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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Inspection

Ā	For tl	he 201	3 calendar year, or tax year beginning April 1 , 201	3, and endin	g March 31	, 20 14
_			C Name of organization		D Employer id	dentification number
В	Check if a	applicable	P.E.O. Sisterhood OH State Chapter			
<u> </u>	Addi	rėss nge	Doing Business As		31-6	6181539
3 -		ne change	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone r	number
ENVELOR		ai return	3700 Grand Ave		515	255 3153
	─-	minated	City or town, state or province, country, and ZIP or foreign postal code			
ξ⋤-	—	ninateo ended	Des Moines, IA 50312-2899		G Gross receip	pts \$ 496,295
7	retur		F Name and address of principal officer		H(a) Is this a gro	
ř L	pend				subordinate	s?
≥ -			Jean Evans - same as C above		H(b) Are all subor	
5 _		xempt st	1 100 (0)(0)	or 52	7 If "No," atta	ach a list (see instructions)
ے <u>د</u>	Webs	site. 🕨	www.peointernational.org		H(c) Group exem	nption number > 1072
<u> </u>	Form	of organ	ization Corporation Trust x Association Other ▶	L Year of	formation 1927 M	State of legal domicile IA
, J	art l	Sui	nmary			
֓֞֞֞֜֞֜֞֜֞֜֓֓֓֓֓֓֟֜֟֓֓֓֟֟֓֓֟֟֓֓֟֡֟֓֓֟֟֓֓֟֡֡֡֡֡֡֡֡֡	1	Briefly	describe the organization's mission or most significant activities Women	's membe	rship organi:	zation supporting
	ا ب		philanthropic projects for women. These ar			
0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	<u> </u>		grams and a women's college owned by the org			<u></u>
	[]		· ,		·	
ì	2		this box if the organization discontinued its operations or dispos			
Ç	3	Numb	er of voting members of the governing body (Part VI, line 1a)			3 5
9	4		er of independent voting members of the governing body (Part VI, line 1b)			
:	5	Total	number of individuals employed in calendar year 2013 (Part V, line 2a) 👝			5 1
	6		number of volunteers (estimate if necessary)			6 100
Š	∛ 7a	Total	unrelated business revenue from Part VIII, column (C), line 12			7a
			nrelated business taxable income from Form 990-T, line 34			7b
_	—	1101 01	notice business taxable income notification over 1, income 1, income	· · · · · · · ·	Prior Year	Current Year
		C	huttons and scents (Ded VIII June 4h)			
:	8 <u>و</u>		butions and grants (Part VIII, line 1h)		4/5,	970 487,482
3	9	Progra	am service revenue (Part VIII, line 2g)	······································		
į	9	Invest	ment income (Part VIII, column (A), lines 3, 4, and 70).	=D .		35 213
	11	Other	revenue (Part VIII, column (A), lines 3, 4, and 7d)	3	-1,	643 4,361
	12		revenue - add lines 8 through 11 (must equal Part VIII, dolumn (A), line 12) .	lo	474,	362 492,056
_	13		s and similar amounts paid (Part IX, column (A), lines $f B$. $f AUG$ $.f 1$ $f 2$ $.f 2$	314	276,	968 277,955
	14	Benef	its paid to or for members (Part IX, column (A), line 4)			
	4-		es, other compensation, employee benefits (Part IX, column (A) முத் டிரி	Tit Til		2,462
3	ا يا			<u> </u>		
5	iloa					
i	<u> </u>					
_	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		171,	
	18	Total	expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		448,	
	19	Rever	nue less expenses Subtract line 18 from line 12	. .	25,	710 -11,457
ة ب	ces			<u> </u>	Beginning of Current	Year End of Year
Assets or	20	Total	assets (Part X, line 16)		256,	515 245,058
Ass	21		trabilities (Part X, line 26)			
22 ÷	22		ssets or fund balances Subtract line 21 from line 20		256,	515 245,058
	art II		gnature Block	· · · · · · · ·	2507	213,030
		•——		lulas and states		of my knowledge and being it in
₹ ;;			of perjury, I declare that I have examined this return, including accompanying sched complete. Declaration of preparer (other than officer) is based on all information of wh			if my knowledge and belief, it is
		T	Grant 14 A.		01	1111
ב,			Matthy a. / Soppe		8	1114
ijSi			Signature of officer		Date	
ZΉ	ere		Kathy A. Soppe, Director of Finance/Treasu	rer		
,			Type or print name and title			
_ 		Print	Type preparer's name Preparer's signature	Date	Check	, PTIN
ر Pa(رز	id				self-employ	」"
	eparer					<u></u>
	e Only	Firm's	s name -		Firm's EIN	
		Firm's	address >		Phone no	
M	ay the	IRS dis	cuss this return with the preparer shown above? (see instructions)	<u> </u>	<u> </u>	Yes No
Fo	r Pape	erwork	Reduction Act Notice, see the separate instructions.			Form 990 (2013)

) (Revenue \$

(Expenses \$

4e Total program service expenses ▶

including grants of \$

426,845

	990 (2013)			Page 3
Part	Checklist of Required Schedules		Yes	T NI-
	le the assessment of decembed in another 501/a)/2) or 4047/a)/4) (ather there are relation)? If "//aa"		Tes	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		×
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	ļ	×
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	<u> </u>		-
•	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)			
7	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,	<u> </u>		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5	×	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>		
Ū	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		×
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		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	'		
Ü	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	Ť		
,	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		×
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	<u> </u>		
	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	<u> </u>		
9	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes,"	-	-	1
•	complete Schedule D, Part VI	11a		×
h	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	11Ь		×
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		×
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		×
۵	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
	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		×
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	×	
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		×
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		ж
	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			į
		14b	1	x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
- •	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		×
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	1	×
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			×
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			

Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government 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 or 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		×
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		ж
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 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	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 L	25b		ж
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, 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,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а		28a		x
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
~	Schedule L. Part IV.	28b		×
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			1
Ŭ	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? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
•	Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
V-	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
•••	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
04	or IV, and Part V, line 1	34		x
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
55	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			<u> </u>
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			<u> </u>
50	19? Note. All Form 990 filers are required to complete Schedule O	38	×	
	10. Note, 7 iii 1 olin 000 liioto dio toganod to complete delloddie 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			(2013)

rail				
	Check if Schedule O contains a response or note to any line in this Part V	· · ·		<u>: </u>
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Forms W-29 included in line 1a Enter -0- in 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 . 2a 2		1	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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		×
	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	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		×
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	×	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	<u> </u>	-
	Organizations that may receive deductible contributions under section 170(c).			
	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		
	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	7.		
	required to file Form 8282?	7c		
	The state of the s	70		-
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h	-	
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	/ !!		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
				
	Sponsoring organizations maintaining donor advised funds. 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		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			ŀ
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			Ì
~	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note. See the instructions for additional information the organization must report on Schedule O			
h	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			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
	If "You" has it filed a Form 720 to report those payments? If "No " provide an evaluation in Schoolide O	4.4b		

Form 990 (2013) Page 6 Part Vi Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Section A. Governing Body and Management Yes Nο 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with x 2 Did the organization delegate control over management duties customarily performed by or under the direct x supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . 3 4 4 x Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... 5 x 5 Did the organization become aware during the year of a significant diversion of the organization's assets?.... 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a x Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b x Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following x 8a 8b 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............. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No 10a x b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, x 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . x 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?. b Describe in Schedule O the process, if any, used by the organization to review this Form 990 x 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," x 12c 13 ж 13 14 Did the organization have a written document retention and destruction policy?....... 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? 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 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

Section C. Disclosure

17	List the states with	which a cor	w of this For	m 990 is r	equired to be	filed	None
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- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 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)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 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 organization ▶ Kathy A. Soppe, 3700 Grand Ave, Des Moines, IA 50312 (515)255-3153

organization's exempt status with respect to such arrangements?

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

Chapter Cabadula Casatana a namana annata ta ano long on the Dest Mi	- 1
Check if Schedule O contains a response or note to any line in this Part VII	
oncor in concedure a contains a response of note to any fine in this hart vir	- 1

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	orga	nıza	tion	co	mpen	sate	ed any current offic	er, director, or trus	stee
				((C)					
(A)	(B)		Position					(D)	(E)	(F)
Name and Title	Average	(do r	not c	heck	more	e than c	one	Reportable	Reportable	Estimated
	hours per	box,	ox, unless person is bo			ıs both	an	compensation	compensation from	amount of
	week (list any	1				tor/trust	tee)	from	related	other
	hours for	Individual trustee or director	ln.	Q	줎	en Hig	Fo	the	organizations (W-2/1099-MISC)	compensation from the
	related organizations		Ē.	Officer	y en	ploy	Former	organization (W-2/1099-MISC)	(VV-2/1099-WISC)	organization
	below dotted	ctor	Institutional	Ċ	Key employee	e 8	-	(W 271000 MIGO)		and related
	line)	l E	2		yee	ם				organizations
		e	trustee			Highest compensated employee				
			ű			ted				
(1) Jean Evans	40									
(1) Jean Evans President	-	ж		×				o	o	o
(2) Linda C. Hall	35									
Vice President	† -	ж		×				о	0	0
(3) Jan K. Knuckey	35		1							
Organizer		×		×				0	О	0
(4) Lyn R. Wilhoite	35									
Treasurer		x		×				0	0	0
(5) Sally Sieger	30									
Secretary	,	×	ļ	×	_			0	0	0
_(6)	 									
_(7)										
	-						ļ			
_ (8)										
									,	
(10)				_						
(11)	 									
(12)										
		<u> </u>	_	_	<u> </u>					
(13)	 									
(14)					-					

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do i	not ch	Pos neck ss pe	C) sition more erson tirect	and in an and in an	one an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reporta compensativ relate organizat (W-2/1099-	ible on from d tions	Es am com fro org, and	(F) stimated nount of other pensatio om the anizatio d related	f on on d
(15)						<u> </u>							
(16)													
(17)								<u> </u>					
(18)		1 											
(19)	 												
(20)	 	-											
(21)													
(22)													
(23)													
(24)										+			
(25)												·	
1b Sub-total		1											
c Total from continuation sheets to Part VII, 5 d Total (add lines 1b and 1c)	Section A												
Total number of individuals (including but not reportable compensation from the organization)	t limited to		liste	ed a			10 r	eceived more than	\$100,000	of			
reportable compensation from the organization)(I P			0			-					Yes	No
3 Did the organization list any former offi employee on line 1a? If "Yes," complete Scheo	cer, direct	or, o	r tr divid	uste lual	ee,	key	em	ployee, or highes	st compens	sated	3	_	x
4 For any individual listed on line 1a, is the	sum of re	porta	ble	con	npe	nsatio	on a	and other comper	sation from	n the			
organization and related organizations g											4		ж
5 Did any person listed on line 1a receive of for services rendered to the organization? If ")	r accrue co	ompe	nsat	ion	fro	m an	y ur	hrelated organizat	ion or indiv	/idual	5		×
Section B. Independent Contractors								Abak sasawad maa	- +b #40	0.000 -			
1 Complete this table for your five highest cor compensation from the organization Report year												:	
(A) Name and business add	dress				-			(B) Description of se	ervices	Co	(C)		
None					-		1	· · · · · · · · · · · · · · · · · · ·					
							+						
							-	 					
2 Total number of independent contractor received more than \$100,000 of compensations.						ited	to	those listed abo	ove) who				
JSA 3E1050 1 000	on nom the	orga	111128	1001	· P			U			Form	990	(2013

Part VIII Statement of Revenue

		Check if Schedule O contains a respo	nse or note to an	y line in this Part V	/III		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) 1e	. 200,313				,
ontributio nd Other S	f g	All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f	<u></u>	. 487,482			_
u			Business Code				
Program Service Revenue	2a b c d						
a.	е		ļ				
Progr	f g	All other program service revenue Total. Add lines 2a-2f					
	3	Investment income (including dividends, inter other similar amounts)	▶	213	213		
	5	Royalties · · · · · · · · · · · · · · · · · · ·	▶ (II) Personal				-
	6a b	Gross rents					
	c d	Rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(II) Other				,
	b	Less cost or other basis and sales expenses					
	c d	Gain or (loss)			-		
ne	8a	Gross income from fundraising					
Other Revenue		events (not including \$ of contributions reported on line 1c) See Part IV, line 18					
ther	b c	Less direct expenses	L			-	
0		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 b Net income or (loss) from sales of inventory.	4,239	4,361	4,361		
		Miscellaneous Revenue	Business Code				
	11a		-				-
	b						
	С						-
	d	All other revenue					-
	е 12	Total. Add lines 11a-11d		492,056	4,574		
			<u> </u>		-/-/-		1

Part IX Statement of Functional Expenses

Section 5	01(c)(3)	and 501(c)(4)	organizations mus	t complete all columns	All other organizations mu	st complete column (A)
-----------	----------	---------------	-------------------	------------------------	----------------------------	------------------------

Do	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8b,	9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21 .	277,955	277,955		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
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	2,385	795	1,590	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				· · · · · · · · · · · · · · · · · · ·
10	Payroll taxes	77	26	51	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
	Accounting	3,875		3,875	
d	Lobbying				_
	Professional fundraising services See Part IV, line 17.				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
	Advertising and promotion				
	Office expenses	500			500
14	Information technology	300			300
	Royalties				
	Occupancy	55,438	18,479	36,959	
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	29,457	9,512	19,024	921
	Interest				
21	Payments to affiliates	113,705	113,705		
22	Depreciation, depletion, and amortization				
23	Insurance	758		758	
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)				
а	Operating Expense	19,363	6,373	12,745	245
b					
C					
d					
	All other expenses	503,513	426,845	75,002	1,666
	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	303,313	120,045	75,002	1,000
~~	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Form 990 (2013) Page 11 **Balance Sheet** Part X (B) (A) End of year Beginning of year 135,403 1 120,736 Savings and temporary cash investments....... 121,112 124,322 2 2 Pledges and grants receivable, net 3 3 Accounts receivable, net 4 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 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 Notes and loans receivable, net 7 8 9 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10c Investments - publicly traded securities 11 11 12 12 13 13 14 14 15 15 256.515 16 245,058 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 18 18 19 19 Deferred revenue 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and 22

disqualified persons Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties

Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X

Total liabilities. Add lines 17 through 25..........

Organizations that follow SFAS 117 (ASC 958), check here
and

Unrestricted net assets

Organizations that do not follow SFAS 117 (ASC 958), check here 🕨 🕱 and

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances.........

complete lines 27 through 29, and lines 33 and 34.

complete lines 30 through 34.

245,058 Form 990 (2013)

245,058

245,058

23

24

25

26

27

28

29

30

31

256,515 32

256,515 33

256,515 34

24

25

26

27

28

31

32

33

34

Balances

Fund 29

5

Assets 30

Net

245,058

Form 990 (2013)

10

Part XII Financial Statements and Reporting x Yes No Accounting method used to prepare the Form 990 x Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a x If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 2b x If "Yes." check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both x | Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight 2c x of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in 3a x b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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

tion 527 20**13**

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service 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.

► See separate instructions. Information about Schedule C (Form 990 or 990-EZ) and its

Internal Revenue Service instructions is at www.irs.gov/form990.

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) orga	anizations Complete Part III	•		
Name	e of organization			Employer identi	fication number
	E.O. Sisterhood OH			31-61815	
Pa	rt I-A Complete if the c	organization is exempt under	section 501(c) or i	s a section 527 organ	nization.
1	Provide a description of the	organization's direct and indirect p	olitical campaign ac	tivities in Part IV	
2	Political expenditures			▶ \$	
3	Volunteer hours			<u></u>	
Pai		organization is exempt under s		LE LE	
1		cise tax incurred by the organizatio			
2	•	cise tax incurred by organization m	•		
3	•	a section 4955 tax, did it file Form	•		
					Yes No
_	If "Yes," describe in Part IV				
Pa		organization is exempt under			5).
1		expended by the filing organization			
2		ng organization's funds contributed			
		es			
3		enditures Add lines 1 and 2 En			
4	Did the filing organization file	e Form 1120-POL for this year?	/FINIX -5 -04-		Yes No
5	•	and employer identification numb s For each organization listed, en	, ,		_
		tributions received that were prom			
		nd or a political action committee (I			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(4, 112.112	(=,-	\-,	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization If
					none, enter -0-
(4)					
(1)					
(2)					
(2)					
/2\	· · · · · · · · · · · · · · · · · · ·				
(3)			}		
(4)					
(7)			1		
(5)					
(~)			1		
(6)					
,0,		}	1		

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

Schedule C (Form 990 or 990-EZ) 2013

Sche	edule C (Form 990 or 990-EZ) 2013					Page 2	
Pa	rt II-A Complete if the orga section 501(h)).	nization is exen	npt under sectio	n 501(c)(3) and	filed Form 5768 (ele	ction under	
A	Check ▶ if the filing organi name, address, Ell					roup member's	
В	Check ▶ if the filing organi	zation checked l	oox A and "limited	control" provision	ons apply		
	Limits o (The term "expenditur	n Lobbying Expendes" means amou		.)	(a) Filing organization's totals	(b) Affiliated group totals	
1a	Total lobbying expenditures to i	nfluence public op	inion (grass roots lo	obbying)			
b							
c	Total lobbying expenditures (ad	•	• •				
d	Other exempt purpose expendit						
е	Total exempt purpose expendit						
f	Lobbying nontaxable amount						
	columns						
	If the amount on line 1e, column (a)	or (b) is: The lobbying	g nontaxable amount	is:			
	Not over \$500,000		amount on line 1e				
	Over \$500,000 but not over \$1,000,0	000 \$100,000 pl	us 15% of the excess	over \$500,000			
	Over \$1,000,000 but not over \$1,500	,000 \$175,000 pl	us 10% of the excess	over \$1,000,000			
	Over \$1,500,000 but not over \$17,00	0,000 \$225,000 pl	us 5% of the excess	over \$1,500,000			
	Over \$17,000,000	\$1,000,000					
g	Grassroots nontaxable amount	(enter 25% of line	1f)				
h						·	
i	Subtract line 1f from line 1c If a						
j	If there is an amount other th						
	reporting section 4911 tax for t	his year?				Yes No	
		A.Year Aver	aging Period Unde	r Section 501(h)			
	(Some organization				complete all of the fiv	ıe.	
	(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.)						
		Lobbying Expe	nditures During 4-Y	ear Averaging Pe	riod		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total	
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column (e))						
С	Total lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2013

d Grassroots nontaxable amount

e Grassroots ceiling amount
(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Par	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	file	d For	m 57	68		
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a	1)		(b)	
	ription 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	1		ı			
	referendum, through the use of			l			
a	Volunteers?			!			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
c d	Media advertisements? Mailings to members, legislators, or the public?						
e	Publications, or published or broadcast statements?						
f	Publications, or published or broadcast statements? 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?						
i	Other activities?						
j	Total Add lines 1c through 1i						
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b	If "Yes," enter the amount of any tax incurred under section 4912						
С	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?						
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(501(c)(6).	c)(5)	, or s	ectio	n		
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1	x	—
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	1	lone.		2	×	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(L	×
ı a	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (answered "Yes."					3, is	;
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou political expenses for which the section 527(f) tax was paid).						
а	Current year			2a			
þ	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			3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion		1				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo and political expenditure next year?			4			
5	Taxable amount of lobbying and political expenditures (see instructions)	• • •	• • •	5			
	t IV Supplemental Information	• •					
Prov	ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated g II-B, line 1. Also, complete this part for any additional information	roup	list), F	art II-	A, line :	2, and	t
				- -			
				- -			

Schedule C (F	orm 990 or 990-EZ) 2013	Page 4
Part IV	orm 990 or 990-EZ) 2013 Supplemental Information (continued)	···
	"	
		···
	· · · · · · · · · · · · · · · · · · ·	
		
-		

SCHEDULE D (Form 990)

3E1268 2 000

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

Internal Revenue Service ► Info
Name of the organization

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspect Employer identification number

OMB № 1545-0047

Open to Public

31-6181539 P.E.O. Sisterhood OH State Chapter Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ _______ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2013

Par	Organizations Maintaining Col	lections of	Art, Hist	orical T	reasur	es,	or Oth	ner Simila	ar Asse	ts (con	tinue	<u>a) </u>
3	Using the organization's acquisition, according to the organization of the collection items (check all that apply)	ession, and o	other recor	ds, chec	k any c	of the	follow	ring that a	re a sigr	iificant i	ise of	fıts
а	Public exhibition		d [Loan	or exch	ange	prograi	ms				
b	Scholarly research		e –	-		_	_					
c	Preservation for future generations		• ∟									
4	Provide a description of the organization	's collections	s and evol	an how	hev fu	rther	the or	nanization'	s evemni	nurnos	e in l	Part
7	XIII	3 Conections	aliu expie	11044	iney lu	uici	the or	gariizationi	s exemp	. parpos	C 111 1	ait
-			dk	8 h 8								
5	During the year, did the organization solici								_	¬ v		l Na
	assets to be sold to raise funds rather than									Yes	<u> </u>	No
Fair	or reported an amount on Form			ie organ	ızallon	ans	werea	res to r			V, III	e 9,
	Is the organization an agent, trustee, custo included on Form 990, Part X?									Yes] No
b	in res, explain the arrangement in rait X	in and comp	iete the ion	owing tat	iie			Δ	mount			-
_	Beginning balance					4.		^	mount			
C	Additions during the year											
d e	Distributions during the year					-						 -
f	Ending balance					-						
	Did the organization include an amount or									1		
	If "Yes," explain the arrangement in Part X								· · · · L	Yes		No
										• • • •		L
Par		r trie organi Current year	(b) Prio				s back	(d) Three y		(e) Four	voom b	
1a	Beginning of year balance	Julient year	(b) F110	i year	(6) 1%	o year	S Dack	(u) Three y	ears back	(e) Four	years L	Jack
b	Contributions											
	Net investment earnings, gains,											
·	and losses											
d	Grants or scholarships											
	Other expenditures for facilities											
е	and programs											
	Administrative expenses											
	·											
g	End of year balance			0 - 4-		- (-)	f l.t					
2 a	Provide the estimated percentage of the c Board designated or quasi-endowment	urrent year e	end balance %	e (line 1g,	column	1 (a))	neid as					
		,										
	Temporarily restricted endowment	% %										
C	The percentages in lines 2a, 2b, and 2c sh		000/									
2-	Are there endowment funds not in the pos	-		tion that	ara hal	اما مما	4 0000	vatorad for	tho			
Ja	•	556551011 01 11	ne organiza	illon mat	are ne	u and	auiiiii	iistered ioi	uie	Γ,		
	organization by										Yes	No
	(i) unrelated organizations									3a(i)		
	(ii) related organizations									3a(ii)	-	
	· · · · · · · · · · · · · · · · · · ·					• • •			• • • •	3b		
4	Describe in Part XIII the intended uses of t											
Par	t VI Land, Buildings, and Equipmen Complete if the organization ar	t. Iswered "Ye	es" to Forn	n 990 P	art IV	line 1	l1a S	ee Form 9	90 Parl	X line	10	
	Description of property	(a) Cost or	r other basis	(b) Cost	or other ba	asıs	(c) Acc	cumulated	(0	l) Book val	ue	
	1		stment)	(0	ther)		depr	eciation	···-			
	Land	L										
	Buildings			<u> </u>								
	Leasehold improvements											
,	Equipment			<u> </u>	.	\rightarrow						
	Other			<u> </u>		L						
Tota	l. Add lines 1a through 1e (Column (d) mu	ist equal For	m 990, Part	X, columi	า (B), lır	ne 10	(c))	<u> ▶</u>				

Part VII		"Yes" to Form 990	, Part IV, line 11b. See Form 990, Part X, line	<u>-</u> 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	, 12.
(1) Financia	al derivatives			
	-held equity interests			_
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total (Column	n (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments - Program Related.			
	Complete if the organization answered	"Yes" to Form 990	, Part IV, line 11c See Form 990, Part X, line	1 3
	(a) Description of investment	(b) Book value	(c) Method of valuation	
			Cost or end-of-year market value	
(1)				
_(2)				
(3)				
(4)				
(5)				·
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets.		Dod IV line 44d Coe Form 000 Bod V line	- 15
			, Part IV, line 11d See Form 990, Part X, line	
(1)	(a)	Description	(b) Book	value
(1)				
(2)				
(4)				
(5)				
(6)				
(7)				
(8)	 			
(9)				
	umn (b) must equal Form 990, Part X, col (B) li	ine 15)	•	
Part X	Other Liabilities.			
		I "Yes" to Form 990	, Part IV, line 11e or 11f See Form 990, Part	t X,
1.	(a) Description of liability	(b) Book valu	e	
(1) Feder	ral income taxes	_		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col (B) line 25)	•		

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

1	Complete if the organization answered "Yes" to Form 990, Part IV				
		, 11116	, 12u		400 056
	Total revenue, gains, and other support per audited financial statements			. 1 -	492,056
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		ı		
а	Net unrealized gains on investments	2a		_	
b	Donated services and use of facilities	2b		_	
С	Recoveries of prior year grants	2c		_	
d	Other (Describe in Part XIII)	2d	<u> </u>	_	
е	Add lines 2a through 2d			. 2e	
3	Subtract line 2e from line 1			. 3	492,056
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b]		
b	Other (Describe in Part XIII)	4b			
C	Add lines 4a and 4b			. 4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			. 5	492,056
Part	XII Reconciliation of Expenses per Audited Financial Statements V	Vith E	xpenses per Re	turn.	
	Complete if the organization answered "Yes" to Form 990, Part IV	/, line	12a		
1	Total expenses and losses per audited financial statements			1	503,513
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			•	
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII)				
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	503,513
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	i	i	· •	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
	Add lines 4a and 4b	45	<u> </u>	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				503,513
	XIII Supplemental Information.			·-	303,323
Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid		Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part I	V, lines 1b and 2b, I	Part V, line	

Schedule D (F	rm 990) 2013 Pa	ge 5
Part XIII	Supplemental Information (continued)	

SCHEDULE 1 (Form 990) Department of the Treasury

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

OMB No 1545-0047	2013

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Employer identification number

31-6181539

Internal Revenue Service	► Information about Schedule I (Form 990) a	™
Name of the organization		

	sistance
State Chapter	inte and Aco
d OH State	tion on Gra
Sisterhood OH	General Information on Grants and Assistance
.E.O. Si	مين ريون

× 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?

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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	(p) 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)	65,422	0			GenSupp/Schol
(2) P.E.O. Educational Loan Fund Des Moines, IA 50312	426078059	501(c)(3)	28,954	0			Educ. Loans
(3) P.E.O. Int'l Peace Scholarshp Des Moines, IA 50312	426078058	501(c)(3)	22,984	0			Scholarships
(4) P.E.O. Program for Contin Ed Des Moines, IA 50312	237405311	501(c)(3)	37,223	0			Educ. Grants
(5) P.E.O. Scholar Awards Des Moines, IA 50312	421379026	501(c)(3)	26,502	0			Educ. Awards
(6) P.E.O. STAR Scholarship Des Moines, IA 50312	300583651	501(c)(3)	30,050	0			Scholarships
(7) P.E.O. Foundation Des Moines, IA 50312	426094564	501(c)(3)	66,820	0			Schol/Grants
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	overnment or	ganizations liste	ed in the line 1 table				7

For Paperwork Reduction Act Notice, see the Instructions for Form 990. 3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2013)

Schedule I (Schedule I (Form 990) (2013)
Part III	Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
	Part III can be duplicated if additional space is needed

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
2						
က						
4					;	
5						
9						
7						
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	the informati	on required in P	art I, line 2, Part I	II, column (b), and any o	ther additional information

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

50312. 3700 Grand Ave, Des Moines, IA

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

2013
Open to Public Inspection

Name of the organization

P.E.O. Sisterhood OH State Chapter

31-6181539

Part VI, 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 Ohio 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 signature pages are distributed each
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, conflicts of interest policy and financial
statements are available to members upon request. These items are not made available
to the general public.
Part XII, Line 2b: The organization's financial statements were audited by an independent
accountant on a cash basis.

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Name of the		Employer identification number	
P.E.O.	Sisterhood OH State Chapter	31-6181539	
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