

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

**2010**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A For the 2010 calendar year, or tax year beginning** OCT 1, 2010 **and ending** SEP 30, 2011

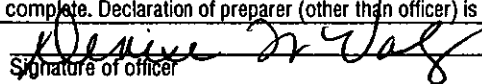

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C Name of organization</b> <b>GIRL SCOUTS OF SOUTHEAST FLORIDA, INC.</b> Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1224 WEST INDIANTOWN ROAD</b> City or town, state or country, and ZIP + 4 <b>JUPITER, FL 33458</b> <b>F Name and address of principal officer: DENISE W. VALZ</b> <b>SAME AS C ABOVE</b>	<b>D Employer identification number</b> <b>59-0657327</b> <b>E Telephone number</b> <b>561-427-0177</b> <b>G Gross receipts \$</b> <b>6,692,785.</b> <b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c) Group exemption number</b> ▶
<b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>L Year of formation:</b> <u>1952</u> <b>M State of legal domicile:</b> <u>FL</u>
<b>J Website:</b> ▶ <u>WWW.GSSEF.ORG</u>		
<b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1 Briefly describe the organization's mission or most significant activities:</b> <u>GIRL SCOUTING BUILDS GIRLS OF COURAGE, CONFIDENCE AND CHARACTER, WHO MAKE THE WORLD A BETTER</u> <b>2 Check this box</b> <input type="checkbox"/> <b>if the organization discontinued its operations or disposed of more than 25% of its net assets.</b> <b>3 Number of voting members of the governing body (Part VI, line 1a)</b> ..... <b>3</b> <b>13</b> <b>4 Number of independent voting members of the governing body (Part VI, line 1b)</b> ..... <b>4</b> <b>13</b> <b>5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)</b> ..... <b>5</b> <b>89</b> <b>6 Total number of volunteers (estimate if necessary)</b> ..... <b>6</b> <b>6700</b> <b>7 a Total unrelated business revenue from Part VIII, column (C), line 12</b> ..... <b>7a</b> <b>0.</b> <b>b Net unrelated business taxable income from Form 990-T, line 34</b> ..... <b>7b</b> <b>0.</b>	
<b>Revenue</b>	<b>8 Contributions and grants (Part VIII, line 1h)</b> ..... <b>Prior Year</b> <b>881,651.</b> <b>Current Year</b> <b>461,499.</b> <b>9 Program service revenue (Part VIII, line 2g)</b> ..... <b>341,864.</b> <b>366,136.</b> <b>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</b> ..... <b>19,114.</b> <b>4,424.</b> <b>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</b> ..... <b>3,315,108.</b> <b>3,812,901.</b> <b>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</b> ..... <b>4,557,737.</b> <b>4,644,960.</b>	
<b>Expenses</b>	<b>13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)</b> ..... <b>60,438.</b> <b>52,846.</b> <b>14 Benefits paid to or for members (Part IX, column (A), line 4)</b> ..... <b>0.</b> <b>0.</b> <b>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</b> ..... <b>2,758,003.</b> <b>2,526,935.</b> <b>16a Professional fundraising fees (Part IX, column (A), line 11e)</b> ..... <b>1,805.</b> <b>0.</b> <b>b Total fundraising expenses (Part IX, column (D), line 25)</b> ▶ <b>276,121.</b> <b>17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)</b> ..... <b>1,563,622.</b> <b>1,600,115.</b> <b>18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)</b> ..... <b>4,383,868.</b> <b>4,179,896.</b> <b>19 Revenue less expenses. Subtract line 18 from line 12</b> ..... <b>173,869.</b> <b>465,064.</b>	
<b>Net Assets or Fund Balances</b>	<b>20 Total assets (Part X, line 16)</b> ..... <b>Beginning of Current Year</b> <b>5,539,612.</b> <b>End of Year</b> <b>5,765,273.</b> <b>21 Total liabilities (Part X, line 26)</b> ..... <b>715,894.</b> <b>437,128.</b> <b>22 Net assets or fund balances. Subtract line 21 from line 20</b> ..... <b>4,823,718.</b> <b>5,328,145.</b>	

**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.

<b>Sign Here</b>	Signature of officer  <b>DENISE W. VALZ, CEO</b> Type or print name and title	Date <u>12-20-11</u>
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>DAVID J. THOMAS</b> Preparer's signature  Date <u>12/15/11</u> Firm's name ▶ <b>HOLYFIELD &amp; THOMAS, LLC</b> Firm's EIN ▶ Firm's address ▶ <b>125 BUTLER STREET</b> <b>WEST PALM BEACH, FL 33407</b> Phone no. <b>(561) 689-6000</b>	Check <input type="checkbox"/> PTIN Check <input type="checkbox"/> self-employed

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

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 [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 1,874,159. including grants of \$ ) (Revenue \$ 3,813,279. ) PRODUCT SALE PROGRAM-OUR PRODUCT SALE PROGRAM (COOKIES, CANDIES, NUTS AND MAGAZINES) HELPS GIRLS, AGES 5-17, LEARN TO WORK AS A TEAM, SET GOALS, MANAGE MONEY, DEVELOP LEADERSHIP SKILLS, CREATE ACTION PLANS AND MORE. IT IS RECOGNIZED AS THE PREMIER BUSINESS AND ECONOMIC LITERACY TRAINING PROGRAM FOR GIRLS IN THE UNITED STATES. OVER 9,900 GIRL SCOUTS PARTICIPATED, SELLING OVER 1.4 MILLION BOXES OF COOKIES AND OVER 100,000 UNITS OF CANDIES, NUTS AND MAGAZINE SUBSCRIPTIONS. MOST IMPORTANT, THEY RAISED OVER \$1.2 MILLION WHICH WILL BE USED BY THE GIRLS IN THEIR COMMUNITIES. THE ORGANIZATION GENERATED JUST OVER \$3.8 MILLION THAT WILL BE USED TO FURTHER THE MISSION OF GIRL SCOUTING THROUGH PROGRAMS AND SERVICES.

4b (Code: ) (Expenses \$ 211,961. including grants of \$ 156. ) (Revenue \$ 220,796. ) OUTDOOR PROGRAMS-WE EXPANDED OUR OUTDOOR PROGRAMS TO OFFER OUR MEMBERSHIP A COMPREHENSIVE SUMMER OF 12 DIFFERENT PROGRAMS, HELD AT 3 COUNCIL PROPERTIES AND SERVING OVER 1,000 PARTICIPANTS. PROGRAMS INCLUDE A 12-DAY SESSION OF AQUATIC ADVENTURES (CAMP-H2-OHHH!); A 6-NIGHT SESSION FOCUSED ON AFTER-HOURS ACTIVITIES, SUCH AS NIGHT-HIKING, NIGHT-CANOEING AND STAR-GAZING; AND A 7-DAY SESSION FOCUSED ON ART, CULTURE AND FOOD OF COUNTRIES AROUND THE GLOBE. OUTDOOR PROGRAM CURRICULUMS WERE CREATED TO ENCOURAGE A DEEP AND SUSTAINABLE APPRECIATION FOR THE OUTDOORS, AS WELL AS FUNDAMENTAL LESSONS ON SELF-ASSURANCE, GROUP COMPETITION, TEAM LEADERSHIP, WATER SAFETY AND ENVIRONMENTAL PROTECTION.

4c (Code: ) (Expenses \$ 50,259. including grants of \$ 7,200. ) (Revenue \$ ) GSSEF SUPPORTED OVER 300 HISPANIC GIRLS AND ADULTS THROUGH OUR VIVA PROGRAM WITH FUNDING FROM THE DEPARTMENT OF JUSTICE AND GIRL SCOUTS OF THE USA. THE PROGRAM FOCUSED ON INCREASING AWARENESS AND PARTICIPATION IN GIRL SCOUT PROGRAMS BY REACHING OUT TO HISPANIC ADULTS TO BECOME VOLUNTEERS AND ADVOCATES FOR THE GIRL SCOUTING MOVEMENT, AND TO CREATE AN INFRASTRUCTURE WITHIN THE COUNCIL TO SUPPORT CONTINUED GROWTH AND EXPANSION OF MEMBERSHIP THROUGHOUT THE HISPANIC COMMUNITY.

IN JULY 2011, GSSEF LAUNCHED A RECRUITMENT AND INFORMATIONAL VIDEO, PRODUCED IN ENGLISH AND SPANISH, ON THE COUNCIL WEBSITE WITH REGISTERED GIRLS AND ADULTS ALL SHARING INFORMATION ABOUT THE BENEFITS OF GIRLS PARTICIPATING IN THE GIRL SCOUT LEADERSHIP EXPERIENCE.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 1,358,944. including grants of \$ 45,489. ) (Revenue \$ 145,340. )

4e Total program service expenses 3,495,323.

**Part IV 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)? <i>If "Yes," complete Schedule A</i> .....	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? .....	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> .....		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> .....		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> .....	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....		X
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)? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> .....	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i> .....		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? .....		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> .....		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> .....		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) .....		

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		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 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c 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		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		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		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		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		
Note. All Form 990 filers are required to complete Schedule O	X	

**Part V** Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
	<b>1a</b> 19		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	<b>1b</b> 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
	<b>1c</b>		
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		
	<b>2a</b> 89		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	X	
	<b>2b</b>		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
	<b>3a</b>		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
	<b>3b</b>		
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)?		X
	<b>4a</b>		
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
	<b>4b</b>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
	<b>5a</b>		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
	<b>5b</b>		
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
	<b>5c</b>		
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?		X
	<b>6a</b>		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	<b>6b</b>		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
a	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?		X
	<b>7a</b>		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
	<b>7b</b>		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
	<b>7c</b>		
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	<b>7d</b>		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
	<b>7e</b>		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
	<b>7f</b>		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
	<b>7g</b>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
	<b>7h</b>		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
	<b>8</b>		
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
a	Did the organization make any taxable distributions under section 4966?		
	<b>9a</b>		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
	<b>9b</b>		
10	<b>Section 501(c)(7) organizations.</b> Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12		
	<b>10a</b>		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
	<b>10b</b>		
11	<b>Section 501(c)(12) organizations.</b> Enter:		
a	Gross income from members or shareholders		
	<b>11a</b>		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
	<b>11b</b>		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
	<b>12a</b>		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
	<b>12b</b>		
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
	<b>13a</b>		
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		
	<b>13b</b>		
c	Enter the amount of reserves on hand		
	<b>13c</b>		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
	<b>14a</b>		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
	<b>14b</b>		

**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 to any question in this Part VI

**Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a			13
b	Enter the number of voting members included in line 1a, above, who are independent		
1b			13
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Does the organization have members or stockholders?	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
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 in Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a	X	
10a	Does the organization have local chapters, branches, or affiliates?	
10b	X	
10b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	
11a	X	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	
12a	X	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	
12b	X	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	
12c		X
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	
13	X	
13	Does the organization have a written whistleblower policy?	
14	X	
14	Does the organization have a written document retention and destruction policy?	
15		
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	X	
15a	The organization's CEO, Executive Director, or top management official	
15b		X
15b	Other officers or key employees of the organization	
16a		X
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		
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **FL**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **GREGORY KISSEL - (561) 427-0195**  
**1224 WEST INDIANTOWN ROAD, JUPITER, FL 33458**

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

Check if Schedule O contains a response to any question 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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
HENRIETTA GURRI-MCBEE CHAIRMAN	5.00	X		X				0.	0.	0.
AIMEE G. CERNICHARO 1ST VICE CHAIRMAN	5.00	X		X				0.	0.	0.
LORNA BROWN-BURTON 2ND VICE CHAIRMAN	5.00	X		X				0.	0.	0.
VIRGINIA SPENCER TREASURER	5.00	X		X				0.	0.	0.
TINA HATCHER SECRETARY	5.00	X		X				0.	0.	0.
JANET BEETS MEMBER AT LARGE	5.00	X						0.	0.	0.
TRACY CARROLL MEMBER AT LARGE	5.00	X						0.	0.	0.
TAMI DONNALLY MEMBER AT LARGE	5.00	X						0.	0.	0.
CHRISTOPHER HERRON MEMBER AT LARGE	5.00	X						0.	0.	0.
CATHERINE LAMBERT MEMBER AT LARGE	5.00	X						0.	0.	0.
JAMES MUELLER MEMBER AT LARGE	5.00	X						0.	0.	0.
ASHLEY FOSTER-PINNOCK MEMBER AT LARGE	5.00	X						0.	0.	0.
DR. JEAN WIHBY MEMBER AT LARGE	5.00	X						0.	0.	0.
DENISE VALZ CHIEF EXECUTIVE OFFICER	40.00			X				130,915.	0.	12,009.
CYNTHIA MCHERAN VP OPERTATION	40.00			X				86,455.	0.	14,912.
GREGORY KISSEL VP FINANCE	40.00			X				86,651.	0.	14,555.
LISA JOHNSON VP MARKETING	40.00			X				81,304.	0.	8,036.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
LORI EBINGER-SULLIVAN VP MEMBERSHIP	40.00			X			86,046.	0.	14,417.	
HELEN LORD VP FUNDRAISING	40.00			X			56,596.	0.	11,814.	
<b>1b Sub-total</b>							<b>527,967.</b>	<b>0.</b>	<b>75,743.</b>	
<b>c Total from continuation sheets to Part VII, Section A</b>							<b>0.</b>	<b>0.</b>	<b>0.</b>	
<b>d Total (add lines 1b and 1c)</b>							<b>527,967.</b>	<b>0.</b>	<b>75,743.</b>	

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

	Yes	No
<b>3</b> 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		X
<b>4</b> 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		X
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**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. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a	41,861.					
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e	200,577.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	219,061.					
	g Noncash contributions included in lines 1a-1f: \$							
	<b>h Total. Add lines 1a-1f</b>			<b>461,499.</b>				
Program Service Revenue	2 a <b>PROGRAM FEES</b>	Business Code	611710	344,838.	344,838.			
	b <b>SITE RENTAL INCOME</b>		531390	15,743.	15,743.			
	c <b>ADULT TRAINING</b>		611710	5,335.	5,335.			
	d <b>OTHER PROGRAM REVENUE</b>		611710	220.	220.			
	e							
	f All other program service revenue							
	<b>g Total. Add lines 2a-2f</b>			<b>366,136.</b>				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			31,173.			31,173.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross Rents	(i) Real	(ii) Personal					
		48,911.						
		b Less: rental expenses						
		51,750.						
	c Rental income or (loss)							
	-2,839.							
	d Net rental income or (loss)				-2,839.		-2,839.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		71,990.						
		b Less: cost or other basis and sales expenses						
		98,739.						
	c Gain or (loss)							
-26,749.								
d Net gain or (loss)				-26,749.		-26,749.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a							
	100.							
	b Less: direct expenses	b						
0.								
c Net income or (loss) from fundraising events				100.		100.		
9 a Gross income from gaming activities. See Part IV, line 19	a							
	b Less: direct expenses	b						
	c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a							
	5710615.							
	b Less: cost of goods sold	b						
1897336.								
c Net income or (loss) from sales of inventory				3,813,279.	3,813,279.			
Miscellaneous Revenue			Business Code					
11 a <b>MISCELLANEOUS INCOME</b>		900099		2,209.			2,209.	
	b <b>ANNUAL COUNCIL MEETING</b>		900099	152.			152.	
c								
d All other revenue								
e <b>Total. Add lines 11a-11d</b>				<b>2,361.</b>				
<b>12 Total revenue. See instructions.</b>				<b>4,644,960.</b>	<b>4,179,415.</b>	<b>0.</b>	<b>4,046.</b>	

**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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	52,846.	52,846.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	527,967.	427,402.	62,853.	37,712.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,482,038.	1,199,898.	176,338.	105,802.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	149,499.	121,034.	17,790.	10,675.
9 Other employee benefits	198,243.	160,498.	23,591.	14,154.
10 Payroll taxes	169,188.	136,975.	20,133.	12,080.
11 Fees for services (non-employees):				
a Management				
b Legal	4,000.	3,238.	476.	286.
c Accounting	21,501.	17,405.	2,560.	1,536.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	32,548.	29,012.	979.	2,557.
12 Advertising and promotion	124,418.	106,428.	8,604.	9,386.
13 Office expenses	33,113.	28,111.	2,523.	2,479.
14 Information technology	71,283.	60,368.	5,591.	5,324.
15 Royalties				
16 Occupancy	433,491.	368,011.	33,025.	32,455.
17 Travel	62,901.	50,925.	7,485.	4,491.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	18,651.	15,100.	2,219.	1,332.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	188,095.	154,580.	19,882.	13,633.
23 Insurance	99,655.	84,602.	7,592.	7,461.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a <b>PROGRAM SUPPLIES</b>	133,992.	133,992.		
b <b>PRODUCT SALES INCENTIVE</b>	94,141.	94,141.		
c <b>PROGRAM FEES</b>	83,407.	83,407.		
d <b>COMMUNICATION</b>	67,473.	57,281.	5,140.	5,052.
e <b>EQUIPMENT EXPENSES</b>	59,357.	50,538.	4,361.	4,458.
f All other expenses	72,089.	59,531.	7,310.	5,248.
25 Total functional expenses. Add lines 1 through 24f	4,179,896.	3,495,323.	408,452.	276,121.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	1	Cash - non-interest-bearing .....	650.	1	6,500.
	2	Savings and temporary cash investments .....	902,666.	2	1,070,836.
	3	Pledges and grants receivable, net .....	79,665.	3	104,185.
	4	Accounts receivable, net .....		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	6	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) .....		6	
	7	Notes and loans receivable, net .....		7	
	8	Inventories for sale or use .....	149,920.	8	177,160.
	9	Prepaid expenses and deferred charges .....	59,911.	9	48,250.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a 7,713,086.		
	b	Less: accumulated depreciation .....	10b 4,953,672.	10c	2,759,414.
	11	Investments - publicly traded securities .....	1,203,856.	11	1,313,453.
	12	Investments - other securities. See Part IV, line 11 .....		12	
	13	Investments - program-related. See Part IV, line 11 .....		13	
	14	Intangible assets .....		14	
	15	Other assets. See Part IV, line 11 .....	303,575.	15	285,475.
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	5,539,612.	16	5,765,273.	
<b>Liabilities</b>	17	Accounts payable and accrued expenses .....	474,022.	17	382,394.
	18	Grants payable .....		18	
	19	Deferred revenue .....	55,064.	19	54,734.
	20	Tax-exempt bond liabilities .....		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23	Secured mortgages and notes payable to unrelated third parties .....	186,808.	23	
	24	Unsecured notes and loans payable to unrelated third parties .....		24	
	25	Other liabilities. Complete Part X of Schedule D .....		25	
	26	<b>Total liabilities.</b> Add lines 17 through 25 .....	715,894.	26	437,128.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
	27	Unrestricted net assets .....	4,454,201.	27	5,000,286.
	28	Temporarily restricted net assets .....	369,517.	28	327,859.
	29	Permanently restricted net assets .....		29	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
	30	Capital stock or trust principal, or current funds .....		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund .....		31	
	32	Retained earnings, endowment, accumulated income, or other funds .....		32	
33	<b>Total net assets or fund balances</b> .....	4,823,718.	33	5,328,145.	
34	<b>Total liabilities and net assets/fund balances</b> .....	5,539,612.	34	5,765,273.	

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,644,960.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,179,896.
3	Revenue less expenses. Subtract line 2 from line 1	3	465,064.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,823,718.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	39,363.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	5,328,145.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	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?		X
3b	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.		

Form 990 (2010)



**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) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
3 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
4 Total. Add lines 1 through 3 .....						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						
6 Public support. Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4 .....						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
9 Net income from unrelated business activities, whether or not the business is regularly carried on .....						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
11 Total support. Add lines 7 through 10 .....						
12 Gross receipts from related activities, etc. (see instructions) .....					12	
13 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 .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) .....	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14 .....	15	%
16a 33 1/3% support test - 2010. 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 .....	<input type="checkbox"/>	
b 33 1/3% support test - 2009. 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 .....	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2010. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2009. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....	<input type="checkbox"/>	

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	260,891.	264,496.	800,958.	881,651.	461,499.	2669495.
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	1949527.	2801463.	5394248.	5590377.	6076751.	21812366.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	2210418.	3065959.	6195206.	6472028.	6538250.	24481861.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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						0.
c Add lines 7a and 7b						0.
8 Public support (Subtract line 7c from line 6.)						24481861.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	2210418.	3065959.	6195206.	6472028.	6538250.	24481861.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	58,329.	84,841.	109,647.	85,310.	80,084.	418,211.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	58,329.	84,841.	109,647.	85,310.	80,084.	418,211.
11 Net income from unrelated business activities not included in 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 IV.)		10,180.	16,538.	12,963.	2,361.	42,042.
13 Total support (Add lines 9, 10c, 11, and 12.)	2268747.	3160980.	6321391.	6570301.	6620695.	24942114.
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 <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	98.15 %
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	98.00 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	1.68 %
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	1.81 %

- 19a **33 1/3% support tests - 2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
- b **33 1/3% support tests - 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

GIRL SCOUTS OF SOUTHEAST FLORIDA, INC.

Employer identification number

59-0657327

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate contributions, aggregate grants, aggregate value, and questions about donor advisement and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Form for Part II Conservation Easements. Includes checkboxes for purposes of easements, a table for held at end of tax year (rows 2a-2d), and questions about monitoring, expenses, and reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting and amounts for revenues and assets.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

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
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

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

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" to 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

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance			5,458.		
b Contributions					
c Net investment earnings, gains, and losses			-1,211.		
d Grants or scholarships			1,005.		
e Other expenditures for facilities and programs			2,867.		
f Administrative expenses			375.		
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment  \_\_\_\_\_ %
- b Permanent endowment  \_\_\_\_\_ %
- c Term endowment  \_\_\_\_\_ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		658,750.		658,750.
b Buildings	113,560.	5,528,563.	3,870,898.	1,771,225.
c Leasehold improvements				
d Equipment		1,391,753.	1,079,373.	312,380.
e Other		20,460.	3,401.	17,059.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				<b>2,759,414.</b>

**Part VII Investments - Other Securities.** 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) .....		
(I) .....		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) .....		
(2) .....		
(3) .....		
(4) .....		
(5) .....		
(6) .....		
(7) .....		
(8) .....		
(9) .....		
(10) .....		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) .....	
(2) .....	
(3) .....	
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
(10) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) .....	
(3) .....	
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
(10) .....	
(11) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

**2.** FIN 48 (ASC 740) Footnote. In Part XIV, 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).

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,644,960.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,179,896.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	465,064.
4	Net unrealized gains (losses) on investments	4	39,363.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	39,363.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	504,427.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	4,736,073.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	39,363.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	51,750.
e	Add lines 2a through 2d	2e	91,113.
3	Subtract line 2e from line 1	3	4,644,960.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	4,644,960.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	4,231,646.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	51,750.
e	Add lines 2a through 2d	2e	51,750.
3	Subtract line 2e from line 1	3	4,179,896.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	4,179,896.

**Part XIV Supplemental Information**

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART X, LINE 2: ON JULY 1, 2009, THE ORGANIZATION ADOPTED FASB ASC**

**740-10, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THIS PRONOUNCEMENT SEEKS TO REDUCE THE DIVERSITY IN PRACTICE ASSOCIATED WITH CERTAIN ASPECTS OF MEASUREMENT AND RECOGNITION IN ACCOUNTING FOR INCOME TAXES. IT PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION WHICH AN ENTITY TAKES OR EXPECTS TO TAKE IN A TAX RETURN. AN ENTITY MAY ONLY RECOGNIZE OR CONTINUE TO RECOGNIZE TAX POSITIONS WHICH MEET A "MORE LIKELY THAN NOT"**

**Part XIV** Supplemental Information (continued)

THRESHOLD. THE ORGANIZATION ASSESSES ITS INCOME TAX POSITIONS BASED ON MANAGEMENT'S EVALUATION OF THE FACTS, CIRCUMSTANCES AND INFORMATION AVAILABLE AT THE REPORTING DATE. THE ORGANIZATION USES THE PRESCRIBED "MORE LIKELY THAN NOT" THRESHOLD WHEN MAKING ITS ASSESSMENT. AT ADOPTION, THE ORGANIZATION DID NOT RECORD ANY CUMULATIVE EFFECT ADJUSTMENT, AND THE ORGANIZATION DID NOT ACCRUE ANY INTEREST EXPENSE OR PENALTIES RELATED TO TAX POSITIONS. THERE ARE CURRENTLY NO OPEN FEDERAL OR STATE TAX YEARS UNDER AUDIT.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES 51,750.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES 51,750.



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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
REGISTRATION	200	32,445.	0.		
GIRL EVENTS	340	17,536.	0.		
OTHER MISC. EVENTS AND FEES	123	2,864.	0.		

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

**MOST GRANTS FOR FINANCIAL ASSISTANCE ARE FOR REGISTRATION WITH GIRL SCOUTS OF THE USA OR FOR PROGRAMS PROVIDED BY THE COUNCIL. THE FINANCIAL ASSISTANCE IS APPLIED AS A CREDIT AGAINST THE AMOUNT DUE. IN THE CASE OF A PROGRAM THAT IS PROVIDED OUTSIDE OUR COUNCIL, THE PAYMENT IS MADE DIRECTLY TO THE PROGRAM PROVIDER.**

**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No. 1545-0047

**2010**

Open to Public  
Inspection

Name of the organization

GIRL SCOUTS OF SOUTHEAST FLORIDA, INC.

Employer identification number

59-0657327

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

PLACE. OUR PROGRAMS PROVIDE GIRLS THE OPPORTUNITY TO EXPERIENCE  
ACTIVITIES WHICH ENCOURAGE SOCIAL, ETHICAL, LEADERSHIP, AND INDIVIDUAL  
DEVELOPMENT THROUGHOUT A WIDE VARIETY OF ACTIVITIES AND PROJECTS. GIRL  
SCOUTS OF SOUTHEAST FLORIDA PROVIDES A SUPPORT SYSTEM OF VOLUNTEERS AND  
MENTORS WHO SERVE AS TROOP LEADERS AND ASSIST IN OTHER PROGRAM RELATED  
POSITIONS.

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

IN ADDITION TO THE VIDEO, AN INFRASTRUCTURE HAS BEEN ESTABLISHED TO  
IDENTIFY AND TARGET MEMBERSHIP IN SPECIFIC AREAS AND COMMUNITIES WITHIN  
THE COUNCIL JURISDICTION; A COLLECTION OF PRINT MARKETING AND  
PROMOTIONAL MATERIALS HAS BEEN DEVELOPED TO BE USED NEXT FISCAL YEAR;  
AND EXISTING VOLUNTEERS ARE ENGAGED IN THE RECRUITMENT OF NEW  
VOLUNTEERS AND GIRLS FROM THE HISPANIC COMMUNITY.

**FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:**

OTHER PROGRAMS AND MEMBER SERVICES

EXPENSES \$ 1,358,944. INCLUDING GRANTS OF \$ 45,489. REVENUE \$ 145,340.

**FORM 990, PART VI, SECTION A, LINE 6: EACH SERVICE UNIT HAS TWO DELEGATES  
WHICH ARE AUTHORIZED TO VOTE ON CERTAIN COUNCIL MATTERS.**

**FORM 990, PART VI, SECTION A, LINE 7A: DELEGATES ELECT THE OFFICERS, BOARD  
OF DIRECTORS AND BOARD DEVELOPMENT COMMITTEE, AND THE DELEGATES TO THE  
COUNCIL OF THE GIRL SCOUTS OF THE USA.**

Name of the organization

GIRL SCOUTS OF SOUTHEAST FLORIDA, INC.

Employer identification number

59-0657327

FORM 990, PART VI, SECTION A, LINE 7B: THE MEMBERS VOTE ON AMENDMENTS TO THE ARTICLES OF INCORPORATION AND/OR BYLAWS.

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS PRESENTED TO THE AUDIT AND FINANCE COMMITTEES, AND THEN TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL.

FORM 990, PART VI, SECTION B, LINE 15A: THE CHAIR. OF THE BOARD OF DIRECTORS OF GIRL SCOUTS OF SOUTHEAST FLORIDA CONVENED TWO ADDITIONAL BOARD MEMBERS TO DISCUSS AND ASSESS THE PERFORMANCE OF THE CEO. THE BOARD MEMBERS USED AS AN EVALUATION TOOL THE "GSUSA CEO COMPETENCY MODEL" WHICH USES A NUMERIC SYSTEM TO ASSESS THE PERFORMANCE OF A COUNCIL CEO IN THE AREAS OF STRATEGIC LEADERSHIP, LEADING PEOPLE, BUSINESS ACUMEN AND PERSONAL EFFECTIVENESS. EACH MEMBER OF THE EVALUATION TEAM IS PROVIDED A COPY OF THIS WRITTEN COMPETENCY MODEL AS WELL AS THE WRITTEN GOALS OF THE CEO FOR THE PAST YEAR. IN A MEETING OF THE EVALUATION TEAM, EACH EVALUATOR ASSIGNS A NUMERIC VALUE FOR EACH OF THE CORE COMPETENCIES DESCRIBED ABOVE. AFTER A THOROUGH DISCUSSION, COLLECTIVE NUMERIC VALUES AND COMMENTS ARE AGREED UPON BY THE EVALUATION TEAM. THE EVALUATION RESULTS ARE PRESENTED TO THE FULL BOARD OF DIRECTORS, WHICH USE THESE RESULTS TO DETERMINE THE CEO'S COMPENSATION.

OTHER OFFICERS' SALARIES ARE DETERMINED BY THE CEO BASED ON JOB POSITION SALARY RANGES RECEIVED FROM GIRL SCOUTS OF THE USA (THE NATIONAL ORGANIZATION); THESE RANGES TAKE INTO CONSIDERATION DATA RECEIVED FROM COMPARABLE POSITIONS AND ARE ADJUSTED BASED ON EXPERIENCE AND THE GEOGRAPHIC REGION.

Name of the organization

GIRL SCOUTS OF SOUTHEAST FLORIDA, INC.

Employer identification number

59-0657327

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS: 39,363.

PART XII LINE 2C

AUDIT REVIEW PROCESS

THE AUDIT REPORT IS REVIEWED ANNUALLY BY THE AUDIT REPORT REVIEW COMMITTEE. THE REPORT IS PRESENTED BY THE INDEPENDENT AUDITOR. THIS PROCESS HAS NOT CHANGED FROM PRIOR PERIODS.



Asset Number	Description of property							
	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	LAND							
120	010178L				658,750.			0.
	* 990 PAGE 10 TOTAL LAND							
					658,750.	0.	0.	0.
	BUILDING AND LEASEHOLD IMPROVEMENTS							
	BUILDINGS							
1	BUILDINGS AND IMPROVEMENTS							
	010178SL		40.0016		2,825,677.		1,815,415.	63,926.
40	CW- TURBINE VENTS							
	060101SL		10.0016		3,200.		2,667.	213.
46	CW - BEEHIVE REMODEL							
	060101SL		20.0016		21,227.		8,842.	1,061.
53	STAIR LODGE							
	060502SL		10.0016		4,900.		3,594.	490.
61	LEASEHOLD IMPROVEMENTS							
	110602SL		10.0016		82,502.		57,063.	8,250.
77	LODGE RESTORATION							
	050105SL		10.0016		17,459.		7,711.	1,746.
78	KITCHEN RESTORATION - LODGE							
	010205SL		10.0016		18,350.		8,716.	1,835.
79	LODGE ROOF							
	110104SL		20.0016		13,500.		3,319.	675.
80	EASTWIND ROOF							
	110104SL		20.0016		9,000.		2,212.	450.
81	PARKING LOT SHELTER ROOF							
	110104SL		20.0016		2,400.		590.	120.
82	BATHROOM ROOF							
	110104SL		20.0016		900.		221.	45.
83	BOAT HOUSE ROOF							
	110104SL		20.0016		1,200.		295.	60.
84	SANDY RIDGE CABIN ROOF							
	110104SL		20.0016		1,200.		295.	60.
85	DITTY NEST ROOF							
	110104SL		20.0016		900.		221.	45.
87	CARPET-RANGER HOUSE							
	080105SL		10.0016		2,640.		1,100.	264.
88	INFIRMARY IMPROVEMENTS							
	090105SL		10.0016		2,088.		853.	209.
89	COOKS CABIN ROOK							
	090105SL		20.0016		3,000.		612.	150.
91	RESTORATION BEEHIVE							
	123105SL		10.0016		5,390.		2,021.	539.
92	HILLSIDE UNITS ROOF							
	033106SL		20.0016		15,000.		2,625.	750.
93	6 BARNES / PAVILLION							
	040506SL		10.0016		58,848.		20,597.	5,885.
94	RESTORE HILLSIDE CABINS							
	082406SL		10.0016		36,000.		11,100.	3,600.
95	DC BUILDING ROOF							
	083106SL		20.0016		3,250.		503.	163.

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05-01-10

# - Current year section 179 (D) - Asset disposed

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
96	JUPITER GS HOUSE ROOF							
	083106	SL	20.00	16	8,910.		1,375.	446.
97	INFIRMARY WINDOWS							
	093006	SL	10.00	16	1,202.		480.	120.
122	WIP-TELOGIA							
	093010	SL	39.00	16	150,448.			3,858.
132	BUILDING							
	093011	SL	40.00	16	36,529.			0.
	* 990 PAGE 10 TOTAL BUILDINGS							
					3,325,720.	0.	1,952,427.	94,960.
	* 990 PAGE 10 TOTAL - BUILDING AND LEASEHOLD IMPROVEMENTS							
					3,325,720.	0.	1,952,427.	94,960.
	POOL & CABANA							
	BUILDINGS							
21	PLUMBING SYSTEM CAMP WELAKA							
	050198	SL	10.00	16	2,200.		2,200.	0.
22	CAMP REFRIGERATOR 2 SECTION							
	040198	SL	5.00	16	3,613.		3,613.	0.
23	CAMP REFRIGERATOR 2 SECTION							
	040198	SL	5.00	16	4,287.		4,287.	0.
24	CAMP REFRIGERATOR 1 DOOR							
	040198	SL	5.00	16	3,410.		3,410.	0.
25	CAMP FENCE							
	080197	SL	10.00	16	2,666.		2,666.	0.
26	CW SANDY RIDGE NEW CAB DOORS							
	050198	SL	10.00	16	18,403.		18,403.	0.
27	CW CARPETING							
	050198	SL	10.00	16	4,157.		4,157.	0.
29	48 MATTRESSES, 70 COTS, 20 STRAPS							
	122898	SL	5.00	16	12,042.		12,042.	0.
30	PLUMBING SYSTEM - CW							
	121498	SL	20.00	16	7,342.		3,976.	367.
31	DONOR PERFECT SOFTWARE							
	051199	SL	3.00	16	3,114.		3,114.	0.
32	TOSHIBA 2860 COPIER							
	031899	SL	3.00	16	10,480.		10,480.	0.
43	3 TON A/C							
	050101	SL	5.00	16	1,660.		1,660.	0.
44	CW - HOT WATER HEATERS							
	120100	SL	10.00	16	11,320.		9,999.	189.
45	CW - WATER FOUNTAIN PROJECT							
	060101	SL	10.00	16	16,048.		13,375.	1,070.
47	88 COTS & MATTRESSES							
	040101	SL	5.00	16	16,915.		16,835.	0.
49	HOT WATER HEATER ENCLOSURES CW							
	071201	SL	10.00	16	5,240.		4,323.	393.
51	TENT PLATFORM-CW							
	120701	SL	5.00	16	2,409.		2,409.	0.
52	3 TENT PLATFORMS-CW							
	122001	SL	5.00	16	6,000.		6,000.	0.
60	TENT PLATFORMS (TWO)							
	051303	SL	5.00	16	7,378.		7,378.	0.

016261 05-01-10

# - Current year section 179 (D) - Asset disposed

Asset Number	Description of property							
	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
64	TELEPHONE SYSTEM							
	110602	SL	5.00	16	16,410.		16,410.	0.
68	AIR CONDITIONER (RANGER'S @ CAMP)							
	072303	SL	5.00	16	3,995.		3,995.	0.
69	LIBRARY CABINETS (ARCHIVES ROOM)							
	061404	SL	5.00	16	1,820.		1,577.	0.
71	EPSON POWERLINE S1 PROJECTOR							
	120604	SL	3.00	16	893.		893.	0.
72	ARCHIVES TABLE							
	100604	SL	5.00	16	1,300.		1,040.	0.
106	PLATFORM TENTS/ROPES/SIDERS (2)							
	052707	SL	5.00	16	2,035.		950.	407.
107	PLATFORM CONSTRUCTION							
	052707	SL	5.00	16	5,296.		2,453.	1,059.
108	WATER SOFTNER							
	031907	SL	5.00	16	1,497.		748.	299.
109	WATER WELL							
	052107	SL	5.00	16	3,700.		1,361.	740.
110	WATER WELL							
	052107	SL	5.00	16	5,000.		1,829.	1,000.
118	ENCODER							
	091908	SL	5.00	16	2,180.		436.	436.
	* 990 PAGE 10 TOTAL BUILDINGS							
					182,810.	0.	162,019.	5,960.
	MACHINERY & EQUIPMENT							
2	EQUIPMENT							
	010108	SL	5.00	16	794,984.		753,089.	41,895.
20	TOSHIBA 5540 COPIER							
	120195	SL	3.00	16	11,000.		11,000.	0.
41	ALL TERRAIN WHEELCHAIRS							
	060101	SL	5.00	16	2,355.		2,355.	0.
42	DODGE DAKOTA 2000							
	090100	SL	5.00	16	19,500.		19,500.	0.
48	COMPAQ COMUTERS							
	090100	SL	5.00	16	6,278.		6,278.	0.
50	18 COMPUTERS SC							
	092701	SL	5.00	16	23,912.		23,912.	0.
57	LAWNMOWER							
	050503	SL	5.00	16	5,165.		5,165.	0.
58	HP D330 COMPUTERS (FOUR)							
	062003	SL	5.00	16	3,290.		3,290.	0.
59	MIP SOFTWARE							
	041503	SL	3.00	16	5,759.		5,759.	0.
62	FURNITURE							
	110602	SL	5.00	16	67,089.		67,089.	0.
63	BLINDS							
	110602	SL	5.00	16	5,287.		5,287.	0.
65	SERVER UPGRADES							
	111102	SL	5.00	16	9,077.		9,077.	0.
66	COMPAQ COMPUTERS (TWO)							
	092602	SL	5.00	16	6,485.		6,485.	0.
67	DISPLAY CASES							
	030303	SL	5.00	16	2,344.		2,344.	0.

016261  
05-01-10

# - Current year section 179 (D) - Asset disposed

32.4

Asset Number	Description of property							
	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
70	HP PAVILION LAPTOP							
	121504	SL	3.00	16	1,050.		1,050.	0.
73	18 POLES FOR 12 X 14 TENTS							
	041405	SL	5.00	16	3,672.		2,937.	0.
74	28 FLY/10 POLES FOR TENTS							
	030105	SL	5.00	16	10,982.		8,785.	0.
75	PLATFORM TENTS (14)							
	050105	SL	5.00	16	44,195.		35,356.	0.
76	GAS RANGES (3) LODGE KITCHEN							
	033105	SL	5.00	16	6,295.		5,036.	0.
86	CANON IR 3300 COPIER							
	080105	SL	3.00	16	2,401.		2,401.	0.
98	JOHN DEERE 757 ZERO-T MOWER							
	022306	SL	5.00	16	8,699.		6,235.	725.
99	ICE MAKER							
	030106	SL	5.00	16	3,307.		2,369.	276.
100	3HP SUBMERS PUMP							
	031006	SL	5.00	16	4,525.		3,048.	377.
101	34 MATTRESSES & COTS							
	060206	SL	5.00	16	7,351.		4,630.	980.
104	HP DC5700 COMPUTERS							
	031407	SL	5.00	16	1,300.		845.	260.
105	DELL 6400 LAPTOP							
	052207	SL	5.00	16	1,030.		619.	206.
111	ROWN TREE CUTTER							
	051107	SL	5.00	16	6,191.		2,992.	1,238.
112	ICE MACHINE							
	052207	SL	5.00	16	3,458.		1,615.	692.
113	SHAKEN BABY SIMULATOR							
	093007	SL	5.00	16	4,499.		2,900.	900.
114	TENTS AND PLATFORMS							
	050708	SL	5.00	16	4,868.		1,380.	974.
115	SERVER							
	062308	SL	3.00	16	20,956.		8,731.	5,239.
116	CONFERENCE PHONE							
	062308	SL	3.00	16	2,339.		975.	585.
117	RMS POS SYSTEMS							
	082008	SL	3.00	16	3,879.		1,401.	1,185.
129	EQUIPMENT							
	093010	SL	5.00	16	49,532.			9,906.
133	EQUIPMENT							
	093011	SL	5.00	16	46,348.			0.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT							
					1,199,402.	0.	1,013,935.	65,438.
	* 990 PAGE 10 TOTAL - POOL & CABANA							
					1,382,212.	0.	1,175,954.	71,398.
	LAND IMPROVEMENTS							
	BUILDINGS							
3	SWIMMING POOL (WELAKA)							
	010178	SL	40.00	16	87,840.		25,983.	2,196.
4	POOL & CABANA							
	010178	SL	20.00	16	182,045.		182,045.	0.

010201 05-01-10

# - Current year section 179 (D) - Asset disposed

Asset Number	Description of property							
	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
5	POOL REPAIRS							
	031384	SL	5.00	16	5,269.		5,269.	0.
6	POOL COVER							
	040985	SL	5.00	16	10,388.		10,388.	0.
7	PATCH POOL LINING							
	062685	SL	5.00	16	8,500.		8,500.	0.
8	POOL FILTER VALVE							
	083185	SL	5.00	16	2,327.		2,327.	0.
9	SOFT WATER METER							
	043086	SL	5.00	16	1,117.		1,117.	0.
10	POOL FILTER GRIDS							
	082086	SL	5.00	16	1,782.		1,782.	0.
11	1000 TANK							
	070690	SL	10.00	16	4,800.		4,800.	0.
12	POOL RESTORATION-INNER GRA							
	080192	SL	5.00	16	20,850.		20,850.	0.
13	GEOTHERMAL POOL SYST-CIP							
	061593	SL	5.00	16	40,000.		40,000.	0.
14	ELECTRICAL REPAIR							
	063094	SL	10.00	16	8,744.		8,744.	0.
15	ROOFING							
	103094	SL	10.00	16	6,411.		6,411.	0.
16	POOL COVERS							
	020494	SL	5.00	16	5,589.		5,589.	0.
17	LAND IMPROVEMENTS							
	010198	NC	.000		1,317,264.		1,151,819.	0.
18	ROAD PAVING (MACRS DEP)							
	031588	150DB	15.00	17	10,206.		10,206.	0.
19	PAVING							
	081189	SL	15.00	16	2,602.		2,602.	0.
28	SURVEY AND WATER SYSTEM							
	063098	SL	20.00	16	6,645.		4,400.	332.
33	ELECTRICAL INSTALLATION-CAMP WELAKA							
	123099	SL	20.00	16	38,780.		18,906.	1,939.
34	WATER MAIN INSTALLATION-CAMP WELAKA							
	012400	SL	20.00	16	88,810.		42,928.	4,441.
35	4 BASKETBALL UNITS & FENCING							
	090199	SL	10.00	16	9,140.		8,302.	0.
36	CONCRETE PADS-TENNIS COURTS-CW							
	022500	SL	10.00	16	6,450.		5,805.	0.
37	UNIT HOUSE-CAMP WELAKA							
	052500	SL	20.00	16	11,308.		5,274.	565.
38	LAUDRY BLDG-CAMP WELAKA							
	062600	SL	20.00	16	5,865.		2,711.	293.
39	CW - POOL PAVILION UPGRADE							
	040101	SL	20.00	16	7,182.		3,052.	359.
54	NEW DOCK CW							
	112601	SL	20.00	16	4,368.		1,708.	218.
55	RESURFACE POOL CW							
	022202	SL	10.00	16	39,780.		30,167.	3,978.
56	POOL FENCE CW							
	041402	SL	10.00	16	1,280.		960.	128.
90	POOL BATHROOM IMPROVEMENTS							
	090105	SL	10.00	16	8,470.		3,459.	847.

018281 05-01-10

# - Current year section 179 (D) - Asset disposed

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
102	SEWER SYSTEM							
	092606	SL	20.00	16	62,550.		9,384.	3,128.
103	POOL PUMP							
	102006	SL	5.00	16	4,871.		2,841.	974.
119	RESURFACE SPORTS COURT							
	042408	SL	10.00	16	8,800.		1,247.	880.
	* 990 PAGE 10 TOTAL BUILDINGS							
					2,020,033.	0.	1,629,576.	20,278.
	MACHINERY & EQUIPMENT							
123	WEBSITE SETUP COSTS							
	093010	L			10,500.			0.
130	LAND IMPROVEMENTS							
	093010	NC	.000		163,853.			0.
135	EQUIPMENT							
	093011	SL	5.00	16	17,998.			0.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT							
					192,351.	0.	0.	0.
	* 990 PAGE 10 TOTAL - LAND IMPROVEMENTS							
					2,212,384.	0.	1,629,576.	20,278.
	FURNITURE & FIXTURES							
	FURNITURE & FIXTURES							
121	FURNITURE AND FIXTURES							
	093008	SL	10.00	16	12,277.		1,942.	1,228.
131	FURNITURE & FIXTURES							
	093010	SL	5.00	16	1,154.			231.
134	FURNITURE							
	093011	SL	5.00	16	7,029.			0.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES							
					20,460.	0.	1,942.	1,459.
	* 990 PAGE 10 TOTAL - FURNITURE & FIXTURES							
					20,460.	0.	1,942.	1,459.
	BUILDINGS							
124	BOND ISSUE COST							
	062096	SL	20.00	16	39,500.		39,500.	0.
	* 990 PAGE 10 TOTAL BUILDINGS							
					39,500.	0.	39,500.	0.
	* 990 PAGE 10 TOTAL - FURNITURE & FIXTURES							
					39,500.	0.	39,500.	0.
	* GRAND TOTAL 990 PAGE 10 DEPR							
					7,639,026.	0.	4,799,399.	188,095.

Depreciation and Amortization 990 (Including Information on Listed Property)

Department of the Treasury Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

GIRL SCOUTS OF SOUTHEAST FLORIDA, INC. FORM 990 PAGE 10 59-0657327

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 rows for Section 179 election details. Line 1: 500,000. Line 3: 2,000,000.

Table with 3 columns: (a) Description of property, (b) Cost (business use only), (c) Elected cost. Rows 6-7.

Table with 12 rows for Section 179 calculations. Line 7: 7. Line 12: 12. Line 13: 13.

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

Table with 3 rows for Special Depreciation Allowance. Line 16: 188,095.

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

Table with 2 rows for MACRS deductions. Line 17: 17. Line 18: 18.

Section B - Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows 19a-i.

Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

Table with 3 rows for Alternative Depreciation System. Line 20a: 20a. Line 20b: 20b. Line 20c: 20c.

Part IV Summary (See instructions.)

Table with 3 rows for Summary. Line 21: 21. Line 22: 188,095. Line 23: 23.

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25

26 Property used more than 50% in a qualified business use: Table with 9 columns for property details and percentages.

27 Property used 50% or less in a qualified business use: Table with 9 columns for property details and percentages.

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for Section B with 6 main columns: (a) Vehicle, (b) Vehicle, (c) Vehicle, (d) Vehicle, (e) Vehicle, (f) Vehicle. Includes rows 30-36 for mileage and personal use questions.

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

Table for Section C with 2 columns: Yes, No. Includes rows 37-41 for policy and use questions.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

Table for Part VI with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year

42 Amortization of costs that begins during your 2010 tax year:

43 Amortization of costs that began before your 2010 tax year 43

44 Total. Add amounts in column (f). See the instructions for where to report 44

**Depreciation and Amortization RENT**  
 (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return: **GIRL SCOUTS OF SOUTHEAST FLORIDA, INC.**  
 Business or activity to which this form relates: **SITE AND EQUIPMENT RENTAL**  
 Identifying number: **59-0657327**

**Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	2,839.

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		<input type="checkbox"/>

**Section B - Assets Placed in Service During 2010 Tax Year Using the General Depreciation System**

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental property	/		27.5 yrs.	MM	S/L	
		/		27.5 yrs.	MM	S/L	
i	Nonresidential real property	/		39 yrs.	MM	S/L	
		/			MM	S/L	

**Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System**

20a	Class life					S/L	
b	12-year			12 yrs.		S/L	
c	40-year	/		40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	2,839.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25

26 Property used more than 50% in a qualified business use: Table with 9 columns for property details and percentages.

27 Property used 50% or less in a qualified business use: Table with 9 columns for property details and percentages.

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for Section B with columns (a) through (f) for Vehicle miles and personal use availability (Yes/No).

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

Table for Section C with questions 37-41 and Yes/No columns.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

Table for Part VI with columns (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year

42 Amortization of costs that begins during your 2010 tax year:

43 Amortization of costs that began before your 2010 tax year 43

44 Total. Add amounts in column (f). See the instructions for where to report 44