEVELOPMENT COMMITTEE OF ANY DIRECT OR INDIRECT BENEFITS THEY OR MEMBERS OF THEIR FAMILY ARE RECEIVING, OR WILL RECEIVE, AS THE RESULT OF AN AGREEMENT BY THE COUNCIL WITH ANY OUTSIDE PARTY. WHEN ANY SUCH CONFLICT OF INTEREST IS RELEVANT TO A MATTER REQUIRING ACTION BY THE BOARD CHAIR, OR WHEN IT ARISES DURING A COMMITTEE MEETING, TO THE CHAIR OF THE COMMITTEE, AND SUCH PERSON SHALL NOT VOTE ON THE MATTER. MOREOVER, THE PERSON HAVING THE CONFLICT SHALL RETIRE FROM THE ROOM IN WHICH THE BOARD OR COMMITTEE IS MEETING AND SHALL NOT PARTICIPATE IN THE FINAL DELIBERATIONS OR DECISION REGARDING THE MATTER UNDER CONSIDERATION. 03. CEO, executive director, top management comp (Part VI, line 15a) OFFICERS AND KEY EMPLOYEES' SALARIES ARE APPROVED BY THE BOARD AND COMPARED TO THE GIRL SCOUT COUNCIL BENCHMARK COMPENSATION SURVEY RESULTS. 04. Other officer or key employee compensation (Part VI, line 15b OTHER OFFICERS AND KEY EMPLOYEES' SALARIES ARE APPROVED BY THE BOARD AND COMPARED TO THE GIRL SCOUT COUNCIL BENCHMARK COMPENSATION SURVEY RESULTS. 05. Governing documents, etc, available to public (Part VI, line 19) THE ORGANIZATION'S AUDIT REPORT, ANNUAL REPORT, AND ORGANIZATIONAL DOCUMENTS ARE POSTED ON

Schedule O (Form 990) 2022 Name of the organization Employer identification number GIRL SCOUTS OF NEW MEXICO TRAILS, INC. 85-6011246 ITS WEBSITE, AS WELL AS BEING AVAILABLE AT THE ORGANIZATION'S ADMINISTRATIVE OFFICES. COPIES OF TAX RETURNS AND FORM 1023 ARE AVAILABLE AT THE ORGANIZATION'S OFFICE. ALL DOCUMENTS ARE AVAILABLE TO REVIEW UPON REQUEST AT THE ORGANIZATION'S ADMINISTRATIVE OFFICES. 06. Explanation of other changes in net assets or fund balances (Part XI, line 9) CHANGE IN BENEFICIAL INTEREST IN PERPETUAL TRUST (\$939). 07. Part XII, Response or note to any line in Part XII THE ORGANIZATION MADE NO CHANGES TO THE AUDIT OVERSIGHT PROCESS OR AUDITOR SELECTION PROCESS DURING THE TAX YEAR.

EEA Schedule O (Form 990) 2022