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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)

Open to Public

Department of the Treasury Internal Revenue Service Th

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

Inspection

OMB No 1545-0047

	tne 201		r year, or ta	x year b	eginning /	April	<u> </u>	, 2011	, and	Cilding		rch 31	4	, 2012	
B) Check if	if applicable		organization								- '	D Employer is	1011UIICa	idon number	
<u> </u>	idress		Sisterh	rood VA	State	Chap	ter								
cha	ange		isiness As						1_				50725	508	
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	rminated	City or to	own, state or cou	untry, and ZII	P + 4										
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	plication inding	F Name	and address of	principal offi	cer						'	l(a) is this a gr affiliates?	oup return	o for Yes	x
<u></u>		Susan	Catching	s Wils	onsam	e as	C ab	ove			!	H(b) Are all affi			L
	exempt st				(4) ◀	(insert	no)	4947(a)(1)	or	527		If "No," att	ach a list	(see instructions)	
Web	bsite: 🕨	www.pe	eointerna	tional	org					_		1		mber ▶1072	_
<u> </u>	m of organ		Corporation	Trust	x Associati	on	Other	<u> </u>	L	Year of t	formatio	n 1949 N	State c	of legal domicile	<u>I</u>
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g 8			nd grants (Part									271,	478	269	<u>, (</u>
Revenue 6	Progr	am service	revenue (Part	VIII, line 2	g)					}					
			me (Part VIII,										765		
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Sign		Signature o	of officer	· · · · · ·								Date	• 7 11		
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			nt name and title							-					
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				nrenarer s	hown above	? (see ir	struction	ns)						Yes	Π
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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)? If "Yes,"			
	complete Schedule A	1		ж
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		ж
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		ж
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	- ۱		
4		4		
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	-		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? 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		х
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		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or 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, Part VI	11a		ж
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
С	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		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
	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
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI, XII, and XIII	12a		×
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
_	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	×
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	<u> </u>		
-	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		×
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	1.45	-	-^ -
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	<u></u>		<u> </u>
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	- "		х
.,	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		-	X
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		X
13	If "Yes," complete Schedule G, Part III	19		
20 2	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		ж_
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		х
				•

Part	Checklist of Required Schedules (continued)			,
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization	ا ۔ ا		
	in the United States 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 of grants and other assistance to individuals in the United States	20		
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	_х_	-
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24 a	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	0.4-		
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			ļ
	to defease any tax-exempt bonds?	24c		
d		24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	05-		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	256		
	If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	26		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			!
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27		
	entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	21		х
28				
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	28a		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	208		ж
U	Schedule L, Part IV	28b		
•		200		×
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		
20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			x
29 30	Did the organization receive more than \$25,000 in non-cash contributions in yes, complete scriedule will be organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		ж
30	conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N</i> ,	30		_x
31	Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		х
J 2	complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		x
33	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	33		x
34	IV, and V, line 1	34		
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
JJ A	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	JJa		x
	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	220		X
J 0	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
<i>31</i>	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R			
	Part VI	27		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	37		x
J 0		20		
	197 Note. All Form 990 filers are required to complete Schedule O	38	<u> </u>	Щ

Par				
	Check if Schedule O contains a response to any question in this Part V		Yes	<u>. </u>
1 2	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		168	No
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	x	
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 0			İ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
_	account)?	4a		X
D	If "Yes," enter the name of the foreign country ▶			ł
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		
	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		Ê
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-		
	organization solicit any contributions that were not tax deductible?	6a	x	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6 b	ж	
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		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	76		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			l
_	organization, have excess business holdings at any time during the year?	8		ļ
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
10	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		-
	Initiation fees and capital contributions included on Part VIII, line 12			ĺ
	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	,		
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а		13a		
L	Note. See the instructions for additional information the organization must report on Schedule O			l
D	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			l
c	Enter the amount of reserves on hand			l
		14a		×
	If "Yes." has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		^

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b be "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change O See instructions.								
	Check if Schedule O contains a response to any question in this Part VI			x					
Sect	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. If there are	\Box	_						
· · u	material differences in voting rights among members of the governing body, or if the governing body	1							
	delegated broad authority to an executive committee or similar committee, explain in Schedule O	ł							
b	Enter the number of voting members included in line 1a, above, who are independent								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1							
_	any other officer, director, trustee, or key employee?	2		ж					
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		ж					
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		ж					
6	Did the organization have members or stockholders?								
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	6	х						
	one or more members of the governing body?	7 a	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?	7 b	x						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during								
•	the year by the following								
а	The governing body?	8a	x						
b	Each committee with authority to act on behalf of the governing body?	8b	×						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at								
•	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x					
Secti	on 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	x						
	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	x						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a							
	Describe in Schedule O the process, if any, used by the organization to review this Form 990								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	x						
	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 in Schedule O how this was done	12c	x						
13	Did the organization have a written whistleblower policy?	13		x					
14	Did the organization have a written document retention and destruction policy?	14	х						
15	Did the process for determining compensation of the following persons include a review and approval by			<u> </u>					
-	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a		x					
b	Other officers or key employees of the organization	15b		x					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			 -					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			1					
	with a taxable entity during the year?	16a		x					
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	'						
Sect	ion C. Disclosure	,		•					
17	List the states with which a copy of this Form 990 is required to be filed ▶None								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 8	 501(c)/	(3) = 0	 nlv)					
- 🕶	available for public inspection. Indicate how you made these available. Check all that apply	, o , (o)	. J.J. U	•••					
	Own website Another's website x Upon request								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict or	funtor	oct n	oliov					
	and financial statements available to the public during the tax year	ı ıılı	est þ	oncy,					
20	State the name, physical address, and telephone number of the person who possesses the books and records of t	20							
-	organization ► Kathy A. Soppe, 3700 Grand Avenue, Des Moines, IA 50312 (515)255	-3151	3						

Page	

	•									
Part VII	Compensation of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Contr	actors			-		_			

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization
	organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			and related organizations
(1) Susan Catchings Wilson							,			
President	25	x		x				o	o	0
(2) LuCinda W. Hanayik										
Vice President	25	х		x				0	i ol	0
(3) Marjorie S. Jones										
Organizer	30	ж		x				0	o	. 0
(4) Priscilla G. Koelling										
Treasurer	25	х		x				0	0	0
(5) Susan Brilliant										
Secretary	25	х		x				0	0	0
(6)										
(7)										
(8)										
(9)										
_(10)								,		
										<u></u> .
						_				

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y Em	plo	ye	es,	and I	ligi	hest Compensat	ed Emplo	yees (c	ontinue		age o
(A) Name and title	(B) Average hours per week (describe	box,	unles r and	Pos neck is pe i a d	erson	e than o	an ee)	(D) Reportable compensation	(E) Reporta compensati relate	able ion from	am	(F) timated lount of other	
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organiza (W-2/1099	itions	com _l fro orga and	pensation the anization of related	n d
(15)													
(16)													
(17)		-			-							<u> </u>	
<u>(18)</u>									<u></u>				
(19)													
(20)												•	,
(21)												_	
(22)										-			
(23)													
(24)													
(25)	- .												
1b Sub-total							> > >						
Total number of individuals (including but not reportable compensation from the organization)	limited to t		ıste				o re	eceived more than	\$100,000	of			
								<u>.</u>				Yes	No
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schede	er, directo ule J for sui	or, or ch ind	tru Ividi	ıste <i>ıal</i>	e, 	key e 	emp	oloyee, or highes	t compens	sated 	3		х
4 For any individual listed on line 1a, is the sorganization and related organizations greated individual	eater than	\$15	0,0	007	i It	"Yes	, "	complete Schedu	le J for	such	4		x
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue co	mpen	satio	on 1	fron	n any	un	related organization	on or indiv	ıdual	5		x
Complete this table for your five highest com- compensation from the organization Report c- year													
(A) Name and business add	ress							(B) Description of se	ervices	С	(C) ompens	ation	
		-											
							F						
2 Total number of independent acceptant of	aludina L	,	1			4 L =	<u> </u>						
2 Total number of independent contractors (in more than \$100,000 in compensation from the				ıı(e	u to	TOS	e () 0	isted above) who	received				

Par	t VIII	Statement of Revenue				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d	Federated campaigns				
ntribul d Othe	f	All other contributions, gifts, grants, and similar amounts not included above . 1f 160,502	<u> </u> -			
နှင့်	g	Noncash contributions included in lines 1a-1f \$	269,684			
- ga		Business Code	2037004			
ven	2a					
Program Service Revenue	b					
Se	d					-
ran	е					-
rog	f	All other program service revenue			<u> </u>	1
	3	Total. Add lines 2a-2f	658	658		
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties · · · · · · · · · · · · · · · · · · ·	•			
		\(\frac{1}{1}\)	-			
	6a	Gross rents	-			
	ь	Less rental expenses	-			İ
	C	Rental income or (loss)	-			
	d	Net rental income or (loss)				
	7a	Gross amount from sales of assets other than inventory	1			
	b	Less cost or other basis				
		and sales expenses	-{			
	d	Gain or (loss)	-	· · · · · · · · · · · · · · · · · · ·		
Other Revenue	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c)				
æ		See Part IV, line 18				
ē	ь	Less direct expenses b	1			
돌	C	Net income or (loss) from fundraising events	,			
J	9a	Gross income from gaming activities See Part IV, line 19				
	b	Less direct expenses				
	10a	Gross sales of inventory, less returns and allowances				
	b c	Less cost of goods sold	2,620	2,620		
	ļ	Miscellaneous Revenue Business Code	_			
	11a					<u> </u>
	b		1	···		
	С				 	
	d	All other revenue				ļ
	9	Total. Add lines 11a-11d				
	12	Total revenue. See instructions	272,962	3,278		1

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Check if Schedule O contains a response to any question in this Part IX											
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VII.	(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 United States See Part IV, line 21.	130,114	130,114								
2	Grants and other assistance to individuals in	-		"							
	the United States See Part IV, line 22	48,000	48,000								
3	Grants and other assistance to governments,										
	organizations, and individuals outside the										
	United States See Part IV, lines 15 and 16										
4	Benefits paid to or for members										
5	Compensation of current officers, directors,										
	trustees, and key employees										
6	Compensation not included above, to disqualified										
	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)										
7	Other salanes and wages				. <u> </u>						
8	Pension plan accruals and contributions (include section										
	401(k) and 403(b) employer contributions)				 						
9	Other employee benefits										
10	Payroll taxes										
11	Fees for services (non-employees)										
а	Management										
b	Legal										
C	Accounting										
d	Lobbying										
	Professional fundraising services See Part IV, line 17										
f	Investment management fees										
g	Other										
12	Advertising and promotion										
13	Office expenses				-						
14	Information technology	20			20						
15	Royalties										
16	Occupancy				.						
17	Travel			- · · · · · · · · · · · · · · · · · · ·							
18	Payments of travel or entertainment expenses			! :							
	for any federal, state, or local public officials			_							
	Conferences, conventions, and meetings	28,392	9,464	18,928							
	Interest										
	•	61,820	61,820								
	Depreciation, depletion, and amortization			- -							
	Insurance										
24	Other expenses Itemize expenses not covered										
	above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column										
	(A) amount, list line 24e expenses on Schedule O)										
	Operating Expense	0.010	2 101	6 200	246						
	Board/Committee Expense	9,919	3,191	6,382	346						
D		11,728	3,909	7,819							
Ç											
d	All other expenses										
	All other expenses Total functional expenses. Add lines 1 through 24e	289,993	256,498	22 100	300						
	Joint costs. Complete this line only if the	209,993	250,498	33,129	366						
	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)										

Part X		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing		1	8,118
2	Savings and temporary cash investments	205 210		193,28
3	Pledges and grants receivable, net		3	133,20
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			
"	employees, and highest compensated employees Complete Part II of			
	Schedule I		5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions)		6	•
ණු ₇	Notes and loans receivable, net		7	
Assets 8 2	Inventories for sale or use		8	
۵ 9	Inventories for sale or use Prepaid expenses and deferred charges		9	
	· · · · · · · · · · · · · · · · · · ·		-	
Tua	Land, buildings, and equipment cost or		Ì	
	other basis Complete Part VI of Schedule D 10a		10c	
- 1	Less accumulated depreciation		11	
11	Investments - publicly traded securities		12	
13	Investments - other securities See Part IV, line 11		13	
14	Investments - program-related See Part V, line 11		14	
15	Intangible assets		15	
16	Other assets See Part V, line 11			201 40
			17	201,40
17 18	Accounts payable and accrued expenses		18	
19	Grants payable		19	
1	Deferred revenue		20	
20	Tax-exempt bond liabilities		21	
S 21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities 22	Payables to current and former officers, directors, trustees, key			
<u> </u>	employees, highest compensated employees, and disqualified persons		22	
	Complete Part II of Schedule L		23	
23	Secured mortgages and notes payable to unrelated third parties		24	
25	Unsecured notes and loans payable to unrelated third parties.		24	
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X			
	• • •		25	
26	of Schedule D		26	
26	Organizations that follow SEAS 447 shock have by		20	
စ္က	Organizations that follow SFAS 117, check here ▶ and complete lines 27 through 29, and lines 33 and 34.			
27 28 29 29	Unrestricted net assets		27	
<u>e</u> 28	Temporarily restricted net assets		28	
29	Permanently restricted net assets.		29	
<u> </u>	Organizations that do not follow SFAS 117, check here ▶ 🕱 and			
2	complete lines 30 through 34.			
	Capital stock or trust principal, or current funds	'	30	
Assets	Paid-in or capital surplus, or land, building, or equipment fund	<u> </u>	31	
8 32	Retained earnings, endowment, accumulated income, or other funds	218,436		201 401
33			-	201,40
34	Total net assets or fund balances Total liabilities and net assets/fund balances	218,436		201,40
	Total habilities and not assets/fully balances	218,436	J4	201,405 Form 990 (201

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2011)

3Ь

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

▶ Attach to Form 990 or Form 990-EZ.

Open to Public

Inspection

II-A

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► See separate instructions.

f	the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
	Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
	 Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
	Section 527 organizations Complete Part I-A only
lf	the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
	• Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
	• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then Section 501(c)(4), (5), or (6) organizations Complete Part III Name of organization Employer identification number P.E.O. Sisterhood VA State Chapter 54-6072508 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Complete if the organization is exempt under section 501(c)(3). Part I-B Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No No b If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function 2 Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (a) Name (b) Address (d) Amount paid from (c) EIN (e) Amount of political filing organization's contributions received and funds If none, enter -0promptly and directly delivered to a separate political organization If none, enter -0-(1) (2)

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

Schedule C (Form 990 or 990-EZ) 2011

(3)

(4)

(5)

(6)

•	
Schedule C (For	m 990 or 990-EZ) 201
Part II-A	Complete if th section 501(h)
A Check ▶	if the filing

Sch	edule C (Form 990 or 990-EZ) 2011					Page 2
Pa	art II-A Complete if the org section 501(h)).		<u></u>			
A	Check ▶ if the filing orga	inization belongs to	an affiliated group	(and list in Par	t IV each affiliated g	roup member's
		EIN, expenses, and				
В		nization checked b		control" provisio	ns apply.	
		on Lobbying Expend			(a) Filing	(b) Affiliated
	 	tures" means amour			organization's totals	group totals
1 a		•	. •	_		
b		•	• •			
C		•				
d	a mile a manife has been a mile a manife					
e Total exempt purpose expenditures (add lines 1c and 1d)						
f	Lobbying nontaxable amount E	Enter the amount from	n the following table	in both		
	columns	· I=				
	If the amount on line 1e, column (a		•	s:		
	Not over \$500,000		amount on line 1e	2500.000		
	Over \$500,000 but not over \$1,000		us 15% of the excess			
	Over \$1,000,000 but not over \$1,5		us 10% of the excess			
	Over \$1,500,000 but not over \$17,		us 5% of the excess o	ver \$1,500,000		
	Over \$17,000,000	\$1,000,000				
g				_	. ,	
h	•					
	Subtract line 1f from line 1c If				4700	
j	If there is an amount other than		· ·	_		Yes No
	reporting section 4911 tax for the	nis year /		· · · · · · · · · · · · · · · · · · ·		Yes No
		4-Year Aver	aging Period Under	Section 501(h)		
					complete all of the fir	ve
	colu	ımns below. See the	instructions for lin	es 2a through 2f	on page 4.)	
		Lobbying Exper	nditures During 4-Y	ear Averaging Per	iod	
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total

Lobbying Expenditures During 4-Year Averaging Period						
(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total		
	,					
				Lobbying Expenditures During 4-Year Averaging Period (a) 2008 (b) 2009 (c) 2010 (d) 2011		

Schedule C (Form 990 or 990-EZ) 2011

Sche	dule C (Form 990 or 990-EZ) 2011						Page 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).			m 576			
	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	Yes (a) No		(b)		
OT II	ne lobbying activity	105	NO		A11101		
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers?						
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
C	Media advertisements?						
d	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?						
e f	Grants to other organizations for lobbying purposes?						
	Direct contact with legislators, their staffs, government officials, or a legislative body?						
g h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
'' i	045						
j	Total Add lines 1c through 1i	<u> </u>			-		
ј 2 а	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b	-						
C	If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	. or s	ectio	n		
	501(c)(6).	(-/(-/	,		•		
1 2 3 Pa	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? It III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members	(c)(5) OR (b	, or s	ectio	<u> 3</u> n	yes x x	x
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amo		of	•			
_	political expenses for which the section 527(f) tax was paid).						
а	Current year			2a			
b	Carryover from last year			2b			
c	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	es .	• • •	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portio						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible						
		-	-	4			
5	Taxable amount of lobbying and political expenditures (see instructions)			5			
Pa	rt IV Supplemental Information						
Cor	nplete this part to provide the descriptions required for Part FA, line 1, Part FB, line 4, Part FC, line also, complete this part for any additional information	e 5, Pa	nt II-A	, and f	Part II-I	3, line	

Schedule C (F	orm 990 or 990-EZ) 2011	Page 4
Part IV	Supplemental Information (continued)	
I altiv	Supplemental information (continued)	
		
· 		
		-
		-
 -		
		-
		

SCHEDULE

å SenSupp/Schol Scholarships Scholarships Grants Educ. Awards Schol/Grants (h) Purpose of grant or assistance Educ. Loans Open to Public OMB No 1545-0047 Inspection to Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000. x Yes Employer identification number Educ. Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" 54-6072508 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, 0 0 0 0 0 0 0 (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ► Attach to Form 990. 46,539 11,755 13,678 13,682 8,178 (d) Amount of cash grant 21,281 15,001 501 (c) (3) 501 (c) (3) 501 (c) (3) 501 (c) (3) 501 (c) (3) 501 (c) (3) 501 (c) (3) (c) IRC section if applicable Part II can be duplicated if additional space is needed the selection criteria used to award the grants or assistance? General Information on Grants and Assistance 440545271 426078059 426078058 421379026 237405311 426094564 300583651 (p) EIN P.E.O. Sisterhood VA State Chapter (3) P.E.O. Int'l Peace Scholarshp Cottey_College, 1000 W Austin (2) P.E.O. Educational Loan Fund (4) P.E.O. Program for Contin Ed (6) P.E.O. STAR Scholarship. (a) Name and address of organization or government (5) P.E.O. Scholar Awards (7) P.E.O. Foundation Des Monnes, IA 50312 Des Moines, IA 50312 50312 50312 50312 64772 IA Des Moines, IA Des Moines, IA Department of the Treasury Des Moines, IA Name of the organization Internal Revenue Service Des Moines, (Form 990) Nevada, MO Part II (10) (11) (12) <u>(6</u>

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2011)

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

(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of non-cash assistance
	recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
1 Scholarships to individuals	30	48,000	0	0 N/A	N/A

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information Part I, Line 2--Contributions were forwarded to philanthropies of the International Chapter of the P.E.O. Part IV

Sisterhood and to P.E.O. Foundation in Des Moines, IA to be used to further the educational mission of the P.E.O.

Sisterhood. Reports of these organizations are available to all members of P.E.O.

Part II, Line 1(a) --With the exception of Cottey College, all other organizations share a mailing address of

3700 Grand Avenue in Des Moines, IA.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

P.E.O. Sisterhood VA State Chapter	54-6072508
Part_VI, Lines 6-7b: The organization's members consist of the	he active, dues-paying members
of P.E.O. chapters within the state. Delegates from each cha	apter attend annual state
conventions where new officers are elected by the voting members.	bers present. In addition,
certain proposed amendments to the bylaws are presented and	voted upon.
Part VI, Line 11b: Copies of the final Form 990 were provided	d to each member of the
executive board of Virginia State Chapter prior to filing.	Board members are asked to
review the return and respond with any questions, though no	formal review process
is currently in place.	
Part VI, Line 12c: Conflict of Interest policies and signatury	
financial transactions. Signature pages are collected by th	
monitored for completion. Any conflicts of interest that ar	
immediately to the affected committee/board and the remaining	g members vote on the
appropriate_action.	
Part VI, Line 19: Governing documents, conflict of interest	policy and financial
statements are available to members upon request. These ite	
to the general public.	
32.342. 2 343.42. 6 .52.23	

	(Form 990 or 990-E2) (2011)		rage /
Name of the		Employer identification number	
P.E.O.	Sisterhood VA State Chapter	54-6072508	
		~ 	
		-	
			-

Form 990 (2011)				Page
Part III State	ement of Program Service ck if Schedule O contains a	Accomplishments response to any question in this Part III		
1 Briefly descri	be the organization's mission	on		111
P.E.O. is	a philanthropic o	organization where women co	elebrate the advancement	of women;
		arships, grants, awards,		Cottey
College;	and motivate each	other to achieve their high	hest aspirations.	-
prior Form 99	90 or 990-EZ?	nificant program services during the ye		Yes 🗷 N
		Schedule O g, or make significant changes in h 	· · · · · · · · · · · · · · · · · · ·	Yes x N
4 Describe the expenses Se	ribe these changes on Sche organization's program s ection 501(c)(3) and 501(ts three largest program services, (a)(1) trusts are required to repo	
4a (Code) (Expenses \$ 2	56,498 including grants of \$ 1	79 114 \/Revenue \$	
		plished by collecting and		/
		ships on both the state an		
	s are available.			
	1-1-0			
				· · · · · · · · · · · · · · · · · · ·
-				
4b (Code) (Expenses \$	including grants of \$) (Revenue \$	
(occo) (Expenses #	micidaling grants or \$) (Revenue \$	
				
				 -
· -				
		, , , , , , , , , , , , , , , , , , , ,		
		. 15 15 15 15 15 15 15 15 15 15 15 15 15		
-				
4c (Code) (Expenses \$	including grants of \$) (Revenue \$)
				_
	<u></u>			
	- N	 		
_	m services (Describe in Sch			
(Expenses \$	ıncluding g)	
4e Total progra	m service expenses >	256,498		
20 1 000				Form 990 (20