Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

A F	or the	2023 calendar year, or tax year beginning 00111 , 2023 and	ل ending	UN 30, 2024				
B c	heck if pplicable	C Name of organization		D Employer identific	cation number			
	Addres	GIRLS AT WORK, INC.						
	Name change	Doing business as		**-***28	63			
	Initial return Final return/	Number and street (or P.O. box if mail is not delivered to street address) 200 BEDFORD STREET	Room/suite	E Telephone number 6033450392				
	termin- ated			G Gross receipts \$	417,041.			
	Amend	, , , , , , , , , , , , , , , , , , ,		H(a) Is this a group re				
F	Applica			for subordinates				
	pendin	SAME AS C ABOVE		H(b) Are all subordinates in	·····= =			
ı ı	ax-exe	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) c	or 527	1	list. See instructions			
	Vebsit		021	H(c) Group exemptio				
		organization: X Corporation Trust Association Other	I Year		M State of legal domicile: NH			
Pa		Summary	L 1001	or formation.	otato or logar dominono, = 1 = 1			
	_	Briefly describe the organization's mission or most significant activities: GIRLS	S AT W	ORK, INC. EI	MPOWERS			
Se		GIRLS WITH TOOLS, UNLEASHING THEIR POWER.						
Governance		Check this box if the organization discontinued its operations or dispos						
Ver	l			3	7			
Ĝ	l	Number of independent voting members of the governing body (Part VI, line 1b)			6			
ళ		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			17			
Activities		Total number of volunteers (estimate if necessary)			72			
Ęį		Total unrelated business revenue from Part VIII, column (C), line 12			0.			
ď		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.			
				Prior Year	Current Year			
•	8	Contributions and grants (Part VIII, line 1h)		478,992.	400,103.			
une	l	Program service revenue (Part VIII, line 2g)		41,070.	16,938.			
Revenue	ı	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.			
č		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-10,269.	-8,409.			
	l	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		509,793.	408,632.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
ç	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		315,351.	312,240.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
be	b ·	Total fundraising expenses (Part IX, column (D), line 25) 52,97	77.					
û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		132,918.	161,968.			
	18 ⁻	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		448,269.	474,208.			
		Revenue less expenses. Subtract line 18 from line 12		61,524.	-65,576.			
Ces			Ве	ginning of Current Year	End of Year			
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		593,729.	501,727.			
t As	21	Total liabilities (Part X, line 26)		39,241.	12,815.			
		Net assets or fund balances. Subtract line 21 from line 20		554,488.	488,912.			
	ırt II	Signature Block						
		lties of perjury, I declare that I have examined this return, including accompanying schedules			/ knowledge and belief, it is			
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.				
		Circulum of officer		Data				
Sig		Signature of officer		Date				
Her	е	KAREN O'REILLY, TREASURER						
		Type or print name and title	Tr	Oato Jases F	DTINI			
.		Print/Type preparer's name Preparer's signature	1	Date Check	PTIN			
Paid	ŀ	KELLI D'AMORE KELLI D'AMORE	IU	5/14/25 self-employ	P01402985 *-***7524			
	arer	Firm's name NATHAN WECHSLER & COMPANY, P.A.		Firm's EIN *	··- · · · · / ɔ ∠ 4			
use	Only	Firm's address 70 COMMERCIAL STREET, 4TH FLOOR		Diam 60	3_224 5257			
		CONCORD, NH 03301		Phone no. 6 U	3-224-5357			
ıvlay	tne IF	S discuss this return with the preparer shown above? See instructions			X Yes No			

Pai	Statement of Program Service Accomplishments	_
	Check if Schedule O contains a response or note to any line in this Part III	╛
1	Briefly describe the organization's mission:	
	GIRLS AT WORK, INC. EMPOWERS GIRLS WITH TOOLS, UNLEASHING THEIR POWER	_
	AND POTENTIAL TO ACCOMPLISH ANYTHING. WHEN GIRLS LEARN HOW TO BUILD	_
	WITH POWER TOOLS, THEY COME AWAY WITH MORE THAN SKILLS IN WOODWORKING,	_
	THEY COME AWAY EMPOWERED FOR LIFE.	_
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	0
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	0
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$329,247 • including grants of \$) (Revenue \$16,938 •	_)
	PROVIDING WOODWORKING EDUCATION FOR GIRLS AND WOMEN.	. ,
		_
		_
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4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	_)
		_
		_
		_
		-
		_
		_
		_
		_,
4c	(Code:) (Expenses \$	_)
		_
		_
		_
		_
		_
		_
		_
4d	Other program services (Describe on Schedule O.)	_
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	200 047	
	· · · · · · · · · · · · · · · · · · ·	

Form 990 (2023) GIRLS AT WORK, INC.
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)?		37	
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			,,
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			,,
	during the tax year? If "Yes," complete Schedule C, Part II	4		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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			,,
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			,,
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		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? If "Yes," complete Schedule D, Part VIII	11c		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? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

Form 990 (2023) GIRLS AT WORK, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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			l
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			37
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		-
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		X
h	transaction with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L, Part I</i> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		<u> </u>
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			37
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
25.0	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		\vdash^{Δ}
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	335		
00	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
•	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
		38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	

Form 990 (2023) GIRLS AT WORK, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	_								
	filed for the calendar year ending with or within the year covered by this return 2a 1		37							
_	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	37						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X						
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	140		X						
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	4a								
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
52		5a		х						
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X						
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	1								
	any contributions that were not tax deductible as charitable contributions?	6a		Х						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b								
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	to file Form 8282?	7c		X						
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e		X						
е										
f	3 , 3 , 1, 1									
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h								
8	propositing every institute have every business heldings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.									
a Did the sponsoring organization make any taxable distributions under section 4966?										
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b								
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a								
h	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans									
С	Enter the amount of reserves on hand									
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or									
	excess parachute payment(s) during the year?	15	<u> </u>	х						
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х						
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17								
	If "Yes," complete Form 6069.									

Form 990 (2023) GIRLS AT WORK, INC.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below to line 2 throu to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X				
Sec	tion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	4						
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.							
b	Enter the number of voting members included on line 1a, above, who are independent 1b 5							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other							
	officer, director, trustee, or key employee?	2	X					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision							
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X				
6	Did the organization have members or stockholders?	6		X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or							
	more members of the governing body?	7a		X				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?	7b		Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
а	The governing body?	8a	X					
b	Each committee with authority to act on behalf of the governing body?	8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the							
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)							
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,							
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х					
b								
12a								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe							
	on Schedule O how this was done	12c	Х					
13	Did the organization have a written whistleblower policy?	13	Х					
14	Did the organization have a written document retention and destruction policy?	14		Х				
15	Did the process for determining compensation of the following persons include a review and approval by independent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	Х					
	Other officers or key employees of the organization	15b		Х				
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a							
	taxable entity during the year?	16a		Х				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's							
	exempt status with respect to such arrangements?	16b						
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed NH							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availal	ole				
	for public inspection. Indicate how you made these available. Check all that apply.							
	X Own website Another's website X Upon request Other (explain on Schedule O)							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial					
	statements available to the public during the tax year.							
20	State the name, address, and telephone number of the person who possesses the organization's books and records							
	ELAINE HAMEL - 603-345-0392							
	200 BEDFORD STREET MANCHESTER NH 03101							

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)	(C)					isatt	(D)	(E)	(F)	
Name and title	Average	(do	Position (do not check more than one					Reportable	Reportable	Estimated	
	hours per week	box offi	box, unless person officer and a direct			s both r/trus	n an tee)	compensation from	compensation from related	amount of other	
	(list any	ctor						the	organizations	compensation	
	hours for	Individual trustee or director	a)			rted		organization	(W-2/1099-MISC/	from the	
	related organizations	ustee	truste		e e	suadı		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related	
	below	dual tr	In stit utio nal tru stee		Key employee	st con	_	1099-NEC)		organizations	
	line)	Individ	Institu	Officer	Key er	Highest compensated employee	Former				
(1) ELAINE HAMEL	40.00										
EXECUTIVE DIRECTOR				Х				75,289.	0.	11,602.	
(2) KAREN O'REILLY	3.00								_	_	
TREASURER		Х		Х				0.	0.	0.	
(3) HEATHER ANDERSON	2.00									_	
VICE CHAIR		Х		Х				0.	0.	0.	
(4) KENNETH HAMEL	2.00								_	•	
BOARD CHAIR	2 00	Х		Х				0.	0.	0.	
(5) KENDRA BELANGER	2.00	3,7		٦,					0	•	
SECRETARY (6) REBECCA CONWAY	2.00	Х		Х				0.	0.	0.	
DIRECTOR	2.00	Х						0.	0.	0.	
(7) TOM REYNOLDS	2.00	^						0.	0.	<u> </u>	
DIRECTOR	2.00	Х						0.	0.	0.	
(8) JASON BLADES	2.00	-25						•	•	•	
DIRECTOR		х						0.	0.	0.	
									<u> </u>		
		-									
		-									
			_			_					
		1									
			\vdash		_						
		1									
		1									
-		<u> </u>			<u> </u>		l	<u> </u>		000	

332007 12-21-23 Form **990** (2023)

Part \	Section A. Officers, Directors, Trus	tees, Key Emp	<u> ploy</u>	ees,			ghes	st C	ompensated Employee	s (continued)				
	(A) Name and title	(B) Average hours per week	box	not c , unle	Pos heck ss per	more rson i	than	h an	(D) Reportable compensation	(E) Reportable compensatio	on	l .	(F) stimate nount	
		(list any hours for related organizations below line)	tee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organization (W-2/1099-MI 1099-NEC)	ns SC/			e ion ed
		illicy	<u> </u>	šii.	#0	X	E H	요						
			<u> </u>											
			<u> </u>											
			_											
			-											
			-											
	oubtotal otal from continuation sheets to Part VI								75,289.		0.	11,602.		
2 T	otal (add lines 1b and 1c)								75,289. eceived more than \$100,	000 of reportable	0 • e	1	1,6	<u>02.</u> 0
	ompensation from the organization Old the organization list any former officer,	director trusts	ا مو	(0)/ (ampl	ove	- O	hio	wheet compensated emp	lovee on			Yes	No
lii	ne 1a? If "Yes," complete Schedule J for so or any individual listed on line 1a, is the su	uch individual										3		Х
а	nd related organizations greater than \$150 bid any person listed on line 1a receive or a),000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual			4		Х
	endered to the organization? If "Yes." com on B. Independent Contractors	plete Schedule	<u>∍ J f</u> ∈	or su	ıch <u>ı</u>	pers	on					5		X
	complete this table for your five highest conne organization. Report compensation for										pensa	tion fr	om	
	(A) Name and business	address	N	INC	3				(B) Description of s	ervices	C		C) nsatio	n
	otal number of independent contractors (in 100,000 of compensation from the organiz		 ot lir	nited	d to	_	se lis	sted	above) who received mo	ore than				

Form 990 (2023) GIRLS AT WORK, INC.
Part VIII Statement of Revenue

		Check if Schedule O contains a response or note to an	v line in this Part VIII			
			(A)	(B)	(C)	(D)
			Total revenue	Related or exempt		Revenue excluded from tax under
				function revenue	business revenue	sections 512 - 514
လ လ	1	a Federated campaigns 1a				
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b				
ي ق		Fundraising events 15,04	8.			
ifts		Related organizations 1d	-			
nija,		Government grants (contributions)				
Sir		All other contributions, gifts, grants, and				
e ti		similar amounts not included above 1f 385,05	5.			
흕		Noncash contributions included in lines 1a-1f 1g \$ 3,40				
N P		Total. Add lines 1a-1f	400,103.			
<u> </u>		Business Co				
_o	2	G11/5 11/5 DDGGD11/ DDG		16,938.		
Š	_	0				
Ser						
E S						
gra Re						
Program Service Revenue						
		Total. Add lines 2a-2f	16,938.			
	3	Investment income (including dividends, interest, and				
	_	other similar amounts)				
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	-	(i) Real (ii) Person				
	6					
		Less: rental expenses 6b				
		Rental income or (loss) 6c				
		Net rental income or (loss)				
		Gross amount from sales of (i) Securities (ii) Other	r			
	•	assets other than inventory 7a				
		Less: cost or other basis				
<u>o</u>		and sales expenses 7b				
enc		Gain or (loss) 7c				
ě		Net gain or (loss)				
her Revenue		Gross income from fundraising events (not				
g		including \$15,048. of				
		contributions reported on line 1c). See				
			0.			
		Less: direct expenses 8b 8,40				
		Net income or (loss) from fundraising events	-8,409.			-8,409.
		Gross income from gaming activities. See				, , , , , , , , , , , , , , , , , , , ,
	-	Part IV, line 19 9a				
		Less: direct expenses 9b				
		Net income or (loss) from gaming activities				
		Gross sales of inventory, less returns				
		and allowances 10a				
		Less: cost of goods sold 10b				
		Net income or (loss) from sales of inventory				
\neg		Business Co	ode			
snc	11	1				
Miscellaneous Revenue						
ella						
lisc Re		All other revenue				
≥		e Total. Add lines 11a-11d				
	12	Total revenue See instructions	408.632.	16.938.	0.	-8 409.

-*2863

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising expenses (B) Program service expenses (C) Management and general expenses Do not include amounts reported on lines 6b. Total expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 94,391. 66,074. 18,878. 9,439. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 162,859. 108,694. 34,501. 19,664. 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 2,745. 3,921. 784. 392. Other employee benefits 9 51,069. 35,748. 10,214. 5,107. 10 Payroll taxes 11 Fees for services (nonemployees): Management Legal 3,629. 2,540. 726. 363. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 8,436. 7,729. column (A), amount, list line 11g expenses on Sch O.) 21,061. 4,896. 15,490. 10,843. 3,098. 1,549. Advertising and promotion 12 13,812. 9,666. 2,764. 1,382. 13 Office expenses Information technology 14 Royalties 15 39,209. 27,446. 7,842. 3,921. 16 Occupancy 9. 6. 2. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 9,449. 6,614. 1,890. 945. Depreciation, depletion, and amortization 22 2,784. 1,949. 557. 278. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 19,554. 19,554. PROGRAM EXPENSES AFTER SCHOOL PROGRAM -18,573. 18,573. 4,099. $1,\overline{171}$ 5,856. **AUTO EXPENSES** 586. 5,326. d GRANT EXPENSES 3,728. 1,065. 533. 7,216.6,072.SEE SCH O 763. 381. All other expenses 474,208. 329,247. 91,984. 52,977. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2023)

Part X | Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or n	ote to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			491,272.	1	342,393.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			4,800.	4	71,820.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	stantial co	ntributor, or 35%			
		controlled entity or family member of any of the				5	
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons describ	ed in section	on 4958(c)(3)(B)		6	
Ś	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Š	9	D			6,981.	9	5,181.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	145,845.			
	b	Less: accumulated depreciation	. 10b	63,512.	90,676.	10c	82,333.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must ed			593,729.	16	501,727.
	17	Accounts payable and accrued expenses			34,841.	17	12,815.
	18	Grants payable	4 400	18			
	19	Deferred revenue			4,400.	19	0.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet				21	
es	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, suk					
-iak		controlled entity or family member of any of the		F		22	
_	23	Secured mortgages and notes payable to unre		i		23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin of Schedule D				0.5	
	26	of Schedule D Total liabilities. Add lines 17 through 25			39,241.	25 26	12,815.
	20	Organizations that follow FASB ASC 958, c	hack hara		55,241.	20	12,013.
Se		and complete lines 27, 28, 32, and 33.	HECK HEIE				
ŭ	27					27	
3ala	28					28	
βE		Organizations that do not follow FASB ASC					
Ξ		and complete lines 29 through 33.					
p	29	Capital stock or trust principal, or current fund		0.	29	0.	
ets	30	Paid-in or capital surplus, or land, building, or		0.	30	0.	
Ass	31	Retained earnings, endowment, accumulated		554,488.	31	488,912.	
Net Assets or Fund Balances	32			554,488.	32	488,912.	
~	33	Total liabilities and net assets/fund balances			593,729.	33	501,727.
					,		200

OIII	1330 (2020)			ı aç	gc
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	408	3,6	<u>32.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	474		
3	Revenue less expenses. Subtract line 2 from line 1	3	-65		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	554	1,48	88.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	488	3,9:	12.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate				
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require		t		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2023)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number

	GIRL	S AT WORK,	INC.				*	*-***286	3			
τl	Reason for Public (Charity Status.	All organizations must c	omplete th	nis part.) S	ee instructions.						
organ												
	A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).						
					(b)(1)(A)(ii	i).						
						•	ii). Enter	the hospital's na	ame,			
	-	•				· · · · · · · · · · · · · · · · · · ·	•		,			
		or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental unit	describe	ed in				
	section 170(b)(1)(A)(iv). (Complete Part II.)											
		•	nental unit described in	section 17	70(b)(1)(A)	(v).						
X	, ,	•				• •	general r	oublic described	in			
				J			9					
			1)(A)(vi). (Complete Par	: IL)								
					ed in coniu	ınction with a la	nd-grant	college				
	-				-		-	-				
	•	, a 555g5 5. a.g5	aa		,,	,						
	·	Ilv receives (1) more t	than 33 1/3% of its supp	ort from c	ontribution	ns. membership	fees, and	d gross receipts	from			
			(,,									
			vely to test for public sat	etv. See	section 50)9(a)(4).						
	-	•	•	•			out the	purposes of one	or			
	•	•	•	•				•				
		-										
	¬	* *					-	giving				
		· · · · · · · · · · · · · · · · · · ·		•	_							
	• • • • •		• • • •					•				
	¬ -			ion with its	s supporte	d organization(s	s), by hav	ring				
		· ·				-	•	-				
	organization(s). You mus	t complete Part IV,	Sections A and C.									
	Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionally	integrate	d with,				
	its supported organization	n(s) (see instructions)	. You must complete i	Part IV, Se	ctions A,	D, and E.						
	Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection w	ith its supporte	d organiz	zation(s)				
	that is not functionally int	egrated. The organiz	ation generally must sat	sfy a distr	ibution req	quirement and a	n attentiv	eness				
	requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.						
	Check this box if the orga	anization received a v	vritten determination from	m the IRS	that it is a	Type I, Type II,	Type III					
	functionally integrated, or	Type III non-function	nally integrated supporting	ng organiz	ation.							
Ente	er the number of supported o	organizations										
				(iv) lo the erge	nization listed							
((II) EIN	(described on lines 1-10	in your governi	ng document?	` ′	•	` ′				
	Organization		above (see instructions))	Yes	No	support (see inst	iuctions)	support (see mstr	uctions)			
	XX X Enter Provi	rt I Reason for Public (organization is not a private found A church, convention of chi A school described in section A hospital or a cooperative A medical research organizicity, and state: An organization operated for section 170(b)(1)(A)(iv). (or A federal, state, or local good X An organization that normal section 170(b)(1)(A)(vi). (or A community trust described An agricultural research orgonization that normal activities related to its exempliant income and unrelated busing See section 509(a)(2). (Cold An organization organized an more publicly supported organization. You must organization. You must organization. You must organization organization. You must organization(s). You must organization organization. You must organization(s). You must organization(s) interequirement (see instructionally interequirement (see instructionally integrated, organizationally integrated, organiz	rt I Reason for Public Charity Status. organization is not a private foundation because it is: (if	arganization is not a private foundation because it is: (For lines 1 through 12, of A church, convention of churches, or association of churches described A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form A hospital or a cooperative hospital service organization described in set A medical research organization operated in conjunction with a hospital city, and state: An organization operated for the benefit of a college or university owned section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(or university or a non-land-grant college of agriculture (see instructions). university: An organization that normally receives (1) more than 33 1/3% of its supp activities related to its exempt functions, subject to certain exceptions; a income and unrelated business taxable income (less section 511 tax) from See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public sate An organization organized and operated exclusively for the benefit of, to more publicly supported organizations described in section 509(a)(1) of lines 12a through 12d that describes the type of supporting organization Type II. A supporting organization operated, supervised, or controlled the supported organization (s) the power to regularly appoint or elect a organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connect control or management of the supporting organization vested in the service organization. You must complete Part IV, Sections Check this box if the organization received a written determination from functionally integrated, or Type III non-functionally integr	rt I Reason for Public Charity Status. (All organizations must complete the organization is not a private foundation because it is: (For lines 1 through 12, check only A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b) and the section organization operated in conjunction with a hospital described city, and state: An organization operated for the benefit of a college or university owned or operate section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 17 (An organization that normally receives a substantial part of its support from a government organization and section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) An agricultural research organization described in section 170(b)(1)(A)(ix) operate or university or a non-land-grant college of agriculture (see instructions). Enter the university: An organization that normally receives (1) more than 33 1/3% of its support from a activities related to its exempt functions, subject to certain exceptions; and (2) no income and unrelated business taxable income (less section 511 tax) from business See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See An organization organized and operated exclusively for the benefit of, to perform the more publicly supported organizations described in section 509(a)(1) or sections lines 12a through 12d that describes the type of supporting organization and community organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its control or management of the supporting organization operated in connectin	t I Reason for Public Charity Status. (All organizations must complete this part.) Sorganization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1) A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(ii). A medical research organization operated in conjunction with a hospital described in section city, and state: An organization operated for the benefit of a college or university owned or operated by a go section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(A) an organization that normally receives a substantial part of its support from a governmental section 170(b)(1)(A)(iv). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) An agricultural research organization described in section 170(b)(1)(A)(x) operated in conjuor university or a non-land-grant college of agriculture (see instructions). Enter the name, city university: An organization that normally receives (1) more than 33 1/3% of its support from contribution activities related to its exempt functions, subject to certain exceptions; and (2) no more than income and unrelated business taxable income (less section 511 tax) from businesses acqui See section 59(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(2). lines 12a through 12d that describes the type of supporting organization and complete lines Type II. A supporting organization operated, supervised, or controlled by its supported organization, the supported organization supervised or controlled in connection with its supported organization(s) the power to regularly appoint or elect a majority of the directory organization organization op	tt Reason for Public Charity Status. (All organizations must complete this part.) See instructions. organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii), (Attach Schedule E (Form 990.)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). A norganization operated for the benefit of a college or university owned or operated by a governmental unit section 170(b)(1)(A)(iv). A norganization operated for the benefit of a college or university owned or operated by a governmental unit section 170(b)(1)(A)(iv). A norganization that normally receives a substantial part of its support from a governmental unit or from the section 170(b)(1)(A)(iv). (Complete Part III.) A community trust described in section 170(b)(1)(A)(iv). (Complete Part III.) An agricultural research organization described in section 170(b)(1)(A)(iv). operated in conjunction with a la or university: An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization organization organizated exclusively to test for public safety. See section 509(a)(4). An organization organization described in section 509(a)(1) or section 509(a)(2). See section 50 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 1 Type I. A supporting organization operated, supervised, or controlled by	The Reason for Public Charity Status. (All organizations must complete this part.) See instructions. proganization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit describe section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general is section 170(b)(1)(A)(iv). (Complete Part II.) A agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college university: An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support for income and unrelated business taxable income (less section 509(a)(2). Gomplete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Ensemble of the supporting organization organization organization organi	The Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Proganization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A school described in section 170(b)(1)(A)(ii). (Altach Schedule E (Form 9901)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's not city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A community trait described in section 170(b)(1)(A)(v). (Complete Part II.) A community trait described in section 170(b)(1)(A)(v). (Complete Part II.) A a gricultural research organization described in section 170(b)(1)(A)(v). (Pomplete Part II.) An agricultural research organization described in section 170(b)(1)(A)(v). (Pomplete Part II.) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross invest income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 19 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively to test for public safety. See section 509(a)(3). Check the box or lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12e. Type II. A supporting organizati			

332021 12-21-23

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	345,537.	371,562.	538,999.	531,247.	401,303.	2188648.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	345,537.	371,562.	538,999.	531,247.	401,303.	2188648.
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.						2188648.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	345,537.	371,562.	538,999.	531,247.	401,303.	2188648.
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 VI.)				150.		150.
11	Total support. Add lines 7 through 10						2188798.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	117,879.
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3)	
	organization, check this box and stor						
Sec	tion C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2023 (I		•	***		14	99.99 %
	Public support percentage from 2022					15	99 . 99 %
16a	33 1/3% support test - 2023. If the o	organization did no	t check the box or	line 13, and line 1	14 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	- 2023. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the fact			-	•	VI how the organiz	ation
	meets the facts-and-circumstances te	~		• • •			
b	10% -facts-and-circumstances test						10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circu						
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	<u> </u>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support					•	
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) organization	on,
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2023 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%
	Public support percentage from 2022					16	%
Se	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20)23 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	<u>%</u>
19a	33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization quali	fies as a publicly s	supported organiza	tion	
k	33 1/3% support tests - 2022. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	t op here. The orga	nization qualifies a	as a publicly suppo	orted organization	
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	tructions	

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
	163	NO
4		
1		
_		
2		
3a		
3b		
3с		
4a		
4b		
4-		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
Ja		
٥h		
9b		
0		
9с		
10a		
10b		

Par	Part IV Supporting Organizations (continued)			
			Yes	No
11	1 Has the organization accepted a gift or contribution from any of the following persons?			
а	a A person who directly or indirectly controls, either alone or together with persons described on I	lines 11b and		
	11c below, the governing body of a supported organization?	11a		
b	b A family member of a person described on line 11a above?	11b		
С	c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11	b. or 11c. provide		
	detail in Part VI.	11c		
Sect	ection B. Type I Supporting Organizations			
			Yes	No
1	1 Did the governing body, members of the governing body, officers acting in their official capacity	, or membership of one or		
	more supported organizations have the power to regularly appoint or elect at least a majority of			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the support			
	effectively operated, supervised, or controlled the organization's activities. If the organization had organization, describe how the powers to appoint and/or remove officers, directors, or trustees we			
	supported organizations and what conditions or restrictions, if any, applied to such powers during			
		•		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes, " e.	xplain in		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that	'		
	supervised, or controlled the supporting organization.	2		
Sect	ection C. Type II Supporting Organizations		_	
			Yes	No
1	1 Were a majority of the organization's directors or trustees during the tax year also a majority of t	the directors		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI	how control		
	or management of the supporting organization was vested in the same persons that controlled or	r managed		
	the supported organization(s).	1		
Sect	ection D. All Type III Supporting Organizations			
			Yes	No
	organization's tax year, (i) a written notice describing the type and amount of support provided of			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (ii	i) copies of the		
	organization's governing documents in effect on the date of notification, to the extent not previous	ously provided?		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain	in in Part VI how		
	the organization maintained a close and continuous working relationship with the supported orga	` '		
	, , , , , , , , , , , , , , , , , , , ,			
	significant voice in the organization's investment policies and in directing the use of the organization			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organ	nization's		
Sact	supported organizations played in this regard. ection E. Type III Functionally Integrated Supporting Organizations			
		ng tne year (see instructions).		
a				
b			,	
с 2		a a governmental entity (see instruction	ns). Yes	No
		t purposes of	162	NO
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part V	, ,		
	those supported organizations and explain how these activities directly furthered their exemp			
	how the organization was responsive to those supported organizations, and how the organization that these activities constituted substantially all of its activities.	a determined 2a		
	one or more of the organization's supported organization(s) would have been engaged in? If "Y			
	Part VI the reasons for the organization's position that its supported organization(s) would have e			
	these activities but for the organization's involvement.	2b		
		tors, or		
	trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs, and a			

of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

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

4

5

6

Schedule A (Form 990) 2023

4

5

Enter greater of line 2 or line 3.

instructions).

Income tax imposed in prior year

emergency temporary reduction (see instructions).

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

Sche	dule A (Form 990) 2023 GIRLS AT WORK	, INC.		*	<u>*-***2863</u>	Page 7
Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued			
Sect	ion D - Distributions		•		Current Yea	r
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1		
2	Amounts paid to perform activity that directly furthers exempt	<u> </u>				
	organizations, in excess of income from activity	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		3		
4	Amounts paid to acquire exempt-use assets	oo or capporton organizations		4		
_ - -	Qualified set-aside amounts (prior IRS approval required - pr	rovido dotoilo in Part VI)		5		
6	Other distributions (describe in Part VI). See instructions.	Ovide details in Fait VI)		6		
7	Total annual distributions. Add lines 1 through 6.			7		
- /-8	Distributions to attentive supported organizations to which the	ho organization is responsive		<u> </u>		
Ü	(provide details in Part VI). See instructions.	ne organization is responsive		8		
	Distributable amount for 2023 from Section C, line 6			9		
<u>9</u>	•					
10	Line 8 amount divided by line 9 amount	(2)	<u>'</u>	10	(***)	-
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023		(iii) Distributable Amount for 20	
1	Distributable amount for 2023 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2023 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2023					
<u> </u>	From 2018					
	From 2019					
	From 2020					
	From 2021					
	From 2022					
	Total of lines 3a through 3e					
	Applied to underdistributions of prior years					
	Applied to 2023 distributable amount					
<u>;</u>	Carryover from 2018 not applied (see instructions)					
-	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
	Distributions for 2023 from Section D,					
4						
	·					
	Applied to underdistributions of prior years					
	Applied to 2023 distributable amount					
	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2023, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2023. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2024. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
<u>a</u>	Excess from 2019					
<u>b</u>	Excess from 2020					
C	Excess from 2021					

Schedule A (Form 990) 2023

d Excess from 2022 e Excess from 2023

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

GIRLS AT WORK, INC. **Employer identification number** **-***<u>2863</u>

Pa	organizations waintaining bonor Advised organization answered "Yes" on Form 990, Part IV, line		iiiiai i uiius (on Accounts. Complete if the
		(a) Donor advised	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	writing that the assets hel	d in donor advise	d funds
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that gra	nt funds can be u	ised only
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any	other purpose c	onferring
	impermissible private benefit?			
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes	" on Form 990, P	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).		
	Preservation of land for public use (for example, recreat	tion or education)	Preservation of	a historically important land area
	Protection of natural habitat		Preservation of	a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribu	tion in the form o	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic stru	ucture included on line 2a		2c
d	Number of conservation easements included on line 2c acqui	ired after July 25, 2006, a	nd not	
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or te	erminated by the	organization during the tax
	year			
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the peri	iodic monitoring, inspecti	on, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, and	d enforcing conse	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enf	orcing conservati	on easements during the year
8	Does each conservation easement reported on line 2d above	•		
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation		•	
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's	financial statemer	nts that describes the
Da	organization's accounting for conservation easements.	Art Historical Tree	ourse or Oth	acy Cimilay Accets
Pa	rt III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form		isures, or Otr	ier Similar Assets.
10	If the organization elected, as permitted under FASB ASC 958		nuo etetement en	nd halanaa ahaat warka
ıa	of art, historical treasures, or other similar assets held for pub	•		
	service, provide in Part XIII the text of the footnote to its finan			
h	•			
b	If the organization elected, as permitted under FASB ASC 958			
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in luithe	crance or public service,
	provide the following amounts relating to these items.			Ф.
	(i) Revenue included on Form 990, Part VIII, line 1			
•		nouves or other similar so		· · · · · · · · · · · · · · · · · · ·
2	If the organization received or held works of art, historical trea	•		gain, provide
_	the following amounts required to be reported under FASB AS	~		Φ.
	Revenue included on Form 990, Part VIII, line 1			\$
h				

	dule D (Form 990) 2023 GIRLS A	T WORK, INC			**_**			ige 2
Par	organizations maintaining s					(contin	nued)	
3	Using the organization's acquisition, accessi	ion, and other records	s, check any of the	following that make s	significant use of its			
_	collection items (check all that apply).			la				
a	Public exhibition	d		change program				
b	Scholarly research	е	Other					
с 4	Preservation for future generations Provide a description of the organization's control of the organization of the organizati	allactions and avalain	how thou further th	o organization's eve	mot purpose in Bort	VIII		
5	During the year, did the organization solicit of					ΛIII.		
3	to be sold to raise funds rather than to be m					Yes		No
Par	t IV Escrow and Custodial Arran							NO
1 3.1	reported an amount on Form 990, Pa		e ii trie organization	Tallswered Tes on	11 01111 000, 1 art 10, 11	110 0, 01		
	Is the organization an agent, trustee, custod		iarv for contribution	ns or other assets no	t included			
	on Form 990, Part X?	*	•			Yes		No
b	If "Yes," explain the arrangement in Part XIII					_		
		•	· ·			Amoun	t	
С	Beginning balance				1c			
d	Additions during the year							
е	Distributions during the year							
f	Ending balance							
2a	Did the organization include an amount on F					Yes		No
b	If "Yes," explain the arrangement in Part XIII.	. Check here if the exp	olanation has been	provided in Part XIII				
Par	t V Endowment Funds Complete i	f the organization ans	wered "Yes" on For	rm 990, Part IV, line				
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four	r years t	ack
	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
	Grants or scholarships							
е	Other expenditures for facilities							
_	and programs							
	Administrative expenses							
g	End of year balance	`	What does not become fail	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				
2	Provide the estimated percentage of the cur	•	-)) neid as:				
a	Board designated or quasi-endowment	%	_%					
D	Permanent endowment Term endowment	% %						
C		- ' -						
22	The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posses	•	tion that are hold a	ad administered for t	ho			
Sa		ession of the organiza	lion that are neid at	id administered for t	ne	1	Yes	No
	organization by: (i) Unrelated organizations?					3a(i)		
	(i) Unrelated organizations?					3a(ii)		
h	(ii) Related organizations? If "Yes" on line 3a(ii), are the related organizations.					3b		
4	Describe in Part XIII the intended uses of the					JU		
	t VI Land, Buildings, and Equipm		vincili lulius.					
	Complete if the organization answere		, Part IV, line 11a. S	See Form 990, Part X	, line 10.			

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		46,371.	1,621.	44,750.
d Equipment		18,690.	3,863.	14,827.
e Other		80,784.	58,028.	22,756.
Total. Add lines 1a through 1e. (Column (d) must equa	l Form 990 Part X line 1	Oc. column (R))		82,333.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 GIRLS AT WC	ORK, INC.	**	-***2863 Page
Part VII Investments - Other Securities			<u> </u>
Complete if the organization answered "Yes" (a) Description of security or category (including name of security)		11b. See Form 990, Part X, line 12. (c) Method of valuation: Cost or end	d of year market yelve
	(b) Book value	(c) Method of Valuation. Cost of end	i-or-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) (B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	
· · · · · · · · · · · · · · · · · · ·	Description		(b) Book value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
<u>(8)</u> (9)			
Total. (Column (b) must equal Form 990, Part X, line 15, co	J (R))		
Part X Other Liabilities	Л. (D))		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability	· · ·		(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

(7) (8) (9)

Par	rt XI Reconciliation of Revenue per Au	dited Financial Statements With Revenue	per Return	
	Complete if the organization answered "Yes	on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited	financial statements	1	
2	Amounts included on line 1 but not on Form 990, P			
а	Net unrealized gains (losses) on investments	2a		
b	5			
С	D			
d				
е			2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, b			
а	Investment expenses not included on Form 990, Pa	art VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	4b		
			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal	Form 990. Part I. line 12.)	5	
Pai	rt XII Reconciliation of Expenses per A	udited Financial Statements With Expense	es per Return	
	Complete if the organization answered "Yes	on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial star	tements	1	
2	Amounts included on line 1 but not on Form 990, P	art IX, line 25:		
а	Donated services and use of facilities	2a		
b	D :			
С	Other losses			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, bu			
а	Investment expenses not included on Form 990, Pa	art VIII, line 7b		
		4b		
b	Other (Describe in Part XIII.)	4b	4c	
b c 5	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equ			
b c 5	Other (Describe in Part XIII.) Add lines 4a and 4b			
b c 5 Pa i	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information		5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	
b c 5 Pai	Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equivat XIII Supplemental Information ride the descriptions required for Part II, lines 3, 5, and	d 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par	5	

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization							ntification number
	T WORK, INC.					**-***2	
Part I Fundraising Activities. required to complete this par	Complete if the organization answe t.	red "Y	es" or	n Form 990, Part IV, li	ine 1	7. Form 990-EZ	filers are not
Indicate whether the organization rais	e Solicitat f Solicitat g Special	tion of tion of fundra	non-g gover aising	overnment grants nment grants events	taas	Or.	
	art VII) or entity in connection with pr viduals or entities (fundraisers) pursua	ofessi	onal fu	undraising services?		Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribu	ustody itrol of	(iv) Gross receipts from activity	to (Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Tatal			<u> </u>				
Total List all states in which the organization or licensing.	on is registered or licensed to solicit c		utions	or has been notified	it is	exempt from re	I gistration
- Inconsing.							

-*2863 Page 2 Schedule G (Form 990) 2023 GIRLS AT WORK, INC. Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-FZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro	oss income on Form 990-	EZ, lines i and ob. List e	vents with gross receipt	is greater than \$5,000.
			(a) Event #1 NEW FUTURES FOR FEMALES	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
a)			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	15,048.			15,048.
	2	Less: Contributions	15,048.			15,048.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
irect Ey	7	Food and beverages	3,431.			3,431.
	8	Entertainment				
		Other direct expenses				4,978.
		Direct expense summary. Add lines 4 through	(/			8,409.
Pa	rt I	Net income summary. Subtract line 10 from li Gaming. Complete if the organization a		990 Part IV line 19 or r		-0,409.
		\$15,000 on Form 990-EZ, line 6a.	anoworda 100 on 10m	000, 1 41111, 1110 10, 01 1	oportou moro triari	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve						
	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
)irect	4	Rent/facility costs				
		Other direct expenses				
		Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	ı 5 in column (d)			
	Ω	Net gaming income summary. Subtract line 7	from line 1 column (d)			
		Net garning income summary. Subtract line r	nomine i, column (a)			<u> </u>
9	En	ter the state(s) in which the organization condu	cts gaming activities: _			
		the organization licensed to conduct gaming ac No," explain:				Yes No
10a	 We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax v	/ear?	Yes No
		Yes," explain:	· · · · · · · · · · · · · · · · · · ·			

Sch	nedule G (Form 990) 2023 GIRLS AT WORK, INC. **	-***2	863	Page 3
11	Does the organization conduct gaming activities with nonmembers?	\square	Yes	O No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	. Ш	Yes	L No
	Indicate the percentage of gaming activity conducted in:	ı	1	
	a The organization's facility			%
	b An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
k	b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$			
c	c If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	daning manager compensation			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
ı	retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	\square	Yes	∟ No
,	organization's own exempt activities during the tax year \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and I	Part III, lir	nes 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

Schedule G	(Form 990)	GIRLS AT WOR	K, INC.	**-***2863	Page 4
Part IV	Supplemental Infor	GIRLS AT WORD	•		J

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

GIRLS AT WORK, INC. Employer identification number **-***2863

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ANYTHING. WHEN GIRLS LEARN HOW TO BUILD WITH POWER TOOLS, THEY COME
AWAY WITH MORE THAN SKILLS IN WOODWORKINGTHEY COME AWAY EMPOWERED FOR
LIFE.
FORM 990, PART VI, SECTION A, LINE 2:
EXECUTIVE DIRECTOR, ELAINE HAMEL IS A SIBLING OF THE BOARD CHAIR, KENNETH
HAMEL
FORM 990, PART VI, SECTION B, LINE 11B:
THE EXECUTIVE DIRECTOR AND THE BOARD OF DIRECTORS REVIEW THE 990 BEFORE
FILING.
FORM 990, PART VI, SECTION B, LINE 12C:
THE POLICY COVERS ALL DIRECTORS, OFFICERS, MEMBERS OF A STANDING COMMITTEE
OF THE BOARD, AND ALL EMPLOYEES WHO CAN INFLUENCE THE ACTIONS OF GIRLS AT
WORK, INC. ANY POTENTIAL CONFLICT OF INTEREST SHALL BE DISCLOSED TO THE
BOARD CHAIR WHO SHALL DETERMINE IF MATERIAL AND REPORT TO THE BOARD.
CONFLICTS OF INTEREST ARE REQUIRED TO BE DISCLOSED ANNUALLY. A MEMBER PARTY
TO A CONFLICT OF INTEREST SHALL RECUSE THEMSELVES FROM ANY FURTHER
DISCUSSION.
FORM 990, PART VI, SECTION B, LINE 15A:
THE EXECUTIVE DIRECTOR'S SALARY IS BASED ON COMPARABLE NEW HAMPSHIRE
STATISTICS FOUND FOR THE SIZE OF THE NONPROFIT ORGANIZATION, STATE AVERAGE

AND YEARS OF EXPERIENCE.

Schedule O (Form 990) 2023 Page **2**

Name of the organization GIRLS AT WORK, INC.	Employer identification number
FORM 990, PART VI, SECTION C, LINE 19:	
AVAILABLE UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
PAYROLL FEES:	
PROGRAM SERVICE EXPENSES	1,282.
MANAGEMENT AND GENERAL EXPENSES	366.
FUNDRAISING EXPENSES	183.
TOTAL EXPENSES	1,831.
NETWORKING AND DEVELOPMENT FEES:	
PROGRAM SERVICE EXPENSES	3,614.
MANAGEMENT AND GENERAL EXPENSES	7,363.
FUNDRAISING EXPENSES	8,253.
TOTAL EXPENSES	19,230.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	21,061.
FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES	:
IN-KIND EXPENSE:	
PROGRAM SERVICE EXPENSES	3,403.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,403.
PROFESSIONAL DEVELOPMENT:	
PROGRAM SERVICE EXPENSES	1,438.
MANAGEMENT AND GENERAL EXPENSES	411.
332212 11-14-23	Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2**

Name of the organization GIRLS AT WORK, INC.	Employer identification number
FUNDRAISING EXPENSES	205.
TOTAL EXPENSES	2,054.
CUSTODIAL EXPENSES:	
PROGRAM SERVICE EXPENSES	1,129.
MANAGEMENT AND GENERAL EXPENSES	323.
FUNDRAISING EXPENSES	161.
TOTAL EXPENSES	1,613.
CIVIL FRAUD PENALTY :	
PROGRAM SERVICE EXPENSES	70.
MANAGEMENT AND GENERAL EXPENSES	20.
FUNDRAISING EXPENSES	10.
TOTAL EXPENSES	100.
VOLUNTEER EXPENSES:	
PROGRAM SERVICE EXPENSES	32.
MANAGEMENT AND GENERAL EXPENSES	9.
FUNDRAISING EXPENSES	5.
TOTAL EXPENSES	46.
TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A	7,216.