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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service

Inspection

Α	For th	e 2008 calendar year, or tax year beginning OCT 1, 2008 and ending	SEP 30, 2009	
В	Check if applicab	Please use IRS C Name of organization	D Employer identifi	cation number
	Addr	ess label or GIRL SCOUTS - SYBAQUAY COUNCIL, INC.		
	Name	ge type Doing Business As	36-2	358083
	lnitial retur	Number and street (of P U box if mail is not delivered to street address) Room/s		
	Termi	Instruc-	847-	741-5521
Ļ	Amer	City or town, state or country, and ZIP + 4	G Gross receipts \$	3,488,855.
L	Appli tion pend	E1GIN, 11 00124-0000	H(a) Is this a group re	
	pond	F Name and address of principal officer:	for affiliates?	Yes X No
_			H(b) Are all affiliates inc	
		empt status: X 501(c) (3) ◀ (Insert no.) 4947(a)(1) or 527		list. (see instructions)
		te: ► WWW.GS-SYBAQUAY.ORG	H(c) Group exemptio	
	art I	Summary	ear of formation 1957 N	
ø	1	Briefly describe the organization's mission or most significant activities: BUILDING	GIRLS OF COU	RAGE,
Governance		CONFIDENCE AND CHARACTER, WHO MAKE THE WORLD	A BETTER PLA	CE.
Ë	2	Check this box if the organization discontinued its operations or disposed of n	nore than 25% of its asset	
Š	3	Number of voting members of the governing body (Part VI, line 1a)	3	13
ص ع	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
Activities &	5	Total number of employees (Part V, line 2a)	5	43
Ξ	6	Total number of volunteers (estimate if necessary)	6	2447
Act		Total gross unrelated business revenue from Part VIII, line 12, column (C)	<u>7a</u>	0.
_	<u> Ь</u>	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
		Contributions and prosts (Dod VIII has 41)	Prior Year 128,772.	<u>Current Year</u> 238,740.
Revenue	8	Contributions and grants (Part VIII, line 1h)	85,880.	65,396.
Ve	9	Program service revenue (Part VIII, line 2g)	61,067.	-23,460.
æ		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,796,530.	1,731,576.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,072,249.	2,012,252.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2/012/2136	Z/OIZ/ZJZ.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
v	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,272,894.	1,534,886.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
Dec		Total fundraising expenses (Part IX, column (D), line 25)		······································
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	928,069.	896,188.
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,200,963.	2,431,074.
	19	Revenue less expenses. Subtract line 18 from line 12	-128,714.	-418,822.
58	S.	RECEIVED	Beginning of Year	End of Year
sets	20	Total assets (Part X, line 16)	5,286,215.	5,156,931.
Net Assets or	ຊຶ່ 21	Total liabilities (Part X, line 26)	851,310.	989,364.
2	22	Net assets or fund balances. Subtract line 21 from line 20	4,434,905.	4,167,567.
P	art II	Signature Block		
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stateme and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowledg	ge and belief, it is true, correct,
		An II	. / /	
Sig	3n	Delip saired	1/12/1	0
He	re	Signature of officer	Date	
		RELLYN J. LAWRENCE CHAIRPE	RSON	
_		Type or print name and title	Charle of Branco	of a identifican number
Pai	id	Preparer's Kayon M Olan 1-8-10	self- (see ins	er's identifying number structions)
Pre	parer's	Signature 7 / V	employed	<u>P00085441</u> 2886485
Use	Only	Firm's name (or yours if self-employed), 104 E. ROOSEVELT ROAD SUITE 102	EIN ► 36-	2000403
		address and	Dhana =	30-665-4440
<u></u>			Prione no	X Yes No
		RS discuss this return with the preparer shown above? (see instructions) 8-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate	instructions	Form 990 (2008)
∠نن	001 12-1	io-uo — Ling i vi mitady not and maperwork neugotion Act Notice, see the separate		(JIII J J (L (J (J)

4e_	Total program service expenses ▶\$ 1,989,965. (Must equal Part IX, Line 25, column (B))	Form 99	0 (0000)
	(Expenses \$ Including grants of \$) (Revenue \$)		
4d	Other program services. (Describe in Schedule O.)		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
		_	
			
		_	
		.	
•	, , — , , , , , , , , , , , , , , , , ,		
4b	(Code:) (Expenses \$ Including grants of \$) (Revenue \$		
		·	
			
	MEMBERS.		
	COUNTIES. THE PROGRAM SERVES 9,404 GIRL MEMBERS AND 2,447 ADUL	T	
	IN MCHENRY COUNTY AND PORTIONS OF COOK, KANE, LAKE, DEKALB AND		LLE
	TO DELIVER GIRL SCOUTS OF THE USA PROGRAMS TO GIRLS AGES 5-17	YEARS	OLD
4a	(Code:) (Expenses \$ 1,989,965 • including grants of \$) (Revenue \$	65,3	396.)
	allocations to others, the total expenses, and revenue, if any, for each program service reported.		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.		
_	If "Yes", describe these changes on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes", describe these new services on Schedule O.		
_	the prior Form 990 or 990-EZ?	Yes	X No
2	Did the organization undertake any significant program services during the year which were not listed on		
	WORLD A BETTER PLACE.	_	
	BUILDING GIRLS OF COURAGE, CONFIDENCE AND CHARACTER, WHO MAKE	THE	
1	Briefly describe the organization's mission:		
	art III Statement of Program Service Accomplishments (see instructions)	0003	Page 2
CHIL	m 990 (2008) GIRL SCOUTS - SYBAQUAY COUNCIL, INC. 36-235	RURK	Page ン

	1990 (2008) GIRL SCOUTS - SYBAQUAY COUNCIL, INC. 36-2358	<u> 3083</u>	<u> </u>	age 3
Pa	rt IV Ghecklist of Required Schedules			
	•		Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	<u> X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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	ļ	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	ļ	X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			}
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	!	L
6	Did the organization maintain any donor advised funds or any accounts where 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	<u> </u>	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	ĺ		
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9_		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?	1		
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	L	X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	<u> </u>	Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity	/]	
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total 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 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X_
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 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, questions 3, 4, or 5? If "Yes," complete Schedule J	23	ļ	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 questions 24b-24d and complete Schedule K			١
	If "No", go to question 25	24a		Х
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	ļ	
¢	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		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			.,
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a_		X
þ	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			v
	prior year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	1	ŀ	I

Form **990** (2008)

26

27

person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II

contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial

Part IV | Checklist of Required Schedules (continued)

	•		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash 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?			l
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1
	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		<u>X</u>

Form 990 (2008)

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns. Enter -0- if not applicable	1a 9			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1ь 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming			
	(gambling) winnings to prize winners?	1	1c		
2 a	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 43			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined	rns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by this return?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b_		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other				
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country:				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank and			
	Financial Accounts.		_		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		_^
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	Regarding Prohibited	_		
	Tax Shelter Transaction?		5c	 	X
	Did the organization solicit any contributions that were not tax deductible?		6a		^
Ь	If "Yes," did the organization include with every solicitation an express statement that such contribute	tions or gitts	6b		
_	were not tax deductible?		00		-
7	Organizations that may receive deductible contributions under section 170(c). Did the organization provide goods or services in exchange for any quid pro quo contribution of more	e than \$752	7a]	х
a	If "Yes," did the organization notify the donor of the value of the goods or services provided?	σ (παπ ψ/ σ :	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
С	to file Form 8282?	as 10401100	7c		Х
d	If "Yes," Indicate the number of Forms 8282 filed during the year	7d			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a property of the organization of the organiz	personal			
·	benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti	ract?	7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required		7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0		7h		<u> </u>
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec				
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring or				
	excess business holdings at any time during the year?		8	ļ	
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		Ì		
а	Did the organization make any taxable distributions under section 4966?		9a		ļ
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9ь	 	
10	Section 501(c)(7) organizations. Enter: N/A	11			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	•		
11	Section 501(c)(12) organizations. Enter: N/A	الما			
	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	445			
	amounts due or received from them.)	11b	12-	1	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form If "Yes." enter the amount of tax-exempt interest received or accrued during the year N/A		12a		
<u> </u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b	Form	990	(2008)
					,/

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions.			ĺ
1a	Enter the number of voting members of the governing body 1a 1	3		
b	Enter the number of voting members that are independent	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			ĺ
	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 or trustees, or key employees to a management company or other person?	3_	<u> </u>	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	<u> </u>	X
6	Does the organization have members or stockholders?	6_	ļ	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	ļ	<u> X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			ĺ
	by the following:			f
а	The governing body?	8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	Х	 -
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9Ь	-	<u> </u>
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must		\ ,,	
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			v
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		<u> </u>
<u>Sec</u>	tion B. Policies		\	
	The state of the s	12a	Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	128		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	12b	Х	
	to conflicts?	120		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12c	х	
40	In Schedule O how this is done	13	1	X
13	Does the organization have a written whistleblower policy?	14	Х	
14	Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	1-1-		
15				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:	15a	x	İ
	The organization's CEO, Executive Director, or top management official?	15b	X	
D	Other officers or key employees of the organization?	1.00		
16-	Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			į
ıva		16a	Ì	X
L	taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	1.00		<u> </u>
0	In joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16ь	Ì	ĺ
Sac	tion C. Disclosure	1		
17	List the states with which a copy of this Form 990 is required to be filed ►IL			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	le for		
.5	public inspection. Indicate how you make these available. Check all that apply.			
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	ancıal	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the organization of the person who possesses the books and records of the organization of the person of the pers	zation:	-	
_•	VICKI WRIGHT - (847)741-5521			
	12N124 COOMBS ROAD, ELGIN, IL 60124-8000			
83200 12-18-		Form	990	(2008)

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B)		(C) Position					(D)	(E)	(F)
Name and Title	Average hours	(0				app	oly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee or director	institutional frustee		Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
KELLYN LAWRENCE]		Γ				
CHAIR	10.00	X		X		L		0.	0.	0.
JEFFREY SCHMIDT										
FIRST VICE-CHAIR	1.00	X		X				0.	0.	0.
BARBARA PAGANO										
SECOND VICE-CHAIR	1.00	X		X				0.	0.	0.
CAROLYN O'NEAL										
THIRD VICE-CHAIR	1.00	X		X		L		0.	0.	0.
LOIS WOLLNEY						1				
SECRETARY	2.00	X	<u> </u>	X		Щ.		0.	0.	0.
PATRICIA MCCULLOUGH	ĺ	ĺ	ĺ		ĺ	ĺ	ĺ	[u.
TREASURER	3.00	X	ļ	X		<u> </u>		0.	0.	0.
SHERI LACY									_	_
DIRECTOR	1.00	X	_		_	<u> </u>	<u> </u>	0.	0.	0.
MICHAEL PEDDLE										•
DIRECTOR	1.00	X	<u> </u>			<u> </u>		0.	0.	0.
JUNE KUBASIAK	1 00	l								^
DIRECTOR	1.00	X	ļ	_				0.	0.	0.
SARA ELLEN ANDERSON	1 00	١			ŀ				_	•
DIRECTOR	1.00	X	-		_	}	_	0.	0.	0.
LAVETA SMALL	1 00	,,								^
DIRECTOR HOODS	1.00	X	-	_	_	 		0.	0.	0.
BOBBIE WOODS	1 00							0.	0.	0.
DIRECTOR	1.00	X	-	_		├-	<u> </u>	0.1		
JACKIE GAPPA DIRECTOR	1.00	J						0.	0.	0.
JANE E. CARTER	1.00	X	├	-		-	-			0.
CHIEF EXECUTIVE OFFICER	37.50	v		x				79,535.	0.	10,271.
CHILL EXECUTIVE OFFICER	37.30	A		Λ				757333.		
			_							
			Щ.	لببيا		ъ				5 000 (0000)

Form **990** (2008)

. (A) Name and title	(B) Average		1	(C Posi	-			(D) Reportable	(E) Reportable		Es	(F) stimated	ı
	hours per week	Individual trustee or director	ec eck	all				compensation from the organization (W-2/1099-MISC)	compensation from related organization (W-2/1099-Mi	on d as	com fr org	nount of other pensatio om the anizatio d related anization	f on n
1b Total	·					>		79,535.		0.	1	0,27	1.
2 Total number of individuals (including those compensation from the organization	e in 1a) who re	ceiv	ed n	nore	tha	n \$1	00,0	000 in reportable		>			0
 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any person listed on line 1a receive or a the organization? If "Yes," complete Schedule 	uch individual im of reportab 0,000? If "Yes, accrue compe	le co " co nsat	ompo mple	ensa ete S	ation Sche	n and	d otl	her compensation from for such individual	the organization		3 4 5		X X X
Section B. Independent Contractors								hat received more than	\$100,000 of oor		ation f	rom	
Complete this table for your five highest co the organization. (A) Name and business								(B) Description of s			(0		
2 Total number of independent contractors (infrom the organization ▶	ncluding those	e in ·	 1) wł 	no re	ecei	ved	mor	re than \$100,000 in com	pensation		Form	990 (20	1081

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	89,806.	9,681.	61,763.	18,362.
_	trustees, and key employees	09,000.	9,001.	01,703.	10,302
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	1,224,909.	1,048,026.	127,923.	48,960.
7	Other salaries and wages	1,224,303.	1,040,020.	1217525.	10/300
8	Pension plan contributions (include section 401(k)	37,609.	32,506.	3,672.	1,431.
9	and section 403(b) employer contributions) Other employee benefits	95,220.	82,298.	9,298.	1,431. 3,624.
10	Payroll taxes	87,342.	70,747.	12,228.	4,367
11	Fees for services (non-employees):	,			
··	Management				
	Legal	915.	429.	486.	
	Accounting .	17,140.	8,035.	9,105.	
	Lobbying				
	Professional fundraising services See Part IV, line 17				
f	Investment management fees	10,028.	4,701.	5,327.	
g	Other	9,949.	4,664.	5,285.	
12	Advertising and promotion				
13	Office expenses	273,741.	258,217.	12,675.	2,849.
14	Information technology				
15	Royalties				
16	Occupancy	210,889.	170,820.	29,524.	10,545
17	Travel	37,128.	26,741.	10,387.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				<u>-</u>
19	Conferences, conventions, and meetings	10,613.	3,205.	7,408.	
20	Interest				
21	Payments to affiliates	140 540	110 014	10 677	7 027
22	Depreciation, depletion, and amortization	140,548.	113,844.	19,677.	7,027
23 24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total	96,352.	90,947.	5,405.	
	expenses shown on line 25 below) EQUIPMENT REPAIR & MAIN	43,732.	37,735.	795.	5,202
	MICORITANIDOUC DYDENCE	21,681.	6,864.	14,750.	67.
þ	ETNIANCIAL ACCIONANCE	19,646.	19,646.	14,730.	
C	MEMBERSHIP DUES	3,826.	859.	2,967.	
d	HENDERSHIP DOES	3,020.		213011	
e	All other evenes				
f 25	All other expenses	2,431,074.	1,989,965.	338,675.	102,434
<u>25</u> 26	Joint Costs. Check here	2/431/0/44	1,00,000		
20	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

832010 12-18-08

Form 990 (2008)

Pai	t X	Balance Sheet		-					
			(A) Beginning of year		(B) End of year				
	1	Cash · non-interest-bearing	752,729.	1	702,893.				
	2	Savings and temporary cash investments		2					
	3	Pledges and grants receivable, net		3					
	4	Accounts receivable, net	5,491.	4	4,376.				
	5	Receivables from current and former officers, directors, trustees, key	-						
	•	employees, or other related parties. Complete Part II of Schedule L		5					
	6	Receivables from other disqualified persons (as defined under section			······································				
	U	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete							
			İ	6					
	_	Part II of Schedule L		7					
Assets	7	Notes and loans receivable, net	217,795.	8	165,818.				
Ass	8	Inventories for sale or use	47,546.	9	45,536.				
,	9	Prepaid expenses and deferred charges Land, buildings, and equipment: cost basis 10a 6,559,415		-					
	10a								
	b	Less: accumulated depreciation. Complete Part VI of Schedule D 10b 3,825,362	2,755,461.	10c	2,734,053.				
			2,733,401.	11	2//31/033.				
	11	Investments · publicly traded securities	1,507,193.	12	1,504,255.				
	12	Investments · other securities. See Part IV, line 11	1,307,133.	13	1,304,233.				
	13	Investments - program-related. See Part IV, line 11							
	14	Intangible assets		14					
	15	Other assets. See Part IV, line 11	5,286,215.	15 16	5,156,931.				
	16	Total assets. Add lines 1 through 15 (must equal line 34)	66,903.		73,984.				
!	17	Accounts payable and accrued expenses	00,303.	17	13,704.				
Liabilities	18	Grants payable	44,892.	18	55,552.				
	19	Deferred revenue	44,692.	19	33,332.				
	20	Tax-exempt bond liabilities	-	20					
	21	Escrow account liability. Complete Part IV of Schedule D		21					
	22	Payables to current and former officers, directors, trustees, key employees,							
		highest compensated employees, and disqualified persons. Complete Part II							
		of Schedule L	634 090	22	637,594.				
	23	Secured mortgages and notes payable to unrelated third parties	634,080.	23	037,394.				
	24	Unsecured notes and loans payable	105 425	24	222 224				
	25	Other liabilities. Complete Part X of Schedule D	105,435.	25	222,234. 989,364.				
	26	Total liabilities. Add lines 17 through 25	851,310.	26	303,304.				
		Organizations that follow SFAS 117, check here X and complete							
es		lines 27 through 29, and lines 33 and 34.	4 270 207		2 002 444				
anc	27	Unrestricted net assets	4,378,207.	27	3,982,444.				
Bai	28	Temporarily restricted net assets	17,968.	28	17,607. 167,516.				
힏	29	Permanently restricted net assets	38,730.	29	107,310.				
Ŧ		Organizations that do not follow SFAS 117, check here							
Net Assets or Fund Balances		complete lines 30 through 34.							
ets	30	Capital stock or trust principal, or current funds		30					
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31					
et /	32	Retained earnings, endowment, accumulated income, or other funds	4 4 2 4 0 0 5	32	4 167 567				
Z	33	Total net assets or fund balances	4,434,905.	33_	4,167,567.				
	34	Total liabilities and net assets/fund balances	5,286,215.	34	5,156,931.				
Pa	rt XI	Financial Statements and Reporting			Yes No				
					162 140				
1		ounting method used to prepare the Form 990: Cash X Accrual	Other						
2a		e the organization's financial statements compiled or reviewed by an independe			2a X				
		e the organization's financial statements audited by an independent accountan			2b X				
c		es" to lines 2a or 2b, does the organization have a committee that assumes res		audit					
		w, or compilation of its financial statements and selection of an independent a			2c X				
2a b c	As a	result of a federal award, was the organization required to undergo an audit or	audits as set forth in the Sing	le Auc	lit 3a X				
	Act a	Act and OMB Circular A-133?							
<u>b</u>	If "Ye	es," did the organization undergo the required audit or audits?			3b				
					Form 990 (2008)				

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Open to Public Inspection

OMB No 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number 36-2358083 GIRL SCOUTS - SYBAQUAY COUNCIL, INC.

Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	t.) (see inst	ructions)				
The organi	zation is not a	a private foundation	because it is: (Please ch	eck only o	ne organiz	ation.)						
1 🔲			s, or association of churc				(b)(1)(A)(i)	•				
2			0(b)(1)(A)(ii). (Attach Sci									
з 🗔			tal service organization of		in section	170(b)(1)	(A) (iii). (Att	ach Sche	dule H.)			
4			operated in conjunction							he hospital's	s nam	e,
	city, and stat		,									
5			benefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental uni	describe	ed in		
• —	-	(b)(1)(A)(iv). (Comple		•	·	•	_					
6			ent or governmental unit	t described	d in sectio	n 170(b)(1)(A)(v).					
7			eives a substantial part					r from the	general p	oublic descri	bed ir	า
	-	(b)(1)(A)(vi). (Comple				.			•			
8 🗀			ection 170(b)(1)(A)(vi). ((Complete	Part II.)							
9 X			eives: (1) more than 33 1			om contri	butions, m	embershi	o fees, an	d gross rece	eipts f	from
•			nctions - subject to certa									
			axable income (less sect									
		509(a)(2). (Complete			,							
10 🔲			perated exclusively to te	st for publi	c safety. S	ee sectio	n 509(a)(4). (see ins	tructions))		
11 🗀			perated exclusively for the								one c	or
—			ations described in section									
			organization and comple				•	,				
	a Type			тур			tegrated		d 🔲	Type III - O	ther	
e 🗀			t the organization is not			-		more disc	qualified p	persons other	er thai	n
•—			han one or more publicly									
f			ten determination from t									
•		rganization, check th			•							
9			organization accepted ar	nv aift or co	ontribution	from any	of the folio	owing pers	sons?	_		
9			irectly controls, either al								Yes	No
			upported organization?			•				11g(i)		
	•		n described in (i) above?							11g(ii)		
		•	person described in (i) o		∍?					11g(iii)		
h		· ·	about the organizations			ports.						
••					,	•						
(i) Nama	of cupported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did you	ı notify the	(vi) Is	the	(vii) Amo	ount of	f
	of supported anization	(11) E114	organization	in col (i) lis	sted in your	organizat	ion in col	organizátio	on in colle	supp		
			(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	(i) organız U S	2			
			(see instructions))	Yes	No	Yes	No	Yes	No			
				_	_							
									[
		L										
									T			
	_	I										
Total												
LHA For F	Privacy Act ar	nd Paperwork Redu	ction Act Notice, see tl	he Instruc	tions for F	orm 990.		Schedul	e A (Forn	n 990 or 990)-EZ)	2008

832021 12-17-08

Pa	Support Schedule for (Complete only if you checke	-			(D)(T)(A)(IV) an	a 170(I)(1)(A)(VI)
Sed	ction A. Public Support	50X OII IIII C						
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
	Gifts, grants, contributions, and							
•	membership fees received. (Do not							
	include any "unusual grants.")					<u> </u>		
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					ļ		
4	Total. Add lines 1 - 3					ļ		
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included	1						
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)					ļ		
	Public Support. Subtract line 5 from line 4			1	<u> </u>	1	<u> </u>	
	ction B. Total Support	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(6)	2008	(f) Total
	endar year (or fiscal year beginning in) Amounts from line 4	(a) 2004	(0) 2003	(0) 2000	(0) 2007	(6)	2000	17 / 014
_	Gross income from interest,					<u> </u>		
8								
	dividends, payments received on securities loans, rents, royalties						ľ	
	and income from similar sources							
•	Net income from unrelated business					<u> </u>		
9						1		
	activities, whether or not the business is regularly carried on					1		
10	Other income. Do not include gain				-			
	or loss from the sale of capital							
	assets (Explain in Part IV.)							
11	Total support. Add lines 7 through 10	***************************************						
	Gross receipts from related activities		ions)			12		
	First five years. If the Form 990 is fo			rd, fourth, or fifth t	tax year as a secti	on 501(c)(3)	
	organization, check this box and sto							▶
Se	ction C. Computation of Pub	ic Support Pe	ercentage					
14	Public support percentage for 2008 ((line 6, column (f) o	divided by line 11,	column (f))		14		
	Public support percentage from 200					15		
16a	a 33 1/3% support test - 2008. If the	organization did n	ot check the box o	on line 13, and line	14 is 33 1/3% or	more, ch	eck this box	cand
	stop here. The organization qualifies							▶∟_
t	33 1/3% support test - 2007. If the				d line 15 is 33 1/39	% or mor	e, check thi	s box
	and stop here. The organization qua							▶
178	a 10% -facts-and-circumstances tes							
	and if the organization meets the "fac					art IV hov	v the organi	zation
	meets the "facts-and-circumstances"							▶∟.
t	o 10% -facts-and-circumstances tes							u% or
	more, and if the organization meets t							
	organization meets the "facts-and-cir							◟ 【늗
<u>18</u>	Private foundation. If the organization	on did not check a	a box on line 13, 10	ba, 166, 17a, or 17	D, CNECK THIS DOX	and see	/Form 000	or 990-EZ) 200
					Sch	leanie A	רכנווו אא∪	01 880-EEJ 200

Sch	edule A (Form 990 or 990-EZ) 2008 G	IRL SCOUT	S - SYBAQ	UAY COUNC	IL, INC.	36-235	8083 Page 3	
Pa	rt III Support Schedule for (Organizations	Described in	Section 509(a)	(2) (Complete only	If you checked the be	ox on line 9 of Part I)	
Se	ction A. Public Support							
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	159,939.	136,098.	183,446.	128,772.	238,740.	846,995.	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	2,845,783.	2,976,377.	2,940,868.	2,767,253.	2,681,026.	14,211,307.	
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							
	Total. Add lines 1 - 5	3,005,722.	3,112,475.	3,124,314.	2,896,025.	2,919,766.	15,058,302.	
7a	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
·	Amounts included on tines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000							
c	Add lines 7a and 7b							
	Public support (Subtract line 7c from line 6)						15,058,302.	
Sec	Section B. Total Support							
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total	
	Amounts from line 6	3,005,722.	3,112,475.	3,124,314.	2,896,025.	2,919,766.	15,058,302.	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	74,974.	93,311.	79,929.	61,067.	48,350.	357,631.	
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses acquired after June 30, 1975							
c	Add lines 10a and 10b	74,974.	93,311.	79,929.	61,067.	48,350.	357,631.	
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	220,855.	35,801.	34,216.	36,558.	57,668.	385,098.	
	Total support (Add lines 9, 10c, 11, and 12)						15,801,031.	
14	First five years. If the Form 990 is for	the organization's	first, second, third	l, fourth, or fifth ta	x year as a section	n 501(c)(3) organiz	ation,	
	check this box and stop here							
Sec	tion C. Computation of Publ						05 00	
15	Public support percentage for 2008 (I		-	olumn (f))		15	95.30 %	
16	Public support percentage from 2007					16	94.72 %	
Sec	tion D. Computation of Inves							
17	Investment income percentage for 20			e 13, column (f))		17	2.26 %	
18	18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h							
19a	19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not							
	more than 33 1/3%, check this box ar		-	· · · · · · · · · · · · · · · · · · ·			▶ 🗓	
Ь	b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and							
00	line 18 is not more than 33 1/3%, che							
20	Private foundation. If the organization	n did not check a t	oox on line 14, 19a	, or 196, check th		tructions edule A (Form 990	or 990-EZ) 2009	

Schedule D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008 Open to Public Inspection

Name of the organization

GIRL SCOUTS - SYBAQUAY COUNCIL, INC.

Employer identification number

	GIRL SCOUTS - SIBA		 _	30-2336063
Pa			is or Accou	unts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6. (a) Donor advised funds	0.3.5	d d - Ab
		(a) Donor advised funds	(b) Fur	nds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year		<u> </u>	
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	used 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 a	dvisors in writing that grant funds may t	oe used only	
···	for charitable purposes and not for the benefit of the donor of	r donor advisor or other impermissible p	orivate benefit	Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7	·
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).		
	Preservation of land for public use (e.g., recreation or p	oleasure) Preservation of an h	nstorically imp	ortant land area
	Protection of natural habitat	Preservation of cert	ified historic st	tructure
	Preservation of open space			
2	Complete lines 2a-2d if the organization held a qualified cons	ervation contribution in the form of a co	nservation eas	sement on the last day
	of the tax year.			
				Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c	
ď	Number of conservation easements included in (c) acquired	after 8/17/06	2d	
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by ti	he organization	n during the taxable
	year ▶			_
4	Number of states where property subject to conservation ear	sement is located		
5	Does the organization have a written policy regarding the per		and	
•	enforcement of the conservation easements it holds?			Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a	nd enforcing easements during the year	•	
7	Amount of expenses incurred in monitoring, inspecting, and			
8	Does each conservation easement reported on line 2(d) above			
	and section 170(h)(4)(B)(ii)?	o salisi, ilia raquila iliania di sasilari il	-(.)(.)(-)()	Yes No
9	In Part XIV, describe how the organization reports conservati	on easements in its revenue and expens	se statement.	
•	include, if applicable, the text of the footnote to the organization			
	conservation easements	tion of interioral officeriority that gooding	o tiro organiza	non o accoming to
Pai	t III Organizations Maintaining Collections of	f Art. Historical Treasures, or 0	Other Simil	ar Assets.
	Complete if the organization answered "Yes" to Form	-		
10	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and	halance sheet	works of art historical
14	treasures, or other similar assets held for public exhibition, ed			
	the footnote to its financial statements that describes these		ublic service,	Stovide, in Fait XIV, the text of
_			ana shaat wa	de of ort. historical traceuras
b	If the organization elected, as permitted under SFAS 116, to	•		
	or other similar assets held for public exhibition, education, o	r research in furtherance of public service	ce, provide trie	following amounts relating to
	these items:		_	•
	(i) Revenues included in Form 990, Part VIII, line 1			\$ \$
_	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical trea		iai gain, provid	le
	the following amounts required to be reported under SFAS 1	16 relating to these items:	_	
а	Revenues included in Form 990, Part VIII, line 1		>	\$ \$
b	Assets included in Form 990, Part X		•	\$
 LHA	For Privacy Act and Paperwork Reduction Act Notice, see	the Instructions for Form 990.		Schedule D (Form 990) 2008

Schedule D (Form 990) 2008

Part VII Investments - Other Securities. Se	e Form 990, Part X, line 12			
(a) Description of security or category (including name of security)	(b) Book value	(c) N	lethod of valua nd-of-year mark	
Financial derivatives and other financial products				
Closely-held equity interests				
Other				
FEDERAL GOVERNMENT SECURITIES	52,475.	END-OF-YEAR	MARKET	VALUE
MORTGAGE BACKED INVESTMENTS				
FUNDS	28,372.	END-OF-YEAR	MARKET	VALUE
MUTUAL FUNDS	1,276,425.	END-OF-YEAR	MARKET	VALUE
CERTIFICATES OF DEPOSITS	146,983.	END-OF-YEAR	MARKET	VALUE
Total. (Col (b) should equal Form 990, Part X, col (B) line 12) Part VIII Investments - Program Related. So	1,504,255.			
			lethod of valua	tion:
(a) Description of investment type	(b) Book value	, , ,	nd-of-year marl	
			<u> </u>	
				
			····	
Total. (Col (b) should equal Form 990, Part X, col (B) line 13)				
Part IX Other Assets. See Form 990, Part X, line	15.			
(a)	Description			(b) Book value
				· · · · · · · · · · · · · · · · · · ·
				- <u></u> -
Total. (Column (b) should equal Form 990, Part X, col (B) II	ne 15)			
Part X Other Liabilities. See Form 990, Part X,	line 25.		<u></u>	
(a) Description of liability		(b) Amount		
Federal income taxes				
ACCRUED VACATION AND PAYROLL		202,105.		
DUE TO SERVICE UNITS		20,129.		
Total. (Column (b) should equal Form 990, Part X, col (B) li	ne 25.)	222,234.		
In Part XIV, provide the text of the footnote to the organiza			tion's liability fo	or uncertain tax positions

under FIN 48.

,	dule D (Form 990) 2008 GIRL SCOUTS - SYBAQUAY COUNCIL		36-2	2358083	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Finar	icial Statements		<u> </u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		2,012	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		2,431,	074.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		-418,	
4	Net unrealized gains (losses) on investments	4	_	151,	484.
5	Donated services and use of facilities	5			
6	Investment expenses	6			
7	Prior period adjustments	7			
8	Other (Describe in Part XIV)	8	_		
9	Total adjustments (net). Add lines 4-8	9		151,	484.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10		-267	338.
Par	t XII Reconciliation of Revenue per Audited Financial Statements W	ith Revenue per P	<u>Return</u>		607
1	Total revenue, gains, and other support per audited financial statements		1	2,168,	69/
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	151 404			
а	Net unrealized gains on investments	151,484.	4 1		
Ь	Donated services and use of facilities 2b	4,961.	4 1		
C	Recoveries of prior year grants 2c		1		
d	Other (Describe in Part XIV)		- 1	156	445
е	Add lines 2a through 2d		2e	156, 2,012,	445.
3	Subtract line 2e from line 1		3	2,012,	252.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1			
а	Investment expenses not included on Form 990, Part VIII, line 7b		- 1		
ь	Other (Describe in Part XIV)		1		•
С	Add lines 4a and 4b		4c	2 012	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	=	5	2,012,	252.
Par	t XIII Reconciliation of Expenses per Audited Financial Statements V	vith Expenses per	' Ketu	rn	025
1	Total expenses and losses per audited financial statements		1	2,436,	035.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	4 0 6 1			
а	Donated services and use of facilities 2a	4,961.	4 1		
ь	Prior year adjustments 2b		- 1		
C	Losses reported on Form 990, Part IX, line 25		-		
d	Other (Describe in Part XIV)		1	4	061
_	Add lines 2a through 2d		2e	2,431,	901.
3	Subtract line 2e from line 1		3	2,431,	0/4.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b		- 1		
b	Other (Describe in Part XIV)		1 1		^
C	Add lines 4a and 4b		4c	2 421	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		5	<u>2,431</u> ,	0/4.
	t XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1	a and 4; Part IV, lines 1	b and 2	b; Part V, line	4; Part
X; Pa	rt XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.				
	_	_			
	-				
			_		
			Sched	ule D (Form 99	90) 2008

SCHEDULE I					:			OMB No 1545-0047	, ,
(068 1110-1)			Governn	Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	e to Organization Iuals in the U.S.	·ς		2008	-
Department of the Treasury Internal Revenue Service	:	▼ Comp	► Complete if the organizatio	n answered "Yes," on F ► Attach to Form 990.	," on Form 990, P m 990.	ganization answered "Yes," on Form 990, Part IV, lines 21 or 22. P Attach to Form 990.		Open to Public	
Name of the organization	on GIRL SCOUTS	ı	SYBAOUAY COUNCIL.	L. INC.				Employer identification number	=
Part I General In	General Information on Grants and Assistance	d Assistance	1					20-23-00	_1
1 Does the organiz	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	substantiate the	e amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	Istance, and the selectiv	uc uc	1
criteria used to av	criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the Hothad Station	tance?	togo to eau ed togot	etiol Lead or short	,			X Yes No	0
=======================================	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990 Part IV line 21 for any	iovernments and	d Organizations in the	United States. C	complete if the ord	anization answered "Y	es" on Form 990 Part	V lips 21 for 200	1
recipient th	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is peeded	5,000 Check this	s box if no one recipien	it received more th	ian \$5,000 Use Pa	art IV and Schedule I-1	(Form 990) if additiona	Isnace is needed	_
1 (a) Name and ad or gov	(a) Name and address of organization or government	(9)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	-i
						oned			1
									1
									1
									1
									1
ì	Enter total number of section 501(c)(3) and government organizations	d government or	ganizations						}
	Enter total number of other organizations							A	
LHA For Privacy Act	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	tion Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2008	9

Page 2

36-2358083

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation	(f) Description of non-cash assistance
FINANCIAL ASSISTANCE	1572	20,146.	0.	(500h, 1197, appraisa, otret)	
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	de the informatio	n required in Part I,	line 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: A MEMBER	SER REQUESTS		FINANCIAL ASSISTANCE	ANCE BY	
SUBMITTING A FINANCIAL ASSISTANCE REQUEST	REQUEST	FORM. THE	THE FORM ASKS	FOR	
INFORMATION REGARDING WHAT THE ASS	SISTANCE	WILL BE US	ED FOR AND	ASSISTANCE WILL BE USED FOR AND THE AMOUNT	
REQUESTED. MEMBERSHIP MANAGERS REVIEW		AND APPROVE OR DENY THE	DENY THE	REQUEST. IF	
APPROVED, A CHECK REQUISITION IS P	PROCESSED	TO MAKE	PAYMENT.		

Schedule I (Form 990) 2008

SCHEDULE O

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service ► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

Name	ot	the	organ	ization

GIRL SCOUTS - SYBAQUAY COUNCIL, INC.

Employer identification number 36-2358083

FORM 990, PART VI, SECTION A, LINE 10: INDEPENDENT AUDITOR PRESENTS THE
FORM 990, ALONG WITH THE AUDITED FINANCIAL STATEMENTS AND THE AUDITOR'S
REPORT, TO THE FINANCE COMMITTEE FOR DISCUSSION AND REVIEW. AUDITOR AND
FINANCE COMMITTEE CHAIR PRESENT THESE SAME DOCUMENTS TO THE BOARD OF
DIRECTORS FOR DISCUSSION AND REVIEW.

FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST POLICY STATEMENT MUST BE SIGNED ANNUALLY BY ALL STAFF AND BOARD MEMBERS.

FORM 990, PART VI, SECTION B, LINE 15: GIRL SCOUTS OF THE USA PUBLISHES

RECOMMENDED SALARY LEVELS FOR ALL MANAGEMENT POSITIONS. THE BOARD OF

DIRECTORS USES THIS GUIDELINE ADJUSTED FOR LENGTH OF SERVICE AND AREA COST

OF LIVING GUIDELINES.

THE CEO AND THE DIRECTOR OF FINANCE REVIEW THE SALARY GUIDELINES PUBLISHED

BY GIRL SCOUTS OF THE USA FOR EACH MANAGMENT POSITION. SALARIES ARE

ADJUSTED ON AN INDIVIDUAL BASIS BASED ON LENGTH OF SERVICE, BACKGROUND AND

EXPERIENCE, AND AREA COST OF LIVING GUIDELINES.

FORM 990, PART VI, SECTION C, LINE 19: A PUBLIC INSPECTION COPY OF THE FORM 990 IS AVAILABLE AT THE COUNCIL OFFICE AT 12N124 COOMBS ROAD, ELGIN, IL 60124-8000. THE FORM 990 IS ALSO PUBLISHED ON THE GUIDESTAR WEB PAGE.

FORM 990, PART XI, LINE 2C:

THE PROCESS IS THE SAME AS IN PRIOR YEARS.

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Schedule O (Form 990) 2008