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# Form 990

# **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Th

AND TO BE AUG 13

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

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

Open to Public Inspection

<u> </u>	or tr	e 201	2 calendar year, or tax year beginning April 1, , 2012, a	na enain	<u>9 M</u>	arch 31		, 20			
R.	heck if a		C Name of organization			D Employer ide	entificati	ion numb	er		
.c 	_		P.E.O. Sisterhood VA State Chapter								
	Addr		Doing Business As			54-6	07250	80			
	Name	change	Number and street (or P O box if mail is not delivered to street address)	om/suite		E Telephone number					
	Initia	return	3700 Grand Ave			515-	255-3	3153			
	Term	inated	City, town or post office, state, and ZIP code							-	
-	Amer	ided	Des Moines, IA 50312-2899			G Gross receip	ts \$		276	,460	
	retur Appli	cation	F Name and address of principal officer			H(a) is this a grou			Yes	x No	
	pend	ing				affiliates?		<b>—</b>	Yes	A No	
_	~		LuCinda W. Hanayik - same as C above	-1 -1		H(b) Are all affilia					
		empt st		52			-				
			www.peointernational.org	<del>1.</del>		H(c) Group exem					
_	_	of organ	nization Corporation Trust X Association Other	L Year of	format	ion 1949 M	State of	legal don	ricile	<u>IA</u>	
Pa	rt I		mmary								
	1	Briefly	y describe the organization's mission or most significant activities. \[ \widetilde{Women's} = \]	membe	rshi	p_organız	atio	n			
60		supp	porting six philanthropic projects for women. I	These a	are	scholarsh	ıр, (	grant	, 1	oan	
Š			award programs and a women's college owned by								
Ę											
Activities & Governance	2	Check	this box F if the organization discontinued its operations or disposed of	of more tha	n 25%	of its net asset	 s				
9	3		er of voting members of the governing body (Part VI, line 1a)				3			5	
ş	A		er of independent voting members of the governing body (Part VI, line 1b)				4	<del></del>		<u>_</u> 5	
į	7						5				
妄	5		number of individuals employed in calendar year 2012 (Part V, line 2a)				<del></del>				
ુર્∢	6		number of volunteers (estimate if necessary)				6			75	
5			unrelated business revenue from Part VIII, column (C), line 12				7a				
8 	b	Net ur	nrelated business taxable income from Form 990-T, line 34		<u></u>		7b				
3						Prior Year		Curre	nt Y	ear	
<u>•</u>	8	Contri	ibutions and grants (Part VIII, line 1h)			269,6	84		272	,883	
a n	9	Progra	am service revenue (Part VIII, line 2g)								
Revenue	10		ment income (Part VIII, column (A), lines 3, 4, and 7d)			6	58			325	
<b>E</b>	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			2,6	20		2	,406	
]	12		revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)			272,9				,614	
<del></del>	13		s and similar amounts paid (Part IX, column (A), lines 1-3)			178,1				,819	
3	14		its paid to or for members (Part IX, column (A), line 4)			170,1		•	109	,019	
)											
Expenses	15		es, other compensation, employee benefits (Part IX, column (A), lines 5-10).								
ë			ssional fundraising fees (Part IX, column (A), line 11e)		ļ <u>.</u>						
EXE	b	Total	fundraising expenses (Part IX, column (D), line 25) ▶ 975		ļ <u>.</u>						
_	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	,		111,8	79		102	<u>,762</u>	
	18	Total of	expenses (Part IX, column (A), lines 11a-11d, 11f-24e) expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	VF.D.		289,9	93		272	<u>,581</u>	
	19	Rever	iue less expenses. Subtract line 18 from line 12	C 62.15		-17,0	31		3	,033	
Net Assets or Fund Balances			assets (Part X, line 16)	0.040	Begin	ning of Current \	ear	End o	of Yea	ır	
sets	20	Total a	assets (Part X, line 16)	71113	Ÿ.	201,4	05		204	,438	
A83	21		liabilities (Part X, line 26)		82						
Net S	22		ssets or fund balances Subtract line 21 from line 20.	حرور ا		201,4	05		204	,438	
	rt II		gnature Block	·	222	201,4	<u> </u>			, 450	
			of perjury, I declare that I have examined this return, including accompanying schedules	and staten	nents a	and to the hest of	my kno	wledge a	nd be	elief it is	
true	, corre	ct, and	complete Declaration of preparer (other than officer) is based on all information of which i	preparer ha	s any kr	rowledge					
		` (	Wather a. Smare.			011	2.120	113			
Sig	n		Signature of officer			Date	70.	17		<del></del>	
Hei						Date					
	-		Kathy A. Soppe, Director of Finance/Treasurer								
			Type or print name and title			<del></del>	<del></del> ,				
Paid	1	Print/	Type preparer's name Preparer's signature	Date		Check	ıf PTI	N			
	oarer					self-employ	ed				
•	Only	Fırm's	name ►			Firm's EIN	•				
JSU	Jilly	Firm's	address ►			Phone no	-				
May	the I		cuss this return with the preparer shown above? (see instructions)					Yes		No	
			· • • • • • • • • • • • • • • • • • • •	<del></del>	<u>· · · · · · · · · · · · · · · · · · · </u>	<u></u>		1 6			

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

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		x
2	Is the organization required to complete Schedule B, Schedule of Contributors(see instructions)?	2		х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
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	ŀ		ĺ
	"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		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or	}		
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		×
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			İ
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		x
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
C	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			İ
	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 and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			ļ
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		_x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
4-	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			Į
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			ı I
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		x
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		-	_x
<u>D</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
· <u> </u>			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	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			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	x	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	ŀ		
	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			
	through 24d and complete Schedule K If "No," go to line 25	24a		ж
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	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
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			<u> </u>
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		x
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			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	<del></del> -		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	200		
	Schedule L, Part IV	28b	1	×
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	205		
_	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		•
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	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		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N.	30		х
•	Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	-		ж
	complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		х
	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, Part II, III,	33	_	ж
•	or IV, and Part V, line 1	34		
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	33a		х
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	330	<del>-  </del>	
	related organization? If "Yes," complete Schedule R, Part V, line 2	,,		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
•	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R.			
	Part VI	,_		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37	<del>  </del>	Х
	19? Note. All Form 990 filers are required to complete Schedule O	2.		
			990 e	(2012)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	<u></u> .		$\cdot \Box$
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		-	
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0	ĺ		
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?	3a		x
	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 authority		1	
	over, a 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 ▶	İ		
_	See instructions for 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 transaction?	5b		х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	.		
L	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	_ <b>x</b>	
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or	C.L.	[	
7	gifts were not tax deductible?	6b	×	
	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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	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			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	]	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		ļ	
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	į		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
D  1	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		l	
	Gross income from members or shareholders			
-	Gross income from other sources (Do not net amounts due or paid to other sources			
U	against amounts due or received from them)			
2 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Pari	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See in			"No"
	Check if Schedule O contains a response to any question in this Part VI			x
Sect	tion A. Governing Body and Management	·		11
	and the management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
14	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	]		
-	any other officer, director, trustee, or key employee?	2		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		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		ж
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x
6	Did the organization have members or stockholders?	6	ж	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	ж	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
-	stockholders, or persons other than the governing body?	7b	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
•	the year by the following			
а	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Secti	ion 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	ж	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	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	х	
b	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	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13		х
14	Did the organization have a written document retention and destruction policy?	14	х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		<u>x</u> _
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	, is a final and a second and a			
	with a taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
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 5	01(c)	(3)s o	nly)
	available for public inspection Indicate how you made these available Check all that apply			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o	fintei	est p	olicy,
	and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne		
	organization ► Kathy_A. Soppe, 3700 Grand Ave, Des Moines, IA 50312 (515)255-3153	<u> </u>		

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Form	990	(201	2
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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 Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor	any related	orga	nıza	tion	COI	mpen	ensated any current officer, director, or trustee						
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er and	Pos neck ss pe	rson	highest compensated employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations			
(1) LuCinda W. Hanayik President	35	×		x	: !			0	o	0			
(2) Marjorie S. Jones													
Vice President	30	x		x	-	ļ	_	0	0	0			
(3) Priscilla G. Koelling	<u>-</u>												
Organizer	35	х		x	_		<del> </del>	0	0	0			
(4) Susan Brilliant	32												
Treasurer (5) Beverly C. Prewitt	32	х	-	х			-	0	0	0			
Secretary	30	×						0	o	0			
(6)		^		x		_			0				
<u>(7)</u>													
(8)									-				
(9)													
(10)													
(11)													
(12)		-											
(13)										<del></del>			
(14)													

Pa	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) Name and title	(B) Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)		an compensation compensation		(E) Reportable compensation fr related organizations		table Es tion from am ed		f			
		organizations below dotted line)	Individual trustee or director	Institutional trustee	icer	Key employee	Highest compensated employee	mer	organization (W-2/1099-MISC)	(W-2/1099		fro orga and	om the anizatio I related nization	n i
(15)							-							
(16)														
(17)		_			ı									
(18)														
(19)														
(20)														
(21)											•			
(22)								-						
(23)						-								
(24)														
(25)											, ···			
C	Sub-total Total from continuation sheets to Part VII, S Total (add lines 1b and 1c)	ection A .						<b>&gt; &gt; &gt;</b>						
	Total number of individuals (including but not reportable compensation from the organization	limited to t		liste				o re	eceived more than	\$100,000	of			
3	Did the organization list any former office employee on line 1a? If "Yes," complete Schede	er, directo	or, or	tru	ıste	e,	key e	emp	ployee, or highes	t compens	sated	3	Yes	No x
4	For any individual listed on line 1a, is the sorganization and related organizations grandividual	sum of rep eater than	ortab \$15	le c 50,0	om 007	per	isatioi "Yes	n aı s,"	nd other compens	sation from <i>le J for</i>	the such	4		x
5	Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue co	mpen	sati	on i	fron	n any	un	related organization	on or indiv	idual	5		x
	tion B. Independent Contractors													
1	Complete this table for your five highest com compensation from the organization Report of year	pensated in compensation	ndepe on for	the	ent ca	iend	tracto dar ye	ear e	that received more ending with or with	than \$100 nin the orga	0,000 c anizatio	of n's tax		
	(A) Name and business add	Iress							(B) Description of se	rvices	c	(C) Compens	ation	
	None							$\perp$						
								+						
2	Total number of independent contractors received more than \$100,000 of compensation						ted	to 0		ve) who	:			

			(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					
P Gra	b	Membership dues	<u>5</u> ]			
T E	С	Fundraising events 1c	_			
<u> </u>	d	9-11-11-11-11-11-11-11-11-11-11-11-11-11	-			
Sis	е	Government grants (contributions) 1e				
bet	f	All other contributions, gifts, grants,	.			
ĘĎ		and similar amounts not included above . 1f 164,637	4			
2 E	9	Noncash contributions included in lines 1a-1f \$	272 002			
9	- 11	Business Code			<u></u>	
Program Service Revenue	2a		4			
8	Za b					1
ဦ					<del></del>	
Sen	4					
Ē						
gra	f	All other program service revenue				
7	g	Total. Add lines 2a-2f	<b>&gt;</b>			
	3	Investment income (including dividends, interest, and				
		other similar amounts)	325	325	<del>-</del>	
	4	Income from investment of tax-exempt bond proceeds	•			
	5	Royalties	<b>&gt;</b>			
		(i) Real (ii) Personal				
	6a	Gross rents	_			
	b	Less rental expenses	_			1
	С	Rental income or (loss)	_			
	d	Net rental income or (loss)			-	
	7a	Gross amount from sales of (i) Secunties (ii) Other	4			
		assets other than inventory	-			
	b	Less cost or other basis				
		and sales expenses	-			
	c d	Gain or (loss)	-			
0					·	
Ž	8a	Gross income from fundraising				
Š		events (not including \$ of contributions reported on line 1c)	1			
&		See Part IV, line 18				
ē	b	Less direct expenses b	1			
Other Revenue		Net income or (loss) from fundraising events	<b>,</b>			1
		Gross income from gaming activities See Part IV, line 19				
	b	Less direct expenses	1			
İ	c	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less			<del></del>	
		returns and allowances a 3,252				
	ь	Less cost of goods sold b 846	¬1 I			
	С	Net income or (loss) from sales of inventory	2,406	2,406		
		Miscellaneous Revenue Business Code				
	11a					
	b					
- 1	c					
	d	All other revenue				
	. 0	Total. Add lines 11a-11d				
	12	Total revenue. See instructions	275,614	2,731		

275,614

2,731

# Part IX Statement of Functional Expenses

	ction 501(c)(3) and 501(c)(4) organizations mu		s All other organization	ns must complete colum	n (A)					
	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)  Check if Schedule O contains a response to any question in this Part X									
	not include amounts reported on lines 6b, 7b, 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.	134,219	134,219							
2	Grants and other assistance to individuals in the United States See Part IV, line 22	35,600	35,600							
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 salaries and wages									
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)	:								
	Management									
	Legal									
	Accounting									
	Lobbying									
	Professional fundraising services See Part IV, line 17									
	Investment management fees									
	Other (if line 11g amount exceeds 10% of line 25, column									
Ĭ	(A) amount list line 11g expenses on Schedule O)									
2	Advertising and promotion									
3	Office expenses	7 1111 711								
4	Information technology	188			188					
5	Royalties									
6	Occupancy									
7	Travel	26,339	8,780	17,559						
8	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
9	Conferences, conventions, and meetings	6,783	1,999	3,997	787					
20	Interest			, , , , ,						
1	Payments to affiliates	61,160	61,160							
2	Depreciation, depletion, and amortization									
23	Insurance	******								
4	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)									
а	Operating Expense	8,292	2,764	5,528						
b										
C					-					
d										
е	All other expenses									
	Total functional expenses. Add lines 1 through 24e	272,581	244,522	27,084	975					
:6	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here   [Insuring SOP 98-2 (ASC 958-720)]	,			373					

Form 990 (2012)
Part X **Balance Sheet** 

(A) Beginning of year		( <b>B)</b> End of year
1 Cash - non-interest-bearing 8,119	3 1	7,940
2 Savings and temporary cash investments 193,28	7 2	196,498
3 Pledges and grants receivable, net	3	
4 Accounts receivable, net	4	
5 Loans and other receivables from current and former officers, directors,		
trustees, key employees, and highest compensated employees		
Complete Part II of Schedule L  Loans and other receivables from other disqualified persons (as defined under section	5	
Loans and other 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) Complete Part II of Schedule L	6	
7 Notes and loans receivable, net	7	
7 Notes and loans recevable, net 8 Inventories for sale or use	8	
9 Prepaid expenses and deferred charges	9	
10 a Land, buildings, and equipment cost or	<del>   </del>	<del></del>
other basis Complete Part VI of Schedule D 10a		
b Less accumulated depreciation	10c	
11 Investments - publicly traded securities	11	
12 Investments - other securities See Part V, line 11	12	
13 Investments - program-related See Part V, line 11	13	
14 Intangible assets	14	
15 Other assets See Part IV, line 11	15	
16 Total assets. Add lines 1 through 15 (must equal line 34) 201, 409	16	204,438
17 Accounts payable and accrued expenses	17	
18 Grants payable	18	
19 Deferred revenue	19	
20 Tax-exempt bond liabilities	20	
	21	
22 Loans and other payables to current and former officers, directors,	1 1	
21 Escrow or custodial account liability Complete Part IV of Schedule D  22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and diagnostical paragraphs of the par		
disqualified persons. Complete Part II of Schedule L	22	
23 Secured mortgages and notes payable to unrelated third parties	23	
24 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		
of Schedule D	25	
26 Total liabilities. Add lines 17 through 25	26	
Organizations that follow SFAS 117 (ASC 958), check here ► and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets	27	
28 Temporarily restricted net assets	28	
29 Permanently restricted net assets	29	
complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here Complete lines 30 through 34.  Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances		
30 Capital stock or trust principal, or current funds	30	
31 Paid-in or capital surplus, or land, building, or equipment fund	31	
32 Retained earnings, endowment, accumulated income, or other funds 201,409	32	204,438
	33	204,438
34 Total liabilities and net assets/fund balances	34	204,438

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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

 3a

3b

#### 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.

20**12**Open to Public

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► See separate instructions.

If 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

If 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 II-A

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) org	ganizations Complete Part III	,		
Nam	ne of organization			Employer identif	ication number
Ρ.	E.O. Sisterhood VA	State Chapter		54-60725	08
Pa	rt I-A Complete if the c	organization is exempt under s	section 501(c) or is	s a section 527 organ	ization.
1		organization's direct and indirect p			
2	Political expenditures			<b>▶</b> \$	
3	Volunteer hours				
Pa		organization is exempt under s			
1		cise tax incurred by the organization			
2		cise tax incurred by organization m			
3		a section 4955 tax, did it file Form			
	If "Yes," describe in Part IV				
Pa	****	organization is exempt under s			
1	Enter the amount directly e	expended by the filing organization	for section 527 ex	empt function	
2		ng organization's funds contributed	•		
		es			
3		enditures Add lines 1 and 2 En			
4		e Form 1120-POL for this year?			
5		s and employer identification numb			
		ts For each organization listed, en tributions received that were prom			
		ind or a political action committee			
		<u></u>		i	<u> </u>
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
		1		funds If none, enter -0-	promptly and directly
					delivered to a separate political organization If
					none, enter -0-
(1)					
			<del> </del>		- "
(2)					
(3)					
(4)		L			
(5)		}			
					<del></del>
(6)					

_	edule C (Form 990 or 990-EZ) 2012			Page
Pa	complete if the organizati section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (elec	ction under
A		belongs to an affiliated group (and list in Pa		oup member's
_		enses, and share of excess lobbying expend	•	
<u>R</u>		checked box A and "limited control" provis		<del></del>
		bying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 2	<del></del>	e public opinion (grass roots lobbying)		group totals
		e a legislative body (direct lobbying)		<del></del>
	T-4-14-EE			
	Other exempt purpose expenditures.		··	
		dd lines 1c and 1d)		
í		the amount from the following table in both		
	columns	gg		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
9	Grassroots nontaxable amount (enter	25% of line 1f)		
ı	Subtract line 1g from line 1a If zero of	· less, enter -0-	· · · · · · · · · · · · · · · · · · ·	
i	Subtract line 1f from line 1c If zero or	less, enter -0-		

#### 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

	Lobbying Exper	nditures During 4-Yo	ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					·
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2012

Yes

No

Pai	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	file	d For	m 576	8		
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(8	3)		(b	)	
	cription of the lobbying activity	Yes	No		Amo	unt	
1	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?						
a 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?						
е	Publications, or published or broadcast statements?						
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				<del></del>		
Ì ;	Other activities? Total Add lines 1s through 1						
j 2 a	Total Add lines 1c through 1i  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?						
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	c)(5)	, or s	ectio	n		
	501(c)(6).					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1	ж	1.0
2	- 1	onė	• • • •	• • • •	2	ж	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?  till-B Complete if the organization is exempt under section 501(c)(4), section 501(						х
1	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			rt III-A	, line	3, is	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou political expenses for which the section 527(f) tax was paid).	nts	of				
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) due	s.		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo	•	•	,			
5	and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)			5			
_	t IV Supplemental Information	•••					
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information		<b>-</b>			· 	
	<del></del>				~		
<del>-</del>						<del>-</del> -	

Schedule C (F	orm 990 or 990-EZ) 2012	⊃age_4
Part IV	Supplemental Information (continued)	

SCHEDULEI (Form 990) Department of the Treasury

Name of the organization Internal Revenue Service

Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States

► Attach to Form 990.

20) 12	2	ON C		No 15	
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Open to Public

Employer identification number

54-6072508

	ecietance
Chapter	A buc and A
VA State	ation on Gr
Sisterhood	General Information on Grants and Assistance
P.E.O.	) July

ž x Yes 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 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 United States

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Cottey College, 1000 W Austin Nevada, MO 64772	440545271	501 (c) (3)	43,675	0			GenSupp/Schol
(2) P.E.O. Educational Loan Fund Des Moines, IA 50312	426078059	501 (c) (3)	14,299	0			Educ. Loans
ce Scholarshp	426078058	501 (c) (3)	10,735	0			Scholarships
ram_for_Contin_Ed 50312	237405311	501 (c) (3)	25,926	0			Educ. Grants
wards	421379026	501 (c) (3)	15,764	0			Educ. Awards
larship	300583651	501 (c) (3)	15,072	0			Scholarships
2	426094564	501 (c) (3)	8,748	0			Schol/Grants
(8)							
(6)							
(10)							
(11)							
(12)							
<ul> <li>Enter total number of section 501(c)(3) and government or</li> <li>Enter total number of other organizations listed in the line</li> </ul>	overnment o		ganizations listed in the line 1 table table				70

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule I (Form 990) (2012)

12)	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
Schedule 1 (Form 990) (2012)	<b>Grants and Other Ass</b>	Part III can be duplicate
Schedule I	Part Ⅲ	

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Scho	1 Scholarships to Individuals	23	35,600	0	0 N/A	N/A
2						
က						
4						
2						
9						
7						
Part IV	Part IV Supplemental Information. Complete this part information	te this part to	provide the info	rmation required	in Part I, line 2, Part III,	t to provide the information required in Part I, line 2, Part III, column (b), and any other additional

Part I, Line 2--Contributions were forwarded to philanthropies of the International Chapter of the P.E.O.

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\_Ave, Des\_Moines, IA\_50312.

Schedule I (Form 990) (2012)

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

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

OMB No 1545-0047

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

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ.

P.E.O. Sisterhood VA State Chapter 54-6072508 Part YI, Lines 6-7b: The organization's members consist of the active, dues-paying members Of P.E.O. chapters within the state. Delegates from each chapter attend annual state conventions where new officers are elected by the voting members 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 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. <u>Part VI, Line 12c: Conflict of Interest policies and signature pages are distributed each </u> year to all executive board members and to any committee members having influence over financial transactions. Signature pages are collected by the state president and monitored for completion. Any conflicts of interest that arise are to be reported immediately to the affected committee/board and the remaining 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 items are not made available to the general public. <u>Part XII, Line 2b: The organization's financial statements were audited by an independent</u> accountant on a cash basis.

Name of the organization	Employer identification number
P.E.O. Sisterhood VA State Chapter	54-6072508
	~